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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED SECRETARY OF THE STA PUBLIC STO

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NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼		ple: If typing, type the lines.	12FE4M5	
CALLAHAN FOR ORE	EGON				1
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	J. 1 <u> </u>	<u>. l. l l l </u>			
ADDRESS (number and street)	PO BOX 4352	1111			
Check if different					
than previously reported. (ACC)	SALEM	111		OR 973	802
2. FEC IDENTIFICATION N	UMBER ▼	CITY A		STATE	ZIP CODE A
C C00548115		IS THIS REPORT	NEW (N) OR	× AMENDED (A)	STATE V DISTRICT
4. TYPE OF REPORT (Ch	noose One) (b) 1:	2-Day PRE -Ek	ection Report for th	ne:	
X April 15 Quarterly	Report (Q1)	Pi	rimary (12P)	General (12G) Runoff (12R)
July 15 Quarterly F		C	onvention (12C)	Special (12S)	
October 15 Quarte	rly Report (Q3)	Election on	M M / D	/ Y Y Y Y	in the State of
January 31 Year-Er	nd Report (YE) (c) 30	0-Day POST -E	Election Report for	the:	
		G	eneral (30G)	Runoff (30R)	Special (30S)
Termination Report		Election on	м м /	Y Y	in the State of
5. Covering Period 0°		Y Y 114	through 6	м / в в / 03 31	y y 2014
I certify that I have examined the			ledge and belief it i	is true, correct and co	omplete.
Signature of Treasurer MAI	RK ALLEN CALLAHAN			M M / 04 Date	04 / Y Y Y Y Y Y Y
NOTE: Submission of false, erron	eous, or incomplete inform	nation may sub	ject the person sign	ing this Report to the p	penalties of 2 U.S.C. §437g.
Office Use Only					FEC FORM 3 (Revised 02/2003)

FEC Form 3 (Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

PAGE 2 / 17

Write or Type Committee Name **CALLAHAN FOR OREGON**

Report Covering the Period:

From:

To:

				COLUMN This Peri		CO Election	LUMN E Cycle-te	
6.	Net	t Contributions (other than loans)						
	(a)	Total Contributions (other than loans) (from Line 11(e))	7	,	11285.00	,	,	17299.54
	(b)	Total Contribution Refunds (from Line 20(d))	,	,	0.00	,	,	0.00
	(c)	Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	,	,	11285.00	,	,	17299.54
7.	Net	Operating Expenditures						
	(a)	Total Operating Expenditures (from Line 17)	,	,	11591.73	,	,	17856.67
	(b)	Total Offsets to Operating Expenditures (from Line 14)	,	,	0.00	7	,	0.00
	(c)	Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	7	,	11591.73	7	,	17856.67
8.		sh on Hand at Close of porting Period (from Line 27)	7	7	3442.87			
9.	the	ots and Obligations Owed TO Committee (Itemize all on nedule C and/or Schedule D)	,	,	0.00			
10.	the	ots and Obligations Owed BY Committee (Itemize all on nedule C and/or Schedule D)	,	,	4000.00			

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

FEC Form 3 (Revised 12/2003)
Write or Type Committee Name

CALLAHAN FOR OREGON

Report Covering the Period:

From:

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То:

им / в в / 03 31

2014

PAGE 3 / 17

	I. RECEIPTS		COLUMI al This		COI Election	LUMN I Cycle-te	
11. C	CONTRIBUTIONS (other than loans) FROM:						
(4	(a) Individuals/Persons Other Than Political Committees			5050.00			
	(i) Itemized (use Schedule A)	,	7	5250.00	,	7	5750.00
	(ii) Unitemized(iii) TOTAL of contributions	5	,	1035.00	,	,	2475.00
	from individuals .	7	,	6285.00	,	,	8225.00
	(b) Political Party Committees (c) Other Political Committees	,	,	0.00	,	,	0.00
"	(such as PACs)	,	,	0.00	7	,	0.00
-	(d) The Candidate(e) TOTAL CONTRIBUTIONS (other than loans)	,	,	5000.00	1	,	9074.54
	(add Lines 11(a)(iii), (b), (c), and (d))	,	,	11285.00	,	5	17299.54
	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	,	,	0.00	,	5	<u>0</u> .00
3. L	LOANS:						
(8	(a) Made or Guaranteed by the Candidate	y	,	500.00	,	7	4000.00
•	(b) All Other Loans	y	,	0.00	y	3	0.00
,,	(add Lines 13(a) and (b))	5	,	500.00	,	y	4000.00
	OFFSETS TO OPERATING EXPENDITURES						
	Refunds, Rebates, etc.)	,	,	0.00	,	,	0.00
	OTHER RECEIPTS			0.00			0.00
	Dividends, Interest, etc.)	,	,	3.50	,	,	Ų.VU
1	FOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) Carry Total to Line 24, page 4)	7	,	11785.00	,	,	21299.54

DETAILED SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Disbursements

PAGE 4 / 17

	II. DISBURSEMENTS	То	COLUMN A Total This Period			COLUMN B Election Cycle-to-Date		
17.	OPERATING EXPENDITURES	,	,	11591.73	,	,	17856.67	
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	,	7	0.00	7	,	0.00	
19.	LOAN REPAYMENTS:	•						
	(a) Of Loans Made or Guaranteed by the Candidate	,	,	0.00	,	,	0.00	
	(b) Of All Other Loans	3	,	0.00	,	,	0.00	
	(add Lines 19(a) and (b))	,	,	0.00	,	,	0.00	
20.	REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political Committees	y	,	0.00	ý	y	0.00	
	(b) Political Party Committees	,	7	0.00	,	,	0.00	
	(c) Other Political Committees (such as PACs)	,	·	0.00	,	,	0.00	
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	,	,	ō.00	,	,	0.00	
21.	OTHER DISBURSEMENTS	1	,	0.00	,	,	0.00	
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	,	,	11591.73	,	7 ·	17856.67	
	III. CASH S	SUMMARY						
23.	CASH ON HAND AT BEGINNING OF REP	PORTING PERIOD			,	,	3249.60	
24	TOTAL RECEIPTS THIS PERIOD (from Lin	e 16, page 3)			7	,	11785.00	
25.	SUBTOTAL (add Line 23 and Line 24)				,	,	15034.60	
26.	TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)			,	,	11591.73	
27.	CASH ON HAND AT CLOSE OF REPORTI (subtract Line 26 from Line 25)	ING PERIOD			,	,	3442.87	

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FOR LINE NUMBER: **PAGE** 5 OF 17 SCHEDULE A (FEC Form 3) Use separate schedule(s) (check only one) for each category of the X 11a ITEMIZED RECEIPTS 11b 11c 11d **Detailed Summary Page** 13a 13b 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) CALLAHAN FOR OREGON Full Name (Last, First, Middle Initial) Daniel Clopton Date of Receipt Mailing Address P.O. Box 7442 D D 2014 City State Zip Code Transaction ID: SA11AI.4592 OR Springfield 97475 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2500.00 Name of Employer Occupation In-kind - Donation for campaign consulting services for The Right Associates **Political Consultant** January/February 2014 Receipt For: 2014 Election Cycle-to-Date > Primary General 2500.00 Other (specify) , Full Name (Last, First, Middle Initial) Kathleen Flaherty Date of Receipt Mailing Address 4302 Myrtlewood Drive, 2014 City State Zip Code Transaction ID: SA11AI.4376 Sanford FL 32771 FEC ID number of contributing С Amount of Each Receipt this Period federal political committee. 100.00 Name of Employer Occupation Century 21 Insurance Service Advocate Campaign Contribution Receipt For: 2014 Election Cycle-to-Date Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) Kathleen Flaherty Date of Receipt Mailing Address 4302 Myrtlewood Drive, City State Zip Code Transaction ID: SA11AI.4377 FL Sanford 32771 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 50.00 Name of Employer Occupation Campaign Contribution Century 21 Insurance Service Advocate Receipt For: 2014 Election Cycle-to-Date > Primary General 300.00 Other (specify) , 2650.00 SUBTOTAL of Receipts This Page (optional).....

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

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SCHEDULE A (FEC Form 3)

FOR LINE NUMBER: PAGE 6 OF Use separate schedule(s) (check only one)

ITEMIZED RECEIPTS	for each category of Detailed Summary Pa	
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may not be sold or used in the name and address of any political of	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) CALLAHAN FOR OREGON		
Full Name (Last, First, Middle Initial) Kathleen Flaherty		Date of Receipt
Mailing Address 4302 Myrtlewood Drive,		м м / р в / у у у 02 12 2014
City Sanford	State Zip Code FL 32771	Transaction ID : SA11AI.4563
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
Name of Employer Century 21 Insurance	Occupation Service Advocate	Campaign contribution
Receipt For: 2014 Primary General Other (specify)	Election Cycle-to-Date	0.00
Full Name (Last, First, Middle Initial) Right Action - Bryan Smith		Date of Receipt
Mailing Address 1430 Willamette Street City	M M / D D / Y Y Y 03 31 2014	
Eugene	State Zip Code OR 97401	Transaction ID : SA11AI.4639
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
Name of Employer	Occupation	2500.00 In-kind - Donation of online and social media services
Receipt For: 2014 Primary General Other (specify)	Election Cycle-to-Date	.00
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M M / Y Y
City	State Zip Code	
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
Name of Employer	Occupation	5 5
Receipt For: Primary General Other (specify)	Election Cycle-to-Date	
SUBTOTAL of Receipts This Page (optional).		2600.00
TOTAL This Period (last page this line number	er only)	5250.00

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SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 OF 17 (check only one) 11a 11b 11c X 11d 12 13a 13b 14 15
Any information copied from such Reports and or for commercial purposes, other than using	Statements may the name and ad	not be sold or used by a dress of any political comr	ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) CALLAHAN FOR OREGON	77 P. 14 - 1 and 1		
Full Name (Last, First, Middle Initial) MARK ALLEN CALLAHAN Mailing Address PO BOX 4352 City	State	Zip Code	Date of Receipt M M / D D / Y Y Y Y 01 31 2014
SALEM	OR	97302	Transaction ID : SA11D.4638
FEC ID number of contributing federal political committee.	C S40R	200172	Amount of Each Receipt this Period
Name of Employer Robert Half International Receipt For: 2014 Primary General	pert Half International Information Technology Consultant Leipt For: 2014 Election Cycle-to-Date		Campaign Contribution
Other (specify)	,	10074.54	
Full Name (Last, First, Middle Initial) MARK ALLEN CALLAHAN Mailing Address PO BOX 4352			Date of Receipt
City	State OR	Zip Code 97302	02 28 2014 Transaction ID : SA11D.4636
FEC ID number of contributing federal political committee.	C S4OR		Amount of Each Receipt this Period
Name of Employer Robert Half International	Occupation Te	chnology Consultant	2000.00 Campaign Contribution
Receipt For: 2014 Primary General Other (specify)	Election Cycle		
Full Name (Last, First, Middle Initial) MARK ALLEN CALLAHAN			Date of Receipt
Mailing Address PO BOX 4352	State	7	M M / D D / Y Y Y O 3 15 2014
SALEM	State OR	Zip Code 97302	Transaction ID : SA11D.4634
FEC ID number of contributing federal political committee.	C S4OR	00172	Amount of Each Receipt this Period
Name of Employer Robert Half International Receipt For: 2014	, '	echnology Consultant	Campaign Contribution
Primary General Other (specify)	Election Cycle	13074.54	
SUBTOTAL of Receipts This Page (optional)			5000.00
TOTAL This Period (last page this line number	r only)		5000.00

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SCHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 8 OF 17 (check only one)				
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	11a 11b 11c 11d 12 X 13a 13b 14 15				
Any information copied from such Reports and or for commercial purposes, other than using the	person for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) CALLAHAN FOR OREGON							
Full Name (Last, First, Middle Initial) MARK ALLEN CALLAHAN			Date of Receipt				
Mailing Address PO BOX 4352			M M / D D / Y Y Y Y Y 02 01 2014				
City SALEM	State OR	Zip Code 97302	Transaction ID : SA13A.5160				
FEC ID number of contributing federal political committee.	C \$40	DR00172	Amount of Each Receipt this Period				
Name of Employer Robert Half International	Occupation Information	Technology Consultant	500.00 Loan from Candidate to Campaign				
Receipt For: 2014 Primary General Other (specify)	Election Cy	/cle-to-Date					
Full Name (Last, First, Middle Initial)							
Mailing Address			Date of Receipt M M D D / Y Y				
City	State	Zip Code					
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period				
Name of Employer	Occupation		, ,				
Receipt For: Primary General Other (specify)	Election Cy	rcle-to-Date					
Full Name (Last, First, Middle Initial)							
Mailing Address			Date of Receipt M M / / Y Y Y				
City	State	Zip Code					
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period				
Name of Employer	Occupation	·	, ,				
Receipt For: Primary General Other (specify)	Election Cy	cie-to-Date					
Cure (specify	:	3 3					
SUBTOTAL of Receipts This Page (optional)	***************************************		500.00				
TOTAL This Period (last page this line number	only)		500.00				

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ITEMIZED DISBURSEMENTS for		Use separate for each cate Detailed Sun		FOR LINE NUMBER: PAGE 9 OF 17 (check only one) X 17
Ar or	ny information copied from such Reports and Statemer for commercial purposes, other than using the name	ents may not be sold	or used by any	person for the purpose of soliciting contributions
$\left. \right\rangle$	NAME OF COMMITTEE (In Full) CALLAHAN FOR OREGON		pontos. commit	to solicit contributions from such continuee.
Full Name (Last, First, Middle Initial) A. Daniel Clopton				Date of Disbursement
	Mailing Address P.O. Box 7442	01 23 2014		
	City Star Springfield OR			Amount of Each Disbursement this Period
	Purpose of Disbursement Campaign manager consulting fee Candidate Name		001	900.00 Transaction ID : SB17.4614
	CALLAHAN FOR OREGON Office Sought: House Disbursemen	nt For: 2014	Category/ Type	
	Senate Pri President Ot	imary Gene her (specify)	ral	
	State: OR District: 00 Full Name (Last, First, Middle Initial)	·····	····	
3.	Daniel Clopton			Date of Disbursement
	Mailing Address P.O. Box 7442			03 05 2014
	City Stat Springfield OR			Amount of Each Disbursement this Period
	Purpose of Disbursement Campaign manager consulting fee			999.98
	Candidate Name CALLAHAN FOR OREGON		Category/ Type	Transaction ID : SB17.4628
		nt For: mary Generation Generation (Specify)	ral	
	Full Name (Last, First, Middle Initial)			
) .	Daniel Clopton			Date of Disbursement
	Mailing Address P.O. Box 7442			03 31 2014
	City State Zip Code Springfield OR 97475			Amount of Each Disbursement this Period
Purpose of Disbursement In-kind - Donation for campaign consulting services for January/February 2014 Candidate Name		Category/	2500.00 Transaction ID : SB17.4593	
,	Office Sought: House Disbursement	t For: 2014	Type	_
	President Oth	mary Gener ner (specify)	al	
	State: District:			4200.00
SI	UBTOTAL of Disbursements This Page (optional)			4399.98 - • • • • • • • • • • • • • • • • • • •
TC	OTAL This Period (last page this line number only)	***************************************	**********	

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SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate sche for each category Detailed Summary	of the	FOR LINE NUMBER: PAGE 10 OF 17 (check only one) X 17
Any information copied from such Reports and Statements mor for commercial purposes, other than using the name and a	person for the purpose of soliciting contributions		
NAME OF COMMITTEE (In Full) CALLAHAN FOR OREGON			
Full Name (Last, First, Middle Initial) A Costco		·	Date of Disbursement
			M M D / Y Y
Mailing Address 1010 Hawthorne Avenue, S.E.			01 05 2014
City State Salem OR	Zip Code 97301		Amount of Each Disbursement this Period
Purpose of Disbursement Gas for car to/from campaign event		002	50.76
Candidate Name CALLAHAN FOR OREGON		Category/ Type	Transaction ID : SB17.4436
Office Sought: House Disbursement Form Senate Primary President Other (s	General	•	
State: OR District: 00 Full Name (Last, First, Middle Initial)			
Costco	Date of Disbursement		
Mailing Address 1010 Hawthorne Avenue, S.E.			03 10 2014
City State Salem OR	Zip Code 97301		Amount of Each Disbursement this Period
Purpose of Disbursement gas for car to/from campaign event	37301	002	48.56
Candidate Name CALLAHAN FOR OREGON			Transaction ID : SB17.4528
Office Sought: House Disbursement For: Senate President Other (specific points)	General		
State: OR District: 00 Full Name (Last, First, Middle Initial)		7	
Costco - Wilsonville			Date of Disbursement
Mailing Address 25920 SW Heather Place City State Zip Code Wilsonville OR 97070			03 05 2014
			Amount of Each Disbursement this Period
Purpose of Disbursement Gas for car to/from campaign event		002	46.62
Candidate Name CALLAHAN FOR OREGON		Category/ Type	Transaction ID : SB17.4479
Office Sought: House Disbursement For: Senate President Other (sp. 1988) State: OR District: 00	General		
			145.94
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)			, , .

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: PAGE 11 OF 1 (check only one) X 17	
Any information copied from such Reports and Statements m or for commercial purposes, other than using the name and a	nay not be sold or address of any poli	used by any tical committe	person for the purpose of soliciting contributions	
NAME OF COMMITTEE (In Full) CALLAHAN FOR OREGON			The second secon	
Full Name (Last, First, Middle Initial) Costco - Wilsonville			Date of Disbursement	
Mailing Address 25920 SW Heather Place			03 11 2014	
City State Wilsonville OR	Zip Code 97070		Amount of Each Disbursement this Period	
Gas for car to/from campaign event	002			
CALLAHAN FOR OREGON Office Sought: House Disbursement For:	: 2014	Category/ Type		
Senate President State: OR District: 00	General			
Full Name (Last, First, Middle Initial)				
3. Costco - Wilsonville			Date of Disbursement	
Mailing Address 25920 SW Heather Place			м м р р у у 03 17 2014	
City State Wilsonville OR	Zip Code		Amount of Each Disbursement this Period	
Wilsonville OR Purpose of Disbursement Gas for car to/from campaign event	97070	002	48.68	
Candidate Name CALLAHAN FOR OREGON	Category/ Type	Transaction ID : SB17.4499		
Office Sought: House Disbursement For: Senate President Other (sp. state: OR District: 00	General			
Full Name (Last, First, Middle Initial) Costco - Wilsonville			Date of Disbursement	
failing Address 25920 SW Heather Place			03 19 2014	
City State Zip Wilsonville OR 97		Amount of Each Disbursement this Period		
Purpose of Disbursement Gas for car to/from campaign event Candidate Name	002	50.12 Transaction ID : SB17.4495		
CALLAHAN FOR OREGON	Category/ Type			
Office Sought: House Senate President State: OR Disbursement For: Primary Other (sp	General			
		· · · · · · · · · · · · · · · · · · ·	147.90	
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)		• • • • • • • • • • • • • • • • • • • •	, ,	

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS		Use separate so for each categor Detailed Summa	hedule(s) y of the	FOR LINE NUMBER: PAGE 12 OF 17 (check only one) X 17
Ar or	ny information copied from such Reports and Statements m for commercial purposes, other than using the name and a NAME OF COMMITTEE (In Full) CALLAHAN FOR OREGON	used by any p tical committe	erson for the purpose of soliciting contributions	
Full Name (Last, First, Middle Initial) A. Political Innovations				Date of Disbursement
	Mailing Address P.O. Box 1902			01 16 2014
	City State Spring TX	Zip Code 77383		Amount of Each Disbursement this Period
	Purpose of Disbursement Website Redesign/Development final payment invoice Candidate Name CALLAHAN FOR OREGON		004 Category/ Type	900.00 Transaction ID : SB17.4567
	Office Sought: House Disbursement For: Senate President Other (sp. 1988) State: OR District: 00	General		
В.	Name (Last, First, Middle Initial) riceLine.com illing Address 800 Connecticut Avenue		Date of Disbursement M M / D D / Y Y 02 15 2014	
	City State Norwalk CT	Zip Code 06854		Amount of Each Disbursement this Period
	Purpose of Disbursement Hotel stay at Rodeway Inn PDX after campaign event Candidate Name CALLAHAN FOR OREGON		002 Category/ Type	49.32 Transaction ID : SB17.4623
	Office Sought: House Senate President State: OR District: 00 Full Name (Last, First, Middle Initial) Disbursement For: Primary Other (sp	General		
	Right Action - Bryan Smith			Date of Disbursement
	Mailing Address 1430 Willamette Street			03 31 2014
City State Zip Code Eugene OR 97401 Purpose of Disbursement In-kind - Donation of online and social media services				Amount of Each Disbursement this Period 2500.00
	Candidate Name		Category/ Type	Transaction ID : SB17.4641
	Office Sought: House Senate President Disbursement For: Primary Other (sp	General		
SI	JBTOTAL of Disbursements This Page (optional)			3449.32
	OTAL This Period (last page this line number only)			, , ,

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ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one) X 17 18 20a 20b	GE 13 OF 17
Ang or	y information copied from such Reports and Statements m for commercial purposes, other than using the name and a	nay not be sold or address of any pol	used by any itical committe	person for the purpose of solici	ting contributions
	NAME OF COMMITTEE (IN FUII) CALLAHAN FOR OREGON	<u> </u>			
	Full Name (Last, First, Middle Initial) Staples			Date of Disbursement	
	Mailing Address 6305 Ulali Drive			01 19	2014
	City State Keizer OR	Zip Code 97303		Amount of Each Disburse	ment this Period
	Purpose of Disbursement Printer in to print campaign literature 006			, Transaction ID : SB17.4413	41.64
	Candidate Name CALLAHAN FOR OREGON	2014	Category/ Type		
	Office Sought: House Senate President Disbursement For: Primary Other (sp	General			
	State: OR District: 00 Full Name (Last, First, Middle Initial)		 		
3.	The Cleanery			Date of Disbursement	
Ī	Mailing Address 3410 Commercial Street, S.E.	reet, S.E.		03 21	y y 2014
	City State Salem OR	Zip Code		Amount of Each Disburser	ment this Period
	Salem OR 97302 Purpose of Disbursement Dry cleaning for campaign suit			, ,	14.50
Č	Candidate Name CALLAHAN FOR OREGON		Category/ Type	Transaction ID : SB17.4490	490
	Office Sought: House Disbursement For: Senate President Other (sp. State: OR District: 00	General			
	Full Name (Last, First, Middle Initial)				
).	Vistaprint.com			Date of Disbursement	
Mailing Address 95 Hayden Avenue				01 02	2014
	City State Zip Lexington MA 02		Amount of Each Disburser	nent this Period	
	Purpose of Disbursement Large yard sign and campaign banner		006 Transaction ID: SB17 Type		
	Candidate Name CALLAHAN FOR OREGON			11413201101712 . 3217.4354	
	Office Sought: House Disbursement For: Senate President Other (sp	General			
	State: OR District: 00				
SU	BTOTAL of Disbursements This Page (optional)			, ,	109.84
то	TAL This Period (last page this line number only)				_

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS		Use separate so for each categor Detailed Summa	y of the	FOR LINE NUMBER: PAGE 14 OF 17 (check only one) X 17
Any in or for	formation copied from such Reports and Statements of commercial purposes, other than using the name and	nay not be sold or address of any pol	used by any	person for the purpose of soliciting contributions
\ NA	ME OF COMMITTEE (In Full) ALLAHAN FOR OREGON			To sense sense and sense committees.
	Full Name (Last, First, Middle Initial) Vistaprint.com			Date of Disbursement
Mai	Mailing Address 95 Hayden Avenue			02 11 2014
	dington MA	Zip Code 02421		Amount of Each Disbursement this Period
Car Car	pose of Disbursement ampaign business cards adidate Name ALLAHAN FOR OREGON		006 Category/	76.72 Transaction ID : SB17.4595
_	ce Sought: House Senate President Disbursement For Primary Other (s	General	Туре	
3. W	Name (Last, First, Middle Initial) almart ling Address 1940 Turner Road			Date of Disbursement M M / D D / Y Y 03 24 2014
City		Zip Code 97302		Amount of Each Disbursement this Period
Purpose of Disbursement Garment bag to protect campaign suit Candidate Name CALLAHAN FOR OREGON		001 Category/ Type	12.87 Transaction ID : SB17.4487	
Stat	Senate Primary President Other (sp	General		
	Name (Last, First, Middle Initial) almart - Commercial Street			Date of Disbursement
Mailing Address 5250 Commercial Street City State Zip Code Salem OR 97306 Purpose of Disbursement				M M / J D / Y Y Y Y Y O1 18 2014
				Amount of Each Disbursement this Period 54.94
Can	Portable gazebo/tent for campaign event and button bin Candidate Name CALLAHAN FOR OREGON		007 Category/ Type	Transaction ID : SB17.4416
Offic	House Disbursement For: Senate President Other (sp. 2) OR District: 00	General		
SUBT	OTAL of Disbursements This Page (optional)			, , , , , , , , , , , , , , , , , , , ,
TOTAL	This Period (last page this line number only)	***************************************	***********	8397.51

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SCHEDULE C (FEC Form 3)

Use separate schedule(s)

FOR LINE NUMBER:

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	13h

17

JANS		Detailed Summary P	age	(check only o	ne)	X 13a 13b
AME OF COMMITTEE (In Full) CALLAHAN FOR OREGON		Trans	action i	ID : SC/10.5159)	1100
LOAN SOURCE Full Name (Last, First, Middle Initial) MARK ALLEN CALLAHAN		[PERSONAL FUNDS]		ction: 2014 Primary General		
Mailing Address PO BOX 4352				Other (specify)) ▼	
City State	ZIP Code)			**************************************	
SALEM OR	97302					
Original Amount of Loan Cumulative Pa	syment To D	ate Ba 0.00	lance (Outstanding at		
3 3 5	5	0.00		, ,	1000.	.00
	Date Due	Interest Ra	ite		Secured:	
^M 10 ^M / ^D 30 ^D / Ž013 ^Y ^{M M} / ^D		71/14 0.0	00	% (apr)	Yes	No
List All Endorsers or Guarantors (if any) to Loan Source						
Full Name (Last, First, Middle Initial)	1	Name of Employer				
Mailing Address	L	Occupation				
City State ZIP Code	——— (Amount Guaranteed Dutstanding:	,	y		
2. Full Name (Last, First, Middle Initial)	1	lame of Employer			·	
Mailing Address		Occupation				
City State ZIP Code		kmount Guaranteed Dutstanding:	,	,		
3. Full Name (Last, First, Middle Initial)	N	lame of Employer				
Mailing Address	C	Occupation				
City State ZIP Code	G	mount Guaranteed Outstanding:	,	,		
4. Full Name (Last, First, Middle Initial)	N	lame of Employer				
Mailing Address		Occupation				
City State ZIP Code	G	mount juaranteed Jutstanding:	,	,		
JBTOTALS This Period This Page (optional)		>			1000.0	00
OTALS This Period (last page in this line only)		>		,	•	

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

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SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER: (check only one)

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	13b

17

NAME OF COMMITTEE (In Full)			Transaction ID :	SC/10.5156
CALLAHAN FOR OREGO	N			

LOAN SOURCE Full Name (Last, Firs MARK ALLEN CALLAHAN	t, Middle Initial)		(PERSONAL I	UNDS]	Election:	ary		
Mailing Address PO BOX 4352			General Other (specify) ▼) ▼		
City	State	ZIP Code						
SALEM	OR	97302						
Original Amount of Loan	Cumulative Pa	yment To Da	te	Balar	nce Outsta	inding at	Close of Th	is Peri
2500.00	7	,	0.00		,	,	2500	.00
TERMS Date Incurred		Date Due	Int	erest Rate			Secured:	
^M 12 ^M / ^D 28 ^D / Y Ž013 Y	M M / D D			0.00	%	apr)	Yes	\boxtimes_{N}
List All Endorsers or Guarantors (if a	ny) to Loan Source		······································				162	<u></u>
1. Full Name (Last, First, Middle Initial)	N	ame of Employ	/er	···			
Mailing Address		0	ccupation					
City Sta	te ZIP Code	G	nount uaranteed utstanding:		,	,		
2. Full Name (Last, First, Middle Initial)		N	ame of Employ	/er				
Mailing Address		O.	cupation	-				
			nount				·	
City Star	te ZiP Code	6	ıaranteed ıtstanding:		,	,		
3. Full Name (Last, First, Middle Initial)		Na	rme of Employ	rer				
Mailing Address		·O	cupation					
City Stat	e ZIP Code	Gt	nount laranteed litstanding:		3	9		
4. Full Name (Last, First, Middle Initial)		Na	me of Employ	er			***************************************	
Mailing Address		Oc	cupation				·,	<u> </u>
		Ar	nount			w		
City Stat	e ZIP Code	1	aranteed itstanding:		,	,		
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SCHEDULE C (FEC Form 3) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER: (check only one)

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17

OF

NAME OF COMMITTEE (in Full)	Transaction ID: SC/10.5160
CALLAHAN FOR OREGON	

LOAN SOURCE Full Name (Last, First, Middle Initial) MARK ALLEN CALLAHAN	[PERSONAL FUNDS]	Election: 2014 Primary
WALLIN CALLANAIN		General
Mailing Address PO BOX 4352	· · · · · · · · · · · · · · · · · · ·	Other (specify)
City State ZI	P Code	
SALEM OR 9	7302	
Original Amount of Loan Cumulative Payme	ent To Date Bal	lance Outstanding at Close of This Pe
500.00	0.00	500.00
TERMS Date Incurred Date	Due Interest Rat	
M02 ^M / D01 ^D / Ž014 M M D /		0 (apr) \(\sum \)
List All Endorsers or Guarantors (if any) to Loan Source		Yes Yes
1. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
	Amount	
City State ZIP Code	Guaranteed Outstanding:	, ,
2. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
C'A.	Amount Guaranteed	
City State ZIP Code	Outstanding:	3
3. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
	Amount	-
City State ZIP Code	Guaranteed	, ,
4. Full Name (Last, First, Middle Initial)	Outstanding: Name of Employer	, ,
Mailing Address	Occupation	
City State ZIP Code	Amount Guaranteed	
, , , , , , , , , , , , , , , , , , , ,	Outstanding:	5 y
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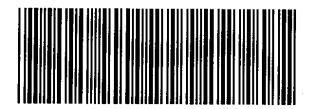
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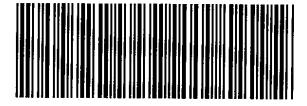
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