

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) Post Office Box 789  
 Check if different than previously reported. (ACC)  
Salem OR 97308

2. **FEC IDENTIFICATION NUMBER** C00153031  
**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 Quarterly 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 (12G)  
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 11 01 2003 through 11 30 2003

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 Charles S. Oakes

Signature of Treasurer Electronically Filed by Charles S. Oakes Date 03 14 2008

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

Office Use Only									
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**FEC FORM 3X**  
(Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Oregon Republican Party

Report Covering the Period: From: 

M	M
1	1

D	D
0	1

Y	Y	Y	Y
2	0	0	3

 To: 

M	M
1	1

D	D
3	0

Y	Y	Y	Y
2	0	0	3

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>3</td></tr></table>	Y	Y	Y	Y	2	0	0	3		9593.97
Y	Y	Y	Y							
2	0	0	3							
(b) Cash on Hand at Beginning of Reporting Period .....	25512.22									
(c) Total Receipts (from Line 19) .....	32119.34	526944.25								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	57631.56	536538.22								
7. Total Disbursements (from Line 31) .....	43042.67	521949.33								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	14588.89	14588.89								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	119700.23									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
Oregon Republican Party

Report Covering the Period: From: 

M	M
1	1

D	D
0	1

Y	Y	Y	Y
2	0	0	3

 To: 

M	M
1	1

D	D
3	0

Y	Y	Y	Y
2	0	0	3

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	15150.00	210763.68
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	16969.34	225080.74
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	32119.34	435844.42
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	1793.50
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	32119.34	437637.92
12. Transfers From Affiliated/Other Party Committees .....	0.00	15000.00
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	0.00
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	151.93
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	74154.40
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	74154.40
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	32119.34	526944.25
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	32119.34	452789.85

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	4212.36	93005.56
(ii) Non-Federal Share.....	7488.63	165343.07
(b) Other Federal Operating Expenditures.....	12631.50	156695.59
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	24332.49	415044.22
22. Transfers to Affiliated/Other Party Committees.....	0.00	250.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	100.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	100.00
29. Other Disbursements.....	3200.00	26496.80
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share.....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds.....	15510.18	80058.31
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	15510.18	80058.31
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	43042.67	521949.33
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	35554.04	356606.26

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	32119.34	437637.92
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	100.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	32119.34	437537.92
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	16843.86	249701.15
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	16843.86	249701.15

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 35

(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

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

**A.**

Full Name (Last, First, Middle Initial)  
Mr. & Mrs. Ed Anderson

Mailing Address 621 Spyglass Dr

City Eugene State OR Zip Code 97401-2090

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 ▼ 200.00

Date of Receipt MM / DD / YYYY  
11 / 24 / 2003

**Transaction ID:** C68693

Amount of Each Receipt this Period 100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Benjamin Boedigheimer

Mailing Address 7872 St Charles St NE

City Keizer State OR Zip Code 97303-2486

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 ▼ 200.00

Date of Receipt MM / DD / YYYY  
11 / 24 / 2003

**Transaction ID:** C68727

Amount of Each Receipt this Period 100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Rick Bosch

Mailing Address 8780 SW Bomar Ct

City Portland State OR Zip Code 97223

FEC ID number of contributing federal political committee. C

Name of Employer Heinz Mechanical Occupation Contractor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY  
11 / 21 / 2003

**Transaction ID:** C68687

Amount of Each Receipt this Period 500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... 700.00

**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 7 / 35  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<p><b>A.</b> Full Name (Last, First, Middle Initial) Ruby Boyd</p> <p>Mailing Address 1245 SW 3rd Ave</p> <p>City State Zip Code Ontario OR 97914</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Retired      Occupation Retired</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">200.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 1 / 2 0 / 2 0 0 3</span></p> <p><b>Transaction ID:</b> C68668</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">100.00</span></p> <p>Receipt</p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Ruby Boyd</p> <p>Mailing Address 1245 SW 3rd Ave</p> <p>City State Zip Code Ontario OR 97914</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Retired      Occupation Retired</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">300.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 1 / 2 4 / 2 0 0 3</span></p> <p><b>Transaction ID:</b> C68708</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">100.00</span></p> <p>Receipt</p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Carolyn Brown</p> <p>Mailing Address 32724 Berlin Rd</p> <p>City State Zip Code Lebanon OR 97355</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Retired      Occupation Retired</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">300.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 1 / 1 7 / 2 0 0 3</span></p> <p><b>Transaction ID:</b> C68607</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">100.00</span></p> <p>Receipt</p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">300.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

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

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

FOR LINE NUMBER: PAGE 8 / 35  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

**A.** Full Name (Last, First, Middle Initial)  
-- REMOVED -- Mr. Cliff Bryden

Mailing Address 1058 S.E. Kane St.

City State Zip Code  
Roseburg OR 97470-4803

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

Name of Employer Retired      Occupation Retired

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

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 0 4 / 2 0 0 3

**Transaction ID:** C68230

Amount of Each Receipt this Period  
200.00

Receipt

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

Mailing Address 247 Pine Lake Dr

City State Zip Code  
Eagle Point OR 97524

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

Name of Employer Retired      Occupation Retired

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      250.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 0 3 / 2 0 0 3

**Transaction ID:** C68188

Amount of Each Receipt this Period  
50.00

Receipt

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

Mailing Address 1915 Westlake Loop

City State Zip Code  
Newberg OR 97132-1500

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

Name of Employer Retired      Occupation Retired

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      650.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 2 5 / 2 0 0 3

**Transaction ID:** C68778

Amount of Each Receipt this Period  
100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **350.00**

**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 9 / 35  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

**A.** Full Name (Last, First, Middle Initial)  
Idelle Collins

Mailing Address PO Box 849

City State Zip Code  
Shady Cove OR 97539

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

Name of Employer Retired      Occupation Retired

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      1000.00

Date of Receipt  

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

**Transaction ID:** C68647

Amount of Each Receipt this Period  
1000.00

Receipt

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

Mailing Address 758 NE 7th Street

City State Zip Code  
Grants Pass OR 97526-1633

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

Name of Employer Retired      Occupation Retired

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

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	8	/	2	0	0	3

**Transaction ID:** C68872

Amount of Each Receipt this Period  
25.00

Receipt

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

Mailing Address 420 NE Hacienda Place

City State Zip Code  
Gresham OR 97030-6136

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

Name of Employer Retired      Occupation Retired

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      225.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	5	/	2	0	0	3

**Transaction ID:** C68786

Amount of Each Receipt this Period  
100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1125.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 35  
(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

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

**A.**

Full Name (Last, First, Middle Initial)  
Lela Fox

Mailing Address PO Box 3601

City Hillsboro State OR Zip Code 97123

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

Name of Employer Homemaker Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 11 / 25 / 2003

Transaction ID: C68776

Amount of Each Receipt this Period 100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Larry Frager

Mailing Address 720 SW Washington #310

City Portland State OR Zip Code 97205

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

Name of Employer Hateef Management Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 17 / 2003

Transaction ID: C68614

Amount of Each Receipt this Period 350.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Louis H. Gross

Mailing Address 1 Towers Ln Apt 2017

City Mount Angel State OR Zip Code 97362-2002

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 ▼ 220.00

Date of Receipt 11 / 25 / 2003

Transaction ID: C68766

Amount of Each Receipt this Period 25.00

Receipt

**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: PAGE 11 / 35  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

**A.** Full Name (Last, First, Middle Initial)  
Mr. James Hill, Jr.  
Mailing Address PO Box 92  
City Arch Cape State OR Zip Code 97102  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00  
Date of Receipt 11 / 25 / 2003  
Transaction ID: C68758  
Amount of Each Receipt this Period 100.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
Mr. Eliot H. Jenkins  
Mailing Address 13169 SE River Rd Apt 307T  
City Portland State OR Zip Code 97222-9789  
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 ▼ 1150.00  
Date of Receipt 11 / 25 / 2003  
Transaction ID: C68798  
Amount of Each Receipt this Period 50.00  
Receipt

**C.** Full Name (Last, First, Middle Initial)  
Mr. Lawrence Lahm  
Mailing Address 3855 NW Van Buren Ave  
City Corvallis State OR Zip Code 97330-4920  
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 ▼ 500.00  
Date of Receipt 11 / 25 / 2003  
Transaction ID: C68795  
Amount of Each Receipt this Period 500.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 650.00  
**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 12 / 35  
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

**A.**

Full Name (Last, First, Middle Initial)  
Darrel Morgan

Mailing Address 1804 Rainier Dr

City State Zip Code  
Monmouth OR 97361

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

Name of Employer Self Occupation Liquor Store Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 3

Transaction ID: C68529

Amount of Each Receipt this Period  
1000.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Mr. & Mrs. Gerald S. Moshofsky

Mailing Address 1240 E 22nd Ave

City State Zip Code  
Eugene OR 97403-1509

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

Name of Employer Newood Display Fixtures Occupation Pres. Fixture Co.

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 3

Transaction ID: C68393

Amount of Each Receipt this Period  
100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Mrs. Preston Orem

Mailing Address 3150 SW View Place

City State Zip Code  
Portland OR 97201-1862

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 ▼ 200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 5 / 2 0 0 3

Transaction ID: C68325

Amount of Each Receipt this Period  
100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1200.00**

**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 13 / 35  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

**A.** Full Name (Last, First, Middle Initial)  
Chester J. Prior

Mailing Address 32327 Oregon Trail Rd

City State Zip Code  
Echo OR 97826-9001

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

Name of Employer Occupation  
Eagle Ranch Farmer

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 7 / 2 0 0 3

**Transaction ID:** C68487

Amount of Each Receipt this Period  
1000.00

In-Kind  
flying Chairman to Central com

**B.** Full Name (Last, First, Middle Initial)  
Mr. Jerome C. Routson

Mailing Address 7665 Clear Creek Road

City State Zip Code  
Parkdale OR 97041-9703

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

Name of Employer Occupation  
Self Farmer

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 3 / 2 0 0 3

**Transaction ID:** C68200

Amount of Each Receipt this Period  
50.00

Receipt

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

Mailing Address 7665 Clear Creek Road

City State Zip Code  
Parkdale OR 97041-9703

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

Name of Employer Occupation  
Self Farmer

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 2 5 / 2 0 0 3

**Transaction ID:** C68759

Amount of Each Receipt this Period  
100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1150.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 35  
(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

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

**A.**

Full Name (Last, First, Middle Initial)  
Mr. James Russell

Mailing Address 1820 NE 104th Ave #66

City State Zip Code  
Portland OR 97220

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 ▼ 700.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 2 4 / 2 0 0 3

Transaction ID: C68722

Amount of Each Receipt this Period  
200.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Rex R. Scoggins

Mailing Address 840 Highland Ave

City State Zip Code  
Brookings OR 97415-9733

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

Name of Employer C & K Market Inc. Occupation Accountant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 2 5 / 2 0 0 3

Transaction ID: C68796

Amount of Each Receipt this Period  
100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Lloyd W. Selfridge

Mailing Address 8300 SW Barnes Rd #117

City State Zip Code  
Portland OR 97225-7318

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 ▼ 200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 3 / 2 0 0 3

Transaction ID: C68229

Amount of Each Receipt this Period  
100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **400.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 35  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

**A.**

Full Name (Last, First, Middle Initial)  
Mrs. Stewart Shelk

Mailing Address 850 E 4th St

City State Zip Code  
Prineville OR 97754

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 ▼ 200.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 0 4 / 2 0 0 3

**Transaction ID:** C68235

Amount of Each Receipt this Period  
100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
James Smith

Mailing Address 220 NW 2nd #950

City State Zip Code  
Portland OR 97209

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

Name of Employer Occupation  
Phillips Securities Investor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 0 1 / 2 0 0 3

**Transaction ID:** C69291

Amount of Each Receipt this Period  
250.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Gordon Sondland

Mailing Address 420 NW 11th Ave Ste 822

City State Zip Code  
Portland OR 97209-2957

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

Name of Employer Occupation  
Aspen Investments Investor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 2 4 / 2 0 0 3

**Transaction ID:** C68732

Amount of Each Receipt this Period  
1000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1350.00

**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 / 35  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

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

Mailing Address 8711 NW Terrace View Ct

City State Zip Code  
Portland OR 97229

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 ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
11 / 20 / 2003

**Transaction ID:** C68665

Amount of Each Receipt this Period  
1000.00

Receipt

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

Mailing Address 9650 SW Hardebeck Rd

City State Zip Code  
Gaston OR 97119-9017

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

Name of Employer Self Occupation Farmer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5150.00

Date of Receipt  
MM / DD / YYYY  
11 / 14 / 2003

**Transaction ID:** C68579

Amount of Each Receipt this Period  
5000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
DECEASED Mr. John E. Welch

Mailing Address 894 Cypress Point Lp.

City State Zip Code  
Ashland OR 97520-3752

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 ▼ 200.00

Date of Receipt  
MM / DD / YYYY  
11 / 28 / 2003

**Transaction ID:** C68871

Amount of Each Receipt this Period  
100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **6100.00**

**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 / 35  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

**A.** Full Name (Last, First, Middle Initial)  
Ms. Nancy J. Wendt

Mailing Address 826 Loma Linda Dr.

City State Zip Code  
Klamath Falls OR 97601

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
11 / 13 / 2003

**Transaction ID:** C68553

Amount of Each Receipt this Period  
300.00

Receipt

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

Mailing Address 2650 Commercial St SE  
PO Box 3080

City State Zip Code  
Salem OR 97302-4451

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

Name of Employer Occupation  
Whitnell Dodge Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
11 / 24 / 2003

**Transaction ID:** C68731

Amount of Each Receipt this Period  
1000.00

Receipt

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

Mailing Address 1115 Barrington Cir

City State Zip Code  
Ashland OR 97520-9551

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

Name of Employer Occupation  
Self Real Estate Broker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt  
MM / DD / YYYY  
11 / 05 / 2003

**Transaction ID:** C68300

Amount of Each Receipt this Period  
50.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1350.00

**TOTAL** This Period (last page this line number only) ..... ► 15150.00

# 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)  
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)  
US Postal Service

Transaction ID: E8982

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	5		2	0	0	3

Mailing Address Liberty St

Amount of Each Disbursement this Period

37.00
-------

City Salem State OR Zip Code 97308-

Purpose of Disbursement fundraising postage

Category/Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

FUNDRAISING POSTAGE

State: District:

B.

Full Name (Last, First, Middle Initial)  
Direct Mail Systems, Inc

Transaction ID: E8973

Date of Disbursement

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

Mailing Address 12450 Automobile Boulevard

Amount of Each Disbursement this Period

1402.50
---------

City Clearwater State FL Zip Code 34622-

Purpose of Disbursement direct mail

Category/Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

DIRECT MAIL

State: District:

C.

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

Transaction ID: E8953

Date of Disbursement

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

Mailing Address 7320 N Dreamy Draw Dr

Amount of Each Disbursement this Period

3984.00
---------

City Phoenix State AZ Zip Code 85020-5212

Purpose of Disbursement telemarketing

Category/Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

TELEMARKETING

State: District:

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

5423.50
---------

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

--

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 19 / 35

<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)  
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: E8974 Date of Disbursement
	Mailing Address 7320 N Dreamy Draw Dr	<input type="text" value="11"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="03"/>
	City Phoenix State AZ Zip Code 85020-5212	Amount of Each Disbursement this Period
	Purpose of Disbursement telemarketing	<input type="text" value="1943.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		TELEMARKETING

B.	Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: E8981 Date of Disbursement
	Mailing Address 7320 N Dreamy Draw Dr	<input type="text" value="11"/> <input type="text" value="24"/> / <input type="text" value="20"/> <input type="text" value="03"/>
	City Phoenix State AZ Zip Code 85020-5212	Amount of Each Disbursement this Period
	Purpose of Disbursement telemarketing	<input type="text" value="2579.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		TELEMARKETING

C.	Full Name (Last, First, Middle Initial) Chester Prior	Transaction ID: C684871K Date of Disbursement
	Mailing Address 32327 Oregon Trail Rd	<input type="text" value="11"/> <input type="text" value="07"/> / <input type="text" value="20"/> <input type="text" value="03"/>
	City Echo State OR Zip Code 97826-9001	Amount of Each Disbursement this Period
	Purpose of Disbursement flying Chairman to Central com	<input type="text" value="1000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		IN KIND: FLYING CHAIRMAN TO CENTRAL COM

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="5522.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 35

<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)  
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)  
SC Networking

Mailing Address PO Box 1109

City Molalla State OR Zip Code 97038-

Purpose of Disbursement  
website work/OGOP

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: E8954

Date of Disbursement

11 / 07 / 2003

Amount of Each Disbursement this Period

1686.00

WEBSITE WORK/OGOP

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

1686.00

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

12631.50

**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)

PAGE 21 / 35

<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)  
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)  
Oregon Republican Party

Transaction ID: E8971

Date of Disbursement

<sup>M</sup> 1	<sup>M</sup> /	<sup>D</sup> 25	<sup>D</sup> /	<sup>Y</sup> 2	<sup>Y</sup> 0	<sup>Y</sup> 0	<sup>Y</sup> 3
----------------	----------------	-----------------	----------------	----------------	----------------	----------------	----------------

Mailing Address Key Bank NonFederal Acct  
1500 Edgewater St NW

City Salem State OR Zip Code 97302-

Amount of Each Disbursement this Period

3200.00
---------

Purpose of Disbursement  
TRANSFER TO NON-FED ACCT

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

3200.00

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

3200.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 22 / 35

<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

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) Michelle Ashenfelter	Transaction ID: E8947 Date of Disbursement 11 / 03 / 2003
	Mailing Address 2012 NE 15th	Amount of Each Disbursement this Period 1554.80
	City Portland State OR Zip Code 97212-	
	Purpose of Disbursement FEA payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA PAYROLL

B.	Full Name (Last, First, Middle Initial) Michelle Ashenfelter	Transaction ID: E8975 Date of Disbursement 11 / 14 / 2003
	Mailing Address 2012 NE 15th	Amount of Each Disbursement this Period 1554.79
	City Portland State OR Zip Code 97212-	
	Purpose of Disbursement FEA payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA PAYROLL

C.	Full Name (Last, First, Middle Initial) Sandy Howard	Transaction ID: E8945 Date of Disbursement 11 / 03 / 2003
	Mailing Address PO Box 1083	Amount of Each Disbursement this Period 1145.68
	City Salem State OR Zip Code 97308-	
	Purpose of Disbursement FEA payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA PAYROLL

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	4255.27
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 23 / 35

<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

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) Sandy Howard	Transaction ID: E8977 Date of Disbursement 11 / 14 / 2003
	Mailing Address PO Box 1083	Amount of Each Disbursement this Period 1145.67
	City Salem State OR Zip Code 97308-	
	Purpose of Disbursement FEA payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA PAYROLL

B.	Full Name (Last, First, Middle Initial) Key Bank**	Transaction ID: E8979 Date of Disbursement 11 / 14 / 2003
	Mailing Address 1500 Edgewater St NW	Amount of Each Disbursement this Period 4203.74
	City Salem State OR Zip Code 97304-	
	Purpose of Disbursement FEA payroll tax Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA PAYROLL TAX

C.	Full Name (Last, First, Middle Initial) Amy Langdon	Transaction ID: E8946 Date of Disbursement 11 / 03 / 2003
	Mailing Address 2830 Foxhaven Dr SE	Amount of Each Disbursement this Period 2059.85
	City Salem State OR Zip Code 97306-2526	
	Purpose of Disbursement FEA payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA PAYROLL

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	7409.26
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 24 / 35

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

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

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<p><b>A.</b> Full Name (Last, First, Middle Initial) Amy Langdon</p> <p>Mailing Address 2830 Foxhaven Dr SE</p> <p>City Salem State OR Zip Code 97306-2526</p> <p>Purpose of Disbursement FEA payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> E8976 <b>Date of Disbursement</b> 11 / 14 / 2003</p> <p>Amount of Each Disbursement this Period 2059.87</p> <p>FEA PAYROLL</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Oregon Department of Revenue</p> <p>Mailing Address PO Box 14800</p> <p>City Salem State OR Zip Code 97309-</p> <p>Purpose of Disbursement FEA payroll tax</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> E8943 <b>Date of Disbursement</b> 11 / 03 / 2003</p> <p>Amount of Each Disbursement this Period 381.89</p> <p>FEA PAYROLL TAX</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Oregon Department of Revenue</p> <p>Mailing Address PO Box 14800</p> <p>City Salem State OR Zip Code 97309-</p> <p>Purpose of Disbursement FEA payroll tax</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> E8978 <b>Date of Disbursement</b> 11 / 14 / 2003</p> <p>Amount of Each Disbursement this Period 381.89</p> <p>FEA PAYROLL TAX</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2823.65
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 25 / 35

<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

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)  
Oregon Department of Revenue

Mailing Address PO Box 14800

City Salem State OR Zip Code 97309-

Purpose of Disbursement  
FEA payroll tax

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: E8980

Date of Disbursement

11 / 14 / 2003

Amount of Each Disbursement this Period

1022.00

FEA PAYROLL TAX

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

1022.00

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

15510.18

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 26 / 35
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Advanced Office Systems	Nature of Debt (Purpose): printer repairs/supplies
Mailing Address P.O. Box 1193	
City State ZIP Code Tualatin OR 97062-1193	

Outstanding Balance Beginning This Period <input type="text" value="347.76"/>	<b>Transaction ID:</b> LS71017.E13104	
Amount Incurred This Period <input type="text" value="278.28"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="626.04"/>

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Amy Langdon	Nature of Debt (Purpose): reim for catering parking meals
Mailing Address 2830 Foxhaven Dr SE	
City State ZIP Code Salem OR 97306-2526	

Outstanding Balance Beginning This Period <input type="text" value="1583.54"/>	<b>Transaction ID:</b> LSE8968	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1583.54"/>

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Creative Strategies	Nature of Debt (Purpose): vote reg. mailing
Mailing Address 9 Monroe Parkway, Suite 120	
City State ZIP Code Lake Oswego OR 97035-	

Outstanding Balance Beginning This Period <input type="text" value="2511.29"/>	<b>Transaction ID:</b> LSE9039	
Amount Incurred This Period <input type="text" value="844.09"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3355.38"/>

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="5564.96"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> FLS Connect			Nature of Debt (Purpose): telemarketing
Mailing Address 7320 N Dreamy Draw Dr			
City Phoenix	State AZ	ZIP Code 85020-5212	

Outstanding Balance Beginning This Period 48010.10		<b>Transaction ID: LSE8953</b>	
Amount Incurred This Period 0.00	Payment This Period 8506.00	Outstanding Balance at Close of This Period 39504.10	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Direct Mail Systems, Inc			Nature of Debt (Purpose): fundraising mail
Mailing Address 12450 Automobile Boulevard			
City Clearwater	State FL	ZIP Code 34622-	

Outstanding Balance Beginning This Period 34767.00		<b>Transaction ID: LSE8973</b>	
Amount Incurred This Period 1903.18	Payment This Period 1402.50	Outstanding Balance at Close of This Period 35267.68	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Norton & Butler CPA			Nature of Debt (Purpose): CPA services
Mailing Address PO Box 12873			
City Salem	State OR	ZIP Code 97309-	

Outstanding Balance Beginning This Period 1230.00		<b>Transaction ID: LSE9041</b>	
Amount Incurred This Period 400.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1630.00	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	▶	76401.78
<b>2) TOTALS</b> This Period (last page this line number only).....	▶	
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Pitney Bowes Credit Corp			Nature of Debt (Purpose): postage
Mailing Address P. O. Box 85460			
City Louisville	State KY	ZIP Code 40285-5460	

Outstanding Balance Beginning This Period 1135.10		<b>Transaction ID: LSE8871</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1135.10	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Reed Harris Mailhouse			Nature of Debt (Purpose): fundraising mail
Mailing Address 322 NW 14th			
City Portland	State OR	ZIP Code 97210-	

Outstanding Balance Beginning This Period 3285.12		<b>Transaction ID: LSE8966</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3285.12	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> QWest**			Nature of Debt (Purpose): phone bill
Mailing Address PO Box 12480			
City Seattle	State WA	ZIP Code 98111-	

Outstanding Balance Beginning This Period 693.91		<b>Transaction ID: LSE8872</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 693.91	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	5114.13
<b>2) TOTALS</b> This Period (last page this line number only).....	[ ]
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	[ ]
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	[ ]

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 29 / 35
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor WB Adams Insurance Co	Nature of Debt (Purpose): liability insurance
Mailing Address 6290 SW Arctic Dr	
City State ZIP Code Beaverton OR 97005-	

Outstanding Balance Beginning This Period 2150.00	<b>Transaction ID:</b> LS71002.E13089	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2150.00

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Premiere Conferencing	Nature of Debt (Purpose): conference calls
Mailing Address PO Box 87-5450	
City State ZIP Code Kansas City MO 64180-	

Outstanding Balance Beginning This Period 1131.90	<b>Transaction ID:</b> LS71017.E13097	
Amount Incurred This Period 458.88	Payment This Period 0.00	Outstanding Balance at Close of This Period 1590.78

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Computer Village	Nature of Debt (Purpose): computer voter file work
Mailing Address 4075 76th Ave NE	
City State ZIP Code Salem OR 97305-	

Outstanding Balance Beginning This Period -8892.79	<b>Transaction ID:</b> LSE9043	
Amount Incurred This Period 8751.46	Payment This Period 0.00	Outstanding Balance at Close of This Period -141.33

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	3599.45
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Telecommunication Politel			Nature of Debt (Purpose): telemarketing
Mailing Address 1711 W County Rd B #330N			
City Saint Paul	State MN	ZIP Code 55113-	

Outstanding Balance Beginning This Period <input type="text" value="4500.00"/>		<b>Transaction ID: LS70929.E13085</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="4500.00"/>	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Advanced Data Systems			Nature of Debt (Purpose): voter file system
Mailing Address 1818 Westlake Ave N # 330			
City Seattle	State WA	ZIP Code 98109-	

Outstanding Balance Beginning This Period <input type="text" value="2673.00"/>		<b>Transaction ID: LSE8942</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="2673.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Electric Lightwave			Nature of Debt (Purpose): generic auto call services
Mailing Address PO Box 20553			
City Rochester	State NY	ZIP Code 14602-	

Outstanding Balance Beginning This Period <input type="text" value="1139.97"/>		<b>Transaction ID: LSE8972</b>	
Amount Incurred This Period <input type="text" value="320.74"/>	Payment This Period <input type="text" value="320.74"/>	Outstanding Balance at Close of This Period <input type="text" value="1139.97"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="5639.97"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Certified Property			Nature of Debt (Purpose): interest on unpaid balance
Mailing Address PO Box 269			
City Salem	State OR	ZIP Code 97308-0269	

Outstanding Balance Beginning This Period <input type="text" value="3658.70"/>		<b>Transaction ID: LSE8717</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3658.70"/>	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Wilderness Air Charters Inc.			Nature of Debt (Purpose): Travel
Mailing Address PO Box 9242			
City Salem	State OR	ZIP Code 97305-	

Outstanding Balance Beginning This Period <input type="text" value="600.00"/>		<b>Transaction ID: LSE8893</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="600.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Pitney Bowes Purchase Power			Nature of Debt (Purpose): postage
Mailing Address PO Box 856042			
City Louisville	State KY	ZIP Code 40285-	

Outstanding Balance Beginning This Period <input type="text" value="2513.51"/>		<b>Transaction ID: LSE8965</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2513.51"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="6172.21"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 32 / 35
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor West Coast Events	Nature of Debt (Purpose): event set-up fees
Mailing Address 1400 NW 15th Ave	
City State ZIP Code Portland OR 97209-	

Outstanding Balance Beginning This Period 902.00	<b>Transaction ID: LSE8967</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 902.00

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Connolly & Goldian	Nature of Debt (Purpose): legal fees
Mailing Address PO Box 3095	
City State ZIP Code Salem OR 97302-	

Outstanding Balance Beginning This Period 16305.73	<b>Transaction ID: LS70929.E13083</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 16305.73

1) <b>SUBTOTALS</b> This Period This Page (optional).....	<b>17207.73</b>
2) <b>TOTALS</b> This Period (last page this line number only).....	<b>119700.23</b>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<b>0.00</b>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<b>119700.23</b>

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

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

**A. Full Name (Last, First, Middle Initial)**  
Wilderness Air Charters Inc.

Mailing Address  
PO Box 9242

City State Zip Code  
Salem OR 97305-

Purpose of Disbursement:  
Travel

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt
- Voter Drive  Direct Candidate Support
- Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

257392.98

Activity or Event Identifier:  
ADMINISTRATION B 2111

Date 11 / 11 / 2003

Transaction ID: H4E8893

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT  
216.00 + 384.00 = 600.00

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

Mailing Address  
1818 Westlake Ave N # 330

City State Zip Code  
Seattle WA 98109-

Purpose of Disbursement:  
voter file system

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt
- Voter Drive  Direct Candidate Support
- Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

256472.24

Activity or Event Identifier:  
ADMINISTRATION B 2111

Date 11 / 11 / 2003

Transaction ID: H4E8942

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT  
962.28 + 1710.72 = 2673.00

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

Mailing Address  
PO Box 269

City State Zip Code  
Salem OR 97308-0269

Purpose of Disbursement:  
office rent

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt
- Voter Drive  Direct Candidate Support
- Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

251808.05

Activity or Event Identifier:  
ADMINISTRATION B 2111

Date 11 / 03 / 2003

Transaction ID: H4E8948

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT  
2022.12 + 3594.88 = 5617.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT  
3200.40 + 5689.60 = 8890.00

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

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A. Full Name (Last, First, Middle Initial)</b> LifeWise			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 815 SW Bond St			Allocated Activity or Event Year-To-Date 253757.66		
City Bend	State OR	Zip Code 97702-	Date <input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2003"/>		
Purpose of Disbursement: health insurance			Transaction ID: H4E8949		
Activity or Event Identifier: ADMINISTRATION B 2111					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
596.88		1061.12		1658.00

<b>B. Full Name (Last, First, Middle Initial)</b> Katherine McDermott			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 17959 Koehler Ln			Allocated Activity or Event Year-To-Date 252099.66		
City Baker City	State OR	Zip Code 97814-8420	Date <input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2003"/>		
Purpose of Disbursement: reim for office supplies			Transaction ID: H4E8950		
Activity or Event Identifier: ADMINISTRATION B 2111					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
32.23		57.29		89.52

<b>C. Full Name (Last, First, Middle Initial)</b> Sandy Howard			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 1083			Allocated Activity or Event Year-To-Date 252010.14		
City Salem	State OR	Zip Code 97308-	Date <input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2003"/>		
Purpose of Disbursement: reim for phone bill, medication			Transaction ID: H4E8951		
Activity or Event Identifier: ADMINISTRATION B 2111					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
72.75		129.34		202.09

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
701.86		1247.75		1949.61

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A. Full Name (Last, First, Middle Initial)</b> Cooke Stationery			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 370 State St			Allocated Activity or Event Year-To-Date 253799.24		
City	State	Zip Code	Category/Type		
Salem	OR	97301-			
Purpose of Disbursement: office supplies			Date		
Activity or Event Identifier: ADMINISTRATION B 2111			M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 3 Transaction ID: H4E8952		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.97		26.61		41.58

<b>B. Full Name (Last, First, Middle Initial)</b> Electric Lightwave			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 20553			Allocated Activity or Event Year-To-Date 256792.98		
City	State	Zip Code	Category/Type		
Rochester	NY	14602-			
Purpose of Disbursement: generic auto dial info calls			Date		
Activity or Event Identifier: ADMINISTRATION B 2111			M M / D D / Y Y Y Y 1 1 / 1 1 / 2 0 0 3 Transaction ID: H4E8972		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
115.47		205.27		320.74

<b>C. Full Name (Last, First, Middle Initial)</b> Key Bank**			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1500 Edgewater St NW			Allocated Activity or Event Year-To-Date 257892.04		
City	State	Zip Code	Category/Type		
Salem	OR	97304-			
Purpose of Disbursement: bank fee			Date		
Activity or Event Identifier: ADMINISTRATION B 2111			M M / D D / Y Y Y Y 1 1 / 2 8 / 2 0 0 3 Transaction ID: H4E9037		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
179.66		319.40		499.06

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
310.10		551.28		861.38

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
4212.36	7488.63	11700.99