STOEL RIVES LLP
ATTORNEYS AT LAW

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900 S.W. Fifth Avenue, Suite 2600
Portland, Oregon 97204
main 503.224.3380
fax 503.220.2480
www.stoel.com

December 19, 2006

ROBERT D. VAN BROCKLIN
Direct Dial
(503) 294-9660
email rdvanbrocklin@stoel.com

CERTIFIED MAIL -
RETURN RECEIPT REQUESTED

Federal Election Commission
999 E Street, NW
Washington, D.C. 20463

Re: Stoel Rives Political Action Committee (FEC No. C00289165) Requested Updated Statement of Organization

Dear Sir or Madam:

Enclosed please find the above-referenced statement. If you have any questions about the statement, please contact me at the above-listed address or telephone number.

Very truly yours,

Robert D. Van Brocklin

RVB/pjn
Enclosures

Oregon
Washington
California
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Idaho

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FEC FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full) ☐ (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

STOEL RIVES FEDERAL POLITICAL ACTION COMMITTEE

ADDRESS (number and street) ▼ 900 SW 5TH AVENUE, SUITE 2600

☐ (Check if address is changed)

PORTLAND | OR | 97204 - 1268

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

rdvanbrocklin@stoel.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.stoel.com

COMMITTEE'S FAX NUMBER

503 - 220 - 2480

2. DATE 12 / 19 / 2006

3. FEC IDENTIFICATION NUMBER ▶ C 00289165

4. IS THIS STATEMENT ☐ NEW (N) OR ☒ AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Robert D. Van Brocklin

Signature of Treasurer [signature] Date 12 / 19 / 2006

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

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office Use Only				

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 02/2003)

FE3AN042.PDF

5. TYPE OF COMMITTEE (Check One)

(a) ☐ This committee is a principal campaign committee. (Complete the candidate information below.)

(b) ☐ This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate

Candidate Party Affiliation ☐ Office Sought: ☐ House ☐ Senate ☐ President State ☐ District ☐

(c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

(d) ☐ This committee is a ☐ (National, State or subordinate) committee of the ☐ (Democratic, Republican, etc.) Party.

(e) ☐ This committee is a separate segregated fund.

(f) ☒ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

NONE

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship

Type of Connected Organization:

☐ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization

☐ Membership Organization ☐ Trade Association ☐ Cooperative

Write or Type Committee Name

STOEL RIVES FEDERAL POLITICAL ACTION COMMITTEE

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name: Robert D. Van Brocklin

Mailing Address: 900 SW 5th Avenue, Suite 2600

Portland | OR | 97204 - 1268

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

TREASURER

Telephone number 503 - 294 - 9660

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer: SEE ABOVE

Mailing Address

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

Telephone number - -

Full Name of Designated Agent

Mailing Address

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

Telephone number - -

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

KEYBANK N.A.

Mailing Address 1211 SW 5th Avenue, Suite 5600

Portland | OR | 97204 -

CITY ▲ STATE ▲ ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

Federal Election Commission
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PREPARER	12/26/06 DATE PREPARED

(3/2005)