

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Blumenauer for Congress

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 01 / 2014 To: M M / D D / Y Y Y Y 10 / 15 / 2014

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	36344.91	1162853.27
(b) Total Contribution Refunds (from Line 20(d))	700.00	3404.17
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	35644.91	1159449.10
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	3350.31	784563.46
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	892.94
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	3350.31	783670.52
8. Cash on Hand at Close of Reporting Period (from Line 27).....	774775.13	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

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

Blumenauer for Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	18650.00	309672.36
(ii) Unitemized.....	1675.00	55977.21
(iii) TOTAL of contributions from individuals ▶	20325.00	365649.57
(b) Political Party Committees.....	19.91	19.91
(c) Other Political Committees (such as PACs).....	16000.00	797183.79
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	36344.91	1162853.27
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	892.94
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	565.03
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	36344.91	1164311.24

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	3350.31	784563.46
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	700.00	3404.17
(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 20(a), (b), and (c)).....	700.00	3404.17
21. OTHER DISBURSEMENTS	16000.00	285250.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	20050.31	1073217.63

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	758480.53
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	36344.91
25. SUBTOTAL (add Line 23 and Line 24).....	794825.44
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	20050.31
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	774775.13

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 28
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Dean N. Alterman

Mailing Address 5493 Westfield Court

City State Zip Code
Lake Oswego OR 97035

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

Name of Employer Occupation
Folawn Alterman & Richardson Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 14 / 2014

Transaction ID : C9462798

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Al Barkouli

Mailing Address 9523 SW Stonecreek Drive

City State Zip Code
Beaverton OR 97007

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

Name of Employer Occupation
David Evans & Assoc. Exec. VP and COO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1600.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 09 / 2014

Transaction ID : C9455134

Amount of Each Receipt this Period
700.00

C. Full Name (Last, First, Middle Initial)
Julia Brim-Edwards

Mailing Address 6666 SE Yamhill St

City State Zip Code
Portland OR 97215

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

Name of Employer Occupation
Nike Government Affairs

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 09 / 2014

Transaction ID : C9455128

Amount of Each Receipt this Period
500.00

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

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

1450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 28
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Peyton S. Chapman

Mailing Address 2741 SW Old Orchard Rd.

City Portland State OR Zip Code 97201

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

Name of Employer Portland Public Schools Occupation Principal

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 14 / 2014

Transaction ID : C9462805

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Kathleen Copeland

Mailing Address 10215 SE Pine Street
Apt. B113

City Portland State OR Zip Code 97216

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

Name of Employer NA Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 06 / 2014

Transaction ID : C9444332

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Denise Frisbee

Mailing Address 1860 Egan Way

City Lake Oswego State OR Zip Code 97034

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

Name of Employer Statewide Org. for Schools Occupation Executive Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 09 / 2014

Transaction ID : C9455129

Amount of Each Receipt this Period
800.00

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

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

1100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 28
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Leslie Ganz

Mailing Address 2715 SW Mayfield Ave.

City: Portland State: OR Zip Code: 97225

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

Name of Employer: NA Occupation: Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 2600.00

Date of Receipt: 10 / 07 / 2014

Transaction ID : C9448000

Amount of Each Receipt this Period: 2600.00

B. Full Name (Last, First, Middle Initial)
Mark Ganz

Mailing Address 2715 SW Mayfield Ave.

City: Portland State: OR Zip Code: 97225

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

Name of Employer: Cambia Health Solutions Occupation: Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 2600.00

Date of Receipt: 10 / 07 / 2014

Transaction ID : C9447999

Amount of Each Receipt this Period: 2600.00

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

Mailing Address 1620 NE Broadway St
Unit 616

City: Portland State: OR Zip Code: 97232-1871

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

Name of Employer: Portland Streetcar Occupation: Community Relations Program Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 300.00

Date of Receipt: 10 / 13 / 2014

Transaction ID : C9457633

Amount of Each Receipt this Period: 200.00

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

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

5400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 28
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Edwin A. Harnden

Mailing Address 4330 SW 48th Pl

City State Zip Code
Portland OR 97221

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

Name of Employer Occupation
Barran Liebman, LLP Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 11 / 2014

Transaction ID : C9454856

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Jeffrey S. Kohnstamm Jr.

Mailing Address P.O. Box 8

City State Zip Code
Government Camp OR 97028-0008

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

Name of Employer Occupation
Timberline Lodge Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 14 / 2014

Transaction ID : C9462802

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
Kevin R. Kohnstamm

Mailing Address 3002 NW Luray Circus

City State Zip Code
Portland OR 97210

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

Name of Employer Occupation
The Party Pros Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 14 / 2014

Transaction ID : C9462801

Amount of Each Receipt this Period
2000.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 28
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Molly D. Kohnstamm

Mailing Address 5738 SW Riverpoint Ln

City Portland	State OR	Zip Code 97219
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FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation Retired
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Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 14 / 2014

Transaction ID : C9462800

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Karen McCormack

Mailing Address 1601 Walden Drive

City McLean	State VA	Zip Code 22101
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FEC ID number of contributing federal political committee. **C**

Name of Employer US EPA	Occupation Civil Servant
----------------------------	-----------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 15 / 2014

Transaction ID : C9462793

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Sean B. O'Hollaren

Mailing Address 5050 Hilltop Lane

City Portland	State OR	Zip Code 97221
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FEC ID number of contributing federal political committee. **C**

Name of Employer Nike	Occupation Government Affairs Executive
--------------------------	--

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 09 / 2014

Transaction ID : C9455118

Amount of Each Receipt this Period
1500.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 28
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Cindi Polychronis

Mailing Address 2714 NE Siskiyou Street

City: Portland State: OR Zip Code: 97212

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

Name of Employer: David Evans & Assoc. Occupation: Sr. Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 10 / 09 / 2014

Transaction ID : C9455133

Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Franz N Rad

Mailing Address 830 SE Sellwood Blvd

City: Portland State: OR Zip Code: 97202

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

Name of Employer: PSU Occupation: Professor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1926.00

Date of Receipt: 10 / 07 / 2014

Transaction ID : C9447620

Amount of Each Receipt this Period: 300.00

C. Full Name (Last, First, Middle Initial)
Robert Stacey Jr.

Mailing Address 3434 SE Brooklyn St

City: Portland State: OR Zip Code: 97202-1820

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

Name of Employer: Metro Occupation: Metro Councilor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 416.00

Date of Receipt: 10 / 07 / 2014

Transaction ID : C9447578

Amount of Each Receipt this Period: 100.00

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 28
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Stephanie Vance

Mailing Address 2420 Tunlaw Rd NW

City Washington State DC Zip Code 20007-1818

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

Name of Employer Advocacy Associates Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 05 / 2014

Transaction ID : C9444035

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Jiri Vitek

Mailing Address 6365 SW Dolph Drive

City Portland State OR Zip Code 97219

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

Name of Employer David Evans Occupation Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 09 / 2014

Transaction ID : C9455132

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Zimmer Gunsul Frasca Architects LLP

Mailing Address 1223 SW Washington Street Ste 200

City Portland State OR Zip Code 97205

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 07 / 2014

Transaction ID : C9447621

Amount of Each Receipt this Period
2000.00

PARTNERSHIP--partners below if itemized

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

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

2200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 28
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Braulio Baptista

Mailing Address 515 S. Flower Street
Suite 3700

City Los Angeles State CA Zip Code 90071

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

Name of Employer Zimmer Gunsul Frasca Partnership Occupation Architect

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
333.33

Date of Receipt
M M / D D / Y Y Y Y
10 / 07 / 2014

Transaction ID : C9455147

Amount of Each Receipt this Period
166.66

[MEMO ITEM]
*

B. Full Name (Last, First, Middle Initial)
Joseph Collins

Mailing Address 1223 SW Washington St.
Suite 200

City Portland State OR Zip Code 97205

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

Name of Employer Zimmer Gunsul Frasca Occupation Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
333.32

Date of Receipt
M M / D D / Y Y Y Y
10 / 07 / 2014

Transaction ID : C9455139

Amount of Each Receipt this Period
166.66

[MEMO ITEM]
*

C. Full Name (Last, First, Middle Initial)
Kelly Davis

Mailing Address 1800 K Street, NW
#200

City Washington State DC Zip Code 20006

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

Name of Employer Zimmer Gunsul Frasca Occupation Architect

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
333.33

Date of Receipt
M M / D D / Y Y Y Y
10 / 07 / 2014

Transaction ID : C9455149

Amount of Each Receipt this Period
166.67

[MEMO ITEM]
*

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

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

0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 28
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Margaret W. DeBolt

Mailing Address 1800 K St NW
Ste 200

City Washington State DC Zip Code 20006-2247

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

Name of Employer Zimmer Gunsul Frasca Occupation Architect

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
333.34

Date of Receipt
M M / D D / Y Y Y Y
10 / 09 / 2014

Transaction ID : C9455144

Amount of Each Receipt this Period
166.67

[MEMO ITEM]
*

B. Full Name (Last, First, Middle Initial)
Robert Frasca

Mailing Address 137 SW Kingston Ave

City Portland State OR Zip Code 97205

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

Name of Employer Zimmer Gunsul Frasca Occupation Architect

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
333.33

Date of Receipt
M M / D D / Y Y Y Y
10 / 07 / 2014

Transaction ID : C9455140

Amount of Each Receipt this Period
166.67

[MEMO ITEM]
*

C. Full Name (Last, First, Middle Initial)
Ted Hyman

Mailing Address 515 S. Flower Street
Suite 3700

City Los Angeles State CA Zip Code 90071

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

Name of Employer Zimmer Gunsul Frasca Partnership Occupation Principle

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
333.34

Date of Receipt
M M / D D / Y Y Y Y
10 / 09 / 2014

Transaction ID : C9455143

Amount of Each Receipt this Period
166.67

[MEMO ITEM]
*

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

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

0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 28
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Doss Mabe

Mailing Address 515 S. Flower Street
Suite 3700

City Los Angeles State CA Zip Code 90071

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

Name of Employer Zimmer Gunsul Frasca Partnership Occupation Architect

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
333.34

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 07 / 2014

Transaction ID : C9455148

Amount of Each Receipt this Period
166.67

[MEMO ITEM]
*

B. Full Name (Last, First, Middle Initial)
Robert G. Packard III

Mailing Address 3313 SW Fairmount Blvd

City Portland State OR Zip Code 97239

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

Name of Employer Zimmer Gunsul Frasca Occupation Architect

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
333.33

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 07 / 2014

Transaction ID : C9455146

Amount of Each Receipt this Period
166.66

[MEMO ITEM]
*

C. Full Name (Last, First, Middle Initial)
Eugene Sandoval

Mailing Address 1223 SW Washington St.
Suite 200

City Portland State OR Zip Code 97205

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

Name of Employer Zimmer Gunsul Frasca Partnership Occupation Architect

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
333.32

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 07 / 2014

Transaction ID : C9455141

Amount of Each Receipt this Period
166.66

[MEMO ITEM]
*

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

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

0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 28
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Allyn Stellmacher

Mailing Address 924 Fourth Ave.#2400

City State Zip Code
Seattle WA 98104-1146

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

Name of Employer Occupation
Zimmer Gunsul Frasca Partnership Architect

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
333.34

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 07 / 2014

Transaction ID : C9455145

Amount of Each Receipt this Period
166.67

[MEMO ITEM]
*

B. Full Name (Last, First, Middle Initial)
Jan Willemse

Mailing Address 1223 SW Washington St.
Suite 200

City State Zip Code
Portland OR 97205

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

Name of Employer Occupation
Zimmer Gunsul Frasca Partnership Architect

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
333.34

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 07 / 2014

Transaction ID : C9455142

Amount of Each Receipt this Period
166.67

[MEMO ITEM]
*

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

0.00

18650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 28
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Democratic Party Of Clackamas County

Mailing Address PO Box 44

City Oregon City State OR Zip Code 97045

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
19.91

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 13 / 2014

Transaction ID : C9458155

Amount of Each Receipt this Period
19.91

* In-Kind: Mailing

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

19.91

19.91

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 28
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
AECOM US Federal PAC

Mailing Address 3101 WILSON BLVD. SUITE 700

City ARLINGTON State VA Zip Code 22201

FEC ID number of contributing federal political committee. **C C00374447**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 09 / 2014

Transaction ID : C9455119

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
American Council of Engineering Companies PAC

Mailing Address 1015 15th Street, NW Suite 802

City Washington State DC Zip Code 20005-2605

FEC ID number of contributing federal political committee. **C C00010868**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 09 / 2014

Transaction ID : C9455121

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
Dealers Election Action Committee

Mailing Address 8400 Westpark Drive

City McLean State VA Zip Code 22102

FEC ID number of contributing federal political committee. **C C00040998**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 14 / 2014

Transaction ID : C9462807

Amount of Each Receipt this Period
2500.00

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 28
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Herbalife International Inc. PAC (HERBALIFEPAC)

Mailing Address 990 West 190th Street
Suite 650

City Torrance State CA Zip Code 90502

FEC ID number of contributing federal political committee. **C C00393298**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 09 / 2014

Transaction ID : C9455120

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
JE DUNN CONSTRUCTION GROUP INC PAC

Mailing Address 1010 HOLMES

City KANSAS CITY State MO Zip Code 64106

FEC ID number of contributing federal political committee. **C C00453688**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 14 / 2014

Transaction ID : C9462808

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
National Air Traffic Controllers Association PAC

Mailing Address 1325 Massachusetts Ave. NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00238725**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 09 / 2014

Transaction ID : C9455122

Amount of Each Receipt this Period
1500.00

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

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

5000.00

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

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

FOR LINE NUMBER: PAGE 19 OF 28
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial)
NATIONAL ORGANIZATION FOR THE REFORM OF MARIJUANA LAWS POLITICAL ACTION COMMITTEE

A. Mailing Address 1600 K ST NW
MEZZANINE LEVEL

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00383604

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 07 / 2014

Transaction ID : C9447622

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Novo Nordisk Inc. PAC

Mailing Address 1155 F Street NW
Suite 1150

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00424838

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 14 / 2014

Transaction ID : C9462810

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
C. Stoel Rives PAC

Mailing Address 900 SW 5TH Ave.
Suite 2300

City Portland State OR Zip Code 97204

FEC ID number of contributing federal political committee. **C** C00289165

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 09 / 2014

Transaction ID : C9455123

Amount of Each Receipt this Period
1000.00

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

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

2500.00

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

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

FOR LINE NUMBER: PAGE 20 OF 28
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
United Parcel Service PAC

Mailing Address 55 Glenlake Pkwy NE

City Atlanta State GA Zip Code 30328

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 14 / 2014

Transaction ID : C9462809

Amount of Each Receipt this Period
2500.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

2500.00

16000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 28			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. Ace Parking		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2014
Mailing Address 700 NE Multnomah		Amount of Each Disbursement this Period 192.00 Transaction ID : D476333
City Portland	State OR	
Zip Code 97232	Purpose of Disbursement Parking	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ADP Easypay		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2014
Mailing Address 4099 SE International Way Ste 203		Amount of Each Disbursement this Period 142.75 Transaction ID : D478638
City Milwaukie	State OR	
Zip Code 97222-8853	Purpose of Disbursement Payroll Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. American Express Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address P.O. Box 2878		Amount of Each Disbursement this Period 88.50 Transaction ID : D478587
City Omaha	State NE	
Zip Code 68103-2878	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	423.25
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 28	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. American Express Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address P.O. Box 2878		Amount of Each Disbursement this Period 7.95
City Omaha State NE Zip Code 68103-2878	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : D478590
State: District:		

Full Name (Last, First, Middle Initial) B. Integra Telecom		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014
Mailing Address PO Box 3034		Amount of Each Disbursement this Period 308.67
City Portland State OR Zip Code 97208-3034	Purpose of Disbursement Telephone	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : D473301
State: District:		

Full Name (Last, First, Middle Initial) c. National Democratic Club		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address 30 Ivy St SE		Amount of Each Disbursement this Period 609.00
City Washington State DC Zip Code 20003-4071	Purpose of Disbursement Catering and Room Rental	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : D477767
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	925.62
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 28			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. Oregon Square		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address P.O. Box 843534		Amount of Each Disbursement this Period 1015.15 Transaction ID : D475504
City Los Angeles	State CA	
Zip Code 90084	Purpose of Disbursement Office Rent	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. SunTrust Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2014
Mailing Address PO Box 6600		Amount of Each Disbursement this Period 94.00 Transaction ID : D47764
City Hagerstown	State MD	
Zip Code 21741-6600	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. SunTrust Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2014
Mailing Address PO Box 6600		Amount of Each Disbursement this Period 31.36 Transaction ID : D47765
City Hagerstown	State MD	
Zip Code 21741-6600	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1140.51
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 28			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. SunTrust Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2014
Mailing Address PO Box 6600		Amount of Each Disbursement this Period 313.82 Transaction ID : D477766
City Hagerstown	State MD	
Zip Code 21741-6600	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. U-Store Self Storage East		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address 1130 NE 28th Ave.		Amount of Each Disbursement this Period 75.00 Transaction ID : D478579
City Portland	State OR	
Zip Code 97232	Purpose of Disbursement Storage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Earl Blumenauer		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014
Mailing Address 830 NE Holladay, #105		Amount of Each Disbursement this Period 450.58 Transaction ID : D477768
City Portland	State OR	
Zip Code 97232	Purpose of Disbursement Travel, Mileage, Food and Beverage, Parking	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	839.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 28			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. Harborside Hotel		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014
Mailing Address 185 State Street		Amount of Each Disbursement this Period 5.80
City Boston	State MA	
Zip Code 02109	Purpose of Disbursement Food and Beverage	Transaction ID : D477822
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Lavagna		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014
Mailing Address 539 8th Street, SE		Amount of Each Disbursement this Period 165.10
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Catering	Transaction ID : D477823
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	3328.78

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 28			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. John W. Russell		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address 1727 SW Hawthorne Ter		Amount of Each Disbursement this Period 700.00
City Portland	State OR	
Zip Code 97201-1733	Purpose of Disbursement Refund Contribution	Transaction ID : D476115
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 28
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. Committee to Elect Alan Bates		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address P.O. Box 912		Amount of Each Disbursement this Period 2000.00 Transaction ID : D475505
City Jacksonville	State OR	
Zip Code 97530	Purpose of Disbursement Campaign Contribution	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Emerge Oregon		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address P.O. Box 3493		Amount of Each Disbursement this Period 2000.00 Transaction ID : D475508
City Portland	State OR	
Zip Code 97208	Purpose of Disbursement Donation	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Futurepac		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address 232 NE 9th Ave.		Amount of Each Disbursement this Period 10000.00 Transaction ID : D475506
City Portland	State OR	
Zip Code 97232	Purpose of Disbursement Contribution	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	14000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 28	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. Sara Gelsler for State Senate		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address P.O. Box 42307		Amount of Each Disbursement this Period 2000.00
City Portland	State OR	
Zip Code 97242	Purpose of Disbursement Campaign Contribution	Transaction ID : D475507
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	16000.00