FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS
07 APR 18 AM 11:08

Office Use Only

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

Wyden for Senate

ADDRESS (number and street) ▼ PO Box 3498

☐ Check if different than previously reported. (ACC)

Portland — OR — 97208

2. FEC IDENTIFICATION NUMBER ▼ C00308676

CITY ▲ — STATE ▲ — ZIP CODE ▲

3. IS THIS REPORT ☒ NEW (N) OR ☐ AMENDED (A)

STATE ▼ DISTRICT: OR

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 Year-End Report (YE)
- ☐ Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
☐ Convention (12C) ☐ Special (12S)

Election on ☐ ☐ ☐ in the State of ☐

(c) 30-Day POST-Election Report for the:

☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on ☐ ☐ ☐ in the State of ☐

5. Covering Period 01 01 2007 through 03 31 2007

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: Louis Savage

Signature of Treasurer: [signature] Date 04 10 2007

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							

FEC FORM 3
(Revised 02/2003)

27020152571

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Wyden for Senate

Report Covering the Period: From: M M 01 D D 01 Y Y Y Y 2007 To: M M 03 D D 31 Y Y Y Y 2007

	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))	3951.00	103711.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	1340.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	3951.00	102371.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	54509.03	569515.13
(b) Total Offsets to Operating Expenditures (from Line 14)	4.16	1883.75
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	54504.87	567631.38
8. Cash on Hand at Close of Reporting Period (from Line 27)	1023899.71	
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

27020152572

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name
Wyden for Senate

Report Covering the Period: From: MM 01 DD 01 YYYY 2007 To: MM 03 DD 31 YYYY 2007

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)	2800.00	60895.00
(ii) Unitemized	151.00	6316.00
(iii) TOTAL of contributions from individuals ▶	2951.00	67211.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACS)	1000.00	36500.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	3951.00	103711.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	5068.09
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.)	4.16	1883.75
15. OTHER RECEIPTS (Dividends, interest, etc.)	22184.53	127113.11
16. **TOTAL RECEIPTS** (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4) ▶	26139.69	237775.95

27020152573

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES	54509.03	569515.13
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	0.00	440.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	900.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	1340.00
21. OTHER DISBURSEMENTS	0.00	1054220.00
22. **TOTAL DISBURSEMENTS** (add Lines 17, 18, 19(c), 20(d), and 21) ▷	54509.03	1625075.13

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	1052269.05
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3)	26139.69
25. SUBTOTAL (add Line 23 and Line 24)	1078408.74
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	54509.03
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	1023899.71

27020152574

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 5 / 64

[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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)
Wyden for Senate

A.
Full Name (Last, First, Middle Initial)
Daniel Byrne
Mailing Address 18112 Westminster Drive
City: Lake Oswego State: OR Zip Code: 97034
FEC ID number of contributing federal political committee. C
Name of Employer: M Financial
Occupation: Sr. VP Chief Product & Tech. Officer
Receipt For: 2010 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 1800.00

Date of Receipt: 03 / 04 / 2007
Transaction ID: SA11A1.20842
Amount of Each Receipt this Period: 800.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.
Full Name (Last, First, Middle Initial)
Gary Conley
Mailing Address 151 West 7th Avenue Suite 500
City: Eugene State: OR Zip Code: 97401
FEC ID number of contributing federal political committee. C
Name of Employer: Conley Capital Group
Occupation: President
Receipt For: 2010 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 1000.00

Date of Receipt: 03 / 21 / 2007
Transaction ID: SA11A1.20854
Amount of Each Receipt this Period: 1000.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.
Full Name (Last, First, Middle Initial)
Gary Hirschkron
Mailing Address 45 Walker Street No. 4
City: New York State: NY Zip Code: 10013
FEC ID number of contributing federal political committee. C
Name of Employer: AXA Financial
Occupation: Sr. Vice President
Receipt For: 2010 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 1500.00

Date of Receipt: 01 / 23 / 2007
Transaction ID: SA11A1.20806
Amount of Each Receipt this Period: 500.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 2300.00

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

27020152575

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 64
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
David Watros

Mailing Address 12641 SW Adrian Court

City: Lake Oswego
State: OR
Zip Code: 97034

FEC ID number of contributing federal political committee. C

Name of Employer: M Financial

Occupation: Vice President

Receipt For: 2010
[X] Primary [ ] General
[ ] Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 03 / 22 / 2007

Transaction ID: SA11A1.20852

Amount of Each Receipt this Period: 500.00

[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶	500.00
TOTAL This Period (last page this line number only) ▶	2800.00

27020152576

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 64
(check only one)
☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
Tonkon Torp PAC

Mailing Address 888 SW Fifth Avenue
Suite 1600

City: Portland
State: OR
Zip Code: 97204

FEC ID number of contributing federal political committee. C C00428912

Name of Employer

Occupation

Receipt For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM 01 / DD 31 / YYYY 2007

Transaction ID: SA11C.20800

Amount of Each Receipt this Period
1000.00

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 1000.00

TOTAL This Period (last page this line number only) ..... ▶ 1000.00

27020152577

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 64
(check only one)
☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☒ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Wyden for Senate

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

Mailing Address 4099 SE International Way
Suite #220

City: Milwaukie
State: OR
Zip Code: 97220

FEC ID number of contributing federal political committee. C

Name of Employer

Occupation

Receipt For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
210.41

Date of Receipt
03 / 21 / 2007

Transaction ID: SA14.21048

Amount of Each Receipt this Period
4.16

Payroll Credit

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶	4.16
TOTAL This Period (last page this line number only) ▶	4.16

27020152578

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 64
(check only one)
☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A.
Full Name (Last, First, Middle Initial)
Bank of America
Mailing Address 900 West Trade Street
City: Charlotte State: NC Zip Code: 28255
FEC ID number of contributing federal political committee. C
Name of Employer
Occupation
Receipt For: 2010
☒ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date
106410.42

Date of Receipt 01 / 30 / 2007
Transaction ID: SA15.21044
Amount of Each Receipt this Period
1911.58
Dividend
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.
Full Name (Last, First, Middle Initial)
Bank of America
Mailing Address 900 West Trade Street
City: Charlotte State: NC Zip Code: 28255
FEC ID number of contributing federal political committee. C
Name of Employer
Occupation
Receipt For: 2010
☒ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date
111879.17

Date of Receipt 02 / 15 / 2007
Transaction ID: SA15.20849
Amount of Each Receipt this Period
5468.75
Interest
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.
Full Name (Last, First, Middle Initial)
Bank of America
Mailing Address 900 West Trade Street
City: Charlotte State: NC Zip Code: 28255
FEC ID number of contributing federal political committee. C
Name of Employer
Occupation
Receipt For: 2010
☒ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date
117238.55

Date of Receipt 02 / 15 / 2007
Transaction ID: SA15.20850
Amount of Each Receipt this Period
5359.38
Interest
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 12739.71

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

27020152579

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 10 / 64

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A.
Full Name (Last, First, Middle Initial)
Bank of America
Mailing Address 900 West Trade Street
City: Charlotte State: NC Zip Code: 28255
FEC ID number of contributing federal political committee. C
Name of Employer
Occupation
Receipt For: 2010
☒ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date: 122051.05

Date of Receipt: 02 / 15 / 2007
Transaction ID: SA15.20851
Amount of Each Receipt this Period: 4812.50
Interest
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.
Full Name (Last, First, Middle Initial)
Bank of America
Mailing Address 900 West Trade Street
City: Charlotte State: NC Zip Code: 28255
FEC ID number of contributing federal political committee. C
Name of Employer
Occupation
Receipt For: 2010
☒ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date: 124013.59

Date of Receipt: 02 / 27 / 2007
Transaction ID: SA15.20848
Amount of Each Receipt this Period: 1962.54
Dividend
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.
Full Name (Last, First, Middle Initial)
Bank of America
Mailing Address 900 West Trade Street
City: Charlotte State: NC Zip Code: 28255
FEC ID number of contributing federal political committee. C
Name of Employer
Occupation
Receipt For: 2010
☒ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date: 126657.55

Date of Receipt: 03 / 29 / 2007
Transaction ID: SA15.21045
Amount of Each Receipt this Period: 2643.96
Dividend
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 9419.00

TOTAL This Period (last page this line number only) ▶ 22158.71

27020152580

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

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

Mailing Address 4099 SE International Way
Suite #220

City: Milwaukie State: OR Zip Code: 97220

Purpose of Disbursement: Payroll Fees

Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify) ▼

Transaction ID: SB17.20817
Date of Disbursement: 01 / 10 / 2007

Amount of Each Disbursement this Period: 6.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 4099 SE International Way
Suite #220

City: Milwaukie State: OR Zip Code: 97220

Purpose of Disbursement: Payroll Processing

Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify) ▼

Transaction ID: SB17.20818
Date of Disbursement: 01 / 12 / 2007

Amount of Each Disbursement this Period: 51.84

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 4099 SE International Way
Suite #220

City: Milwaukie State: OR Zip Code: 97220

Purpose of Disbursement: Payroll Taxes

Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify) ▼

Transaction ID: SB17.20819
Date of Disbursement: 01 / 12 / 2007

Amount of Each Disbursement this Period: 322.43

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 380.27

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

27020152581

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial): ADP
Mailing Address: 4099 SE International Way, Suite #220
City: Milwaukie State: OR Zip Code: 97220
Purpose of Disbursement: Payroll Taxes
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20822
Date of Disbursement: 01 / 17 / 2007
Amount of Each Disbursement this Period: 43.30
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial): ADP
Mailing Address: 4099 SE International Way, Suite #220
City: Milwaukie State: OR Zip Code: 97220
Purpose of Disbursement: Payroll Fees
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20823
Date of Disbursement: 01 / 22 / 2007
Amount of Each Disbursement this Period: 3.60
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial): ADP
Mailing Address: 4099 SE International Way, Suite #220
City: Milwaukie State: OR Zip Code: 97220
Purpose of Disbursement: Payroll Taxes
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20829
Date of Disbursement: 01 / 31 / 2007
Amount of Each Disbursement this Period: 322.43
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 369.33

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

27020152582

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A.
Full Name (Last, First, Middle Initial): ADP
Mailing Address: 4099 SE International Way, Suite #220
City: Milwaukie State: OR Zip Code: 97220
Purpose of Disbursement: Payroll Processing
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20830
Date of Disbursement: 01 / 31 / 2007
Amount of Each Disbursement this Period: 51.84
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): ADP
Mailing Address: 4099 SE International Way, Suite #220
City: Milwaukie State: OR Zip Code: 97220
Purpose of Disbursement: Payroll Processing
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20834
Date of Disbursement: 02 / 15 / 2007
Amount of Each Disbursement this Period: 51.84
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): ADP
Mailing Address: 4099 SE International Way, Suite #220
City: Milwaukie State: OR Zip Code: 97220
Purpose of Disbursement: Payroll Taxes
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20835
Date of Disbursement: 02 / 15 / 2007
Amount of Each Disbursement this Period: 322.43
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 426.11

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

27020152583

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

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

Mailing Address 4099 SE International Way
Suite #220

City: Milwaukie State: OR Zip Code: 97220

Purpose of Disbursement: Payroll Processing

Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.21020
Date of Disbursement: 02 / 28 / 2007

Amount of Each Disbursement this Period: 51.84

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 4099 SE International Way
Suite #220

City: Milwaukie State: OR Zip Code: 97220

Purpose of Disbursement: Payroll Taxes

Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.21021
Date of Disbursement: 02 / 28 / 2007

Amount of Each Disbursement this Period: 322.45

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 4099 SE International Way
Suite #220

City: Milwaukie State: OR Zip Code: 97220

Purpose of Disbursement: Payroll Fees

Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.21024
Date of Disbursement: 02 / 28 / 2007

Amount of Each Disbursement this Period: 6.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 380.29

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

27020152584

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
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[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

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

Mailing Address 4099 SE International Way
Suite #220

City: Milwaukie State: OR Zip Code: 97220

Purpose of Disbursement: Payroll Fees

Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.21032
Date of Disbursement: 03 / 14 / 2007

Amount of Each Disbursement this Period: 6.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 4099 SE International Way
Suite #220

City: Milwaukie State: OR Zip Code: 97220

Purpose of Disbursement: Payroll Taxes

Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.21033
Date of Disbursement: 03 / 15 / 2007

Amount of Each Disbursement this Period: 322.43

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 4099 SE International Way
Suite #220

City: Milwaukie State: OR Zip Code: 97220

Purpose of Disbursement: Payroll Processing

Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.21034
Date of Disbursement: 03 / 15 / 2007

Amount of Each Disbursement this Period: 51.84

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 380.27

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

27020152585

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Wyden for Senate

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

Mailing Address 4099 SE International Way
Suite #220

City: Milwaukie State: OR Zip Code: 97220

Purpose of Disbursement: Payroll Processing
Candidate Name:
Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.21038
Date of Disbursement: 03 / 30 / 2007

Amount of Each Disbursement this Period: 51.84

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 4099 SE International Way
Suite #220

City: Milwaukie State: OR Zip Code: 97220

Purpose of Disbursement: Payroll Taxes
Candidate Name:
Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.21039
Date of Disbursement: 03 / 30 / 2007

Amount of Each Disbursement this Period: 322.43

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 10800 NE 8th Street
Suite 600

City: Bellevue State: WA Zip Code: 98004

Purpose of Disbursement: Credit Card Fees
Candidate Name:
Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.20813
Date of Disbursement: 01 / 03 / 2007

Amount of Each Disbursement this Period: 20.40

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 394.67

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

27020152586

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER: (check only one)
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[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
Auth.net

Mailing Address 10800 NE 8th Street
Suite 600

City: Bellevue State: WA Zip Code: 98004

Purpose of Disbursement
Credit Card Fees

Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.21001
Date of Disbursement: 02 / 01 / 2007

Amount of Each Disbursement this Period: 20.20

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 10800 NE 8th Street
Suite 600

City: Bellevue State: WA Zip Code: 98004

Purpose of Disbursement
Credit Card Fees

Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.21026
Date of Disbursement: 03 / 02 / 2007

Amount of Each Disbursement this Period: 20.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Bank of America

Mailing Address PO Box 3977

City: Seattle State: WA Zip Code: 98124

Purpose of Disbursement
Credit Card Fees

Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.20807
Date of Disbursement: 01 / 02 / 2007

Amount of Each Disbursement this Period: 55.38

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 95.58

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

27020152587

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER: (check only one)
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[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
Bank of America

Mailing Address PO Box 3977

City: Seattle State: WA Zip Code: 98124

Purpose of Disbursement
Credit Card

Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify) ▼

Transaction ID: SB17.20828
Date of Disbursement: 01 / 30 / 2007

Amount of Each Disbursement this Period: 3645.09

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 1310 SW 3rd Avenue

City: Portland State: OR Zip Code: 97201

Purpose of Disbursement
Food and Beverage

Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify) ▼

Transaction ID: SB17.20828.5
Date of Disbursement: 01 / 30 / 2007

Amount of Each Disbursement this Period: 27.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

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

Mailing Address PO Box 1915

City: Beltsville State: MD Zip Code: 20705

Purpose of Disbursement
Telephone Service

Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify) ▼

Transaction ID: SB17.20828.6
Date of Disbursement: 01 / 30 / 2007

Amount of Each Disbursement this Period: 564.92

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 3645.09

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

27020152588

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

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

Mailing Address PO Box 1915

City: Beltsville State: MD Zip Code: 20705

Purpose of Disbursement: Telephone Service

Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify) ▼

Transaction ID: SB17.20828.7
Date of Disbursement: 01 / 30 / 2007

Amount of Each Disbursement this Period: 99.97

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Senators Dining Room

Mailing Address S-120 Capitol

City: Washington State: DC Zip Code: 20510

Purpose of Disbursement: Meeting Expenses

Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify) ▼

Transaction ID: SB17.20828.9
Date of Disbursement: 01 / 30 / 2007

Amount of Each Disbursement this Period: 107.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

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

Mailing Address 15 E Street NW

City: Washington State: DC Zip Code: 20001

Purpose of Disbursement: Catering

Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify) ▼

Transaction ID: SB17.20828.10
Date of Disbursement: 01 / 30 / 2007

Amount of Each Disbursement this Period: 160.08

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

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

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

27020152589

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER: (check only one)
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[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
Office Special Function

Mailing Address United States Senate

City Washington | State DC | Zip Code 20510

Purpose of Disbursement
Catering

Candidate Name

001 Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify) ▼

Transaction ID: SB17.20828.11
Date of Disbursement 01 / 30 / 2007

Amount of Each Disbursement this Period
137.20

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Office Special Function

Mailing Address United States Senate

City Washington | State DC | Zip Code 20510

Purpose of Disbursement
Catering

Candidate Name

001 Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify) ▼

Transaction ID: SB17.20828.12
Date of Disbursement 01 / 30 / 2007

Amount of Each Disbursement this Period
665.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Comcast Cable Comm.

Mailing Address PO Box 173885

City Comcast | State CO | Zip Code 80217

Purpose of Disbursement
Internet Service

Candidate Name

001 Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify) ▼

Transaction ID: SB17.20828.13
Date of Disbursement 01 / 30 / 2007

Amount of Each Disbursement this Period
33.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

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

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27020152590

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A.
Full Name (Last, First, Middle Initial): Washington National Airport
Mailing Address: 1 Aviation Circle
City: Washington State: DC Zip Code: 20001
Purpose of Disbursement: Travel Expenses
Candidate Name:
Category/Type: 002
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20828.14
Date of Disbursement: 01 / 30 / 2007
Amount of Each Disbursement this Period: 23.89
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial): Hudson News
Mailing Address: One Meadowlands Plaza
City: East Rutherford State: NJ Zip Code: 07073
Purpose of Disbursement: Travel Expenses
Candidate Name:
Category/Type: 002
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20828.16
Date of Disbursement: 01 / 30 / 2007
Amount of Each Disbursement this Period: 19.10
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial): Bistro Bis
Mailing Address: 15 E Street NW
City: Washington State: DC Zip Code: 20001
Purpose of Disbursement: Catering
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20828.18
Date of Disbursement: 01 / 30 / 2007
Amount of Each Disbursement this Period: 83.03
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

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

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

27020152591

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A.
Full Name (Last, First, Middle Initial): Bistro Bis
Mailing Address: 15 E Street NW
City: Washington State: DC Zip Code: 20001
Purpose of Disbursement: Catering
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20828.19
Date of Disbursement: 01 / 30 / 2007
Amount of Each Disbursement this Period: 71.13
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial): Washington National Airport
Mailing Address: 1 Aviation Circle
City: Washington State: DC Zip Code: 20001
Purpose of Disbursement: Travel Expenses
Candidate Name:
Category/Type: 002
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20828.20
Date of Disbursement: 01 / 30 / 2007
Amount of Each Disbursement this Period: 19.27
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial): FedEx
Mailing Address: 942 S Shady Grove Road
City: Memphis State: TN Zip Code: 38120
Purpose of Disbursement: Shipping
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20828.21
Date of Disbursement: 01 / 30 / 2007
Amount of Each Disbursement this Period: 26.67
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

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

27020152592

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER: (check only one)
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[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial): Paradise Bakery
Mailing Address: 1310 SW 3rd Avenue
City: Portland State: OR Zip Code: 97201
Purpose of Disbursement: Catering
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20828.22
Date of Disbursement: 01 / 30 / 2007
Amount of Each Disbursement this Period: 24.30
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial): Comcast Cable Comm.
Mailing Address: PO Box 173885
City: Comcast State: CO Zip Code: 80217
Purpose of Disbursement: Internet Service
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20828.23
Date of Disbursement: 01 / 30 / 2007
Amount of Each Disbursement this Period: 55.95
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial): Bistro Bis
Mailing Address: 15 E Street NW
City: Washington State: DC Zip Code: 20001
Purpose of Disbursement: Catering
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20828.26
Date of Disbursement: 01 / 30 / 2007
Amount of Each Disbursement this Period: 667.33
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

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

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

27020152593

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
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[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
Yahoo Mail

Mailing Address 721 First Avenue

City: Sunnyvale State: CA Zip Code: 94089

Purpose of Disbursement: email

Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.20828.27
Date of Disbursement: 01 / 30 / 2007

Amount of Each Disbursement this Period: 9.95

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
AT&T Worldnet

Mailing Address PO Box 15158

City: Asheville State: NC Zip Code: 28813

Purpose of Disbursement: Internet Service

Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.20828.28
Date of Disbursement: 01 / 30 / 2007

Amount of Each Disbursement this Period: 19.95

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

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

Mailing Address 1310 SW 3rd Avenue

City: Portland State: OR Zip Code: 97201

Purpose of Disbursement: Catering

Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.20828.30
Date of Disbursement: 01 / 30 / 2007

Amount of Each Disbursement this Period: 87.50

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

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

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

27020152594

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
Comcast Cable Comm.

Mailing Address PO Box 173885

City: Comcast State: CO Zip Code: 80217

Purpose of Disbursement: Internet Service

Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify) ▼

Transaction ID: SB17.20828.33
Date of Disbursement: 01 / 30 / 2007

Amount of Each Disbursement this Period: 38.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Bank of America

Mailing Address PO Box 3977

City: Seattle State: WA Zip Code: 98124

Purpose of Disbursement: Bank fees

Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify) ▼

Transaction ID: SB17.20833
Date of Disbursement: 01 / 31 / 2007

Amount of Each Disbursement this Period: 3.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Bank of America

Mailing Address PO Box 3977

City: Seattle State: WA Zip Code: 98124

Purpose of Disbursement: Credit Card Fees

Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify) ▼

Transaction ID: SB17.21000
Date of Disbursement: 02 / 01 / 2007

Amount of Each Disbursement this Period: 55.10

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **58.10**

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

27020152595

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial): Bank of America
Mailing Address: 900 West Trade Street
City: Charlotte State: NC Zip Code: 28255
Purpose of Disbursement: Investment Expense
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.21049
Date of Disbursement: 02 / 15 / 2007
Amount of Each Disbursement this Period: 4641.60
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial): Bank of America
Mailing Address: PO Box 3977
City: Seattle State: WA Zip Code: 98124
Purpose of Disbursement: Credit Card Fees
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.21025
Date of Disbursement: 03 / 01 / 2007
Amount of Each Disbursement this Period: 54.90
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial): Bank Of America
Mailing Address: PO Box 2930
City: Phoenix State: AZ Zip Code: 85062
Purpose of Disbursement: Credit Card
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20896
Date of Disbursement: 03 / 20 / 2007
Amount of Each Disbursement this Period: 4513.90
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 9210.40

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

27020152596

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial): Starbucks
Mailing Address: PO Box 3717
City: Seattle State: WA Zip Code: 98124
Purpose of Disbursement: Meeting Expenses
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20896.2
Date of Disbursement: 03 / 20 / 2007
Amount of Each Disbursement this Period: 35.80
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial): Fred Meyer
Mailing Address: 3800 SE 22nd
City: Portland State: OR Zip Code: 97202
Purpose of Disbursement: Office Supplies
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20896.3
Date of Disbursement: 03 / 20 / 2007
Amount of Each Disbursement this Period: 90.97
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial): Veritable Quandary
Mailing Address: 1220 SW 1st Avenue
City: Portland State: OR Zip Code: 97204
Purpose of Disbursement: Meeting Expenses
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20896.5
Date of Disbursement: 03 / 20 / 2007
Amount of Each Disbursement this Period: 23.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

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

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

27020152597

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
Sinju Restaurant

Mailing Address 1022 NW Johnson Street

City: Portland State: OR Zip Code: 97209

Purpose of Disbursement: Meeting Expenses
Candidate Name
Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify) ▼

Transaction ID: SB17.20896.6
Date of Disbursement: 03 / 20 / 2007

Amount of Each Disbursement this Period: 40.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

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

Mailing Address 200 SW Market Street #105

City: Portland State: OR Zip Code: 97201

Purpose of Disbursement: Meeting Expenses
Candidate Name
Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify) ▼

Transaction ID: SB17.20896.8
Date of Disbursement: 03 / 20 / 2007

Amount of Each Disbursement this Period: 42.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

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

Mailing Address One Meadowlands Plaza

City: East Rutherford State: NJ Zip Code: 07073

Purpose of Disbursement: Travel Expenses
Candidate Name
Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify) ▼

Transaction ID: SB17.20896.13
Date of Disbursement: 03 / 20 / 2007

Amount of Each Disbursement this Period: 21.55

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

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

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

27020152598

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A.
Full Name (Last, First, Middle Initial): Bistro Bis
Mailing Address: 15 E Street NW
City: Washington State: DC Zip Code: 20001
Purpose of Disbursement: Catering
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: SB17.20896.14
Date of Disbursement: 03 / 20 / 2007
Amount of Each Disbursement this Period: 137.35
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial): Senators Dining Room
Mailing Address: S-120 Capitol
City: Washington State: DC Zip Code: 20510
Purpose of Disbursement: Meeting Expenses
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: SB17.20896.15
Date of Disbursement: 03 / 20 / 2007
Amount of Each Disbursement this Period: 68.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial): Comcast Cable Comm.
Mailing Address: PO Box 173885
City: Comcast State: CO Zip Code: 80217
Purpose of Disbursement: Internet Service
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: SB17.20896.16
Date of Disbursement: 03 / 20 / 2007
Amount of Each Disbursement this Period: 38.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

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

27020152599

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
Washington National Airport

Mailing Address 1 Aviation Circle

City: Washington State: DC Zip Code: 20001

Purpose of Disbursement: Travel Expenses

Candidate Name

Category/Type: 002

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.20896.17
Date of Disbursement: 03 / 20 / 2007

Amount of Each Disbursement this Period: 21.61

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

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

Mailing Address 15 E Street NW

City: Washington State: DC Zip Code: 20001

Purpose of Disbursement: Catering

Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.20896.18
Date of Disbursement: 03 / 20 / 2007

Amount of Each Disbursement this Period: 112.95

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

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

Mailing Address One Meadowlands Plaza

City: East Rutherford State: NJ Zip Code: 07073

Purpose of Disbursement: Travel Expenses

Candidate Name

Category/Type: 002

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.20896.19
Date of Disbursement: 03 / 20 / 2007

Amount of Each Disbursement this Period: 10.22

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

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

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

27020152600

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
Paradies Washington National

Mailing Address Washington National Airport

City: Washington State: DC Zip Code: 20001

Purpose of Disbursement: Travel Expenses

Candidate Name

Category/Type: 002

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify) ▼

Transaction ID: SB17.20896.20
Date of Disbursement: 03 / 20 / 2007

Amount of Each Disbursement this Period: 26.96

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

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

Mailing Address 7000 NE Airport Way
Room B1416

City: Portland State: OR Zip Code: 97218

Purpose of Disbursement: Travel Expenses

Candidate Name

Category/Type: 002

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify) ▼

Transaction ID: SB17.20896.22
Date of Disbursement: 03 / 20 / 2007

Amount of Each Disbursement this Period: 11.49

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

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

Mailing Address One Meadowlands Plaza

City: East Rutherford State: NJ Zip Code: 07073

Purpose of Disbursement: Travel Expenses

Candidate Name

Category/Type: 002

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify) ▼

Transaction ID: SB17.20896.23
Date of Disbursement: 03 / 20 / 2007

Amount of Each Disbursement this Period: 20.48

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

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

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

27020152601

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial): Hudson News
Mailing Address: One Meadowlands Plaza
City: East Rutherford State: NJ Zip Code: 07073
Purpose of Disbursement: Travel Expenses
Candidate Name:
Category/Type: 002
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20896.24
Date of Disbursement: 03 / 20 / 2007
Amount of Each Disbursement this Period: 8.19
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial): Senators Dining Room
Mailing Address: S-120 Capitol
City: Washington State: DC Zip Code: 20510
Purpose of Disbursement: Meeting Expenses
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20896.25
Date of Disbursement: 03 / 20 / 2007
Amount of Each Disbursement this Period: 44.50
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial): Senators Dining Room
Mailing Address: S-120 Capitol
City: Washington State: DC Zip Code: 20510
Purpose of Disbursement: Meeting Expenses
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20896.26
Date of Disbursement: 03 / 20 / 2007
Amount of Each Disbursement this Period: 45.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

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

27020152602

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
Dulles Int'l Airport

Mailing Address 1 Aviation Circle

City: Washington State: DC Zip Code: 20001

Purpose of Disbursement: Travel Expenses

Candidate Name

Category/Type: 002

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify) ▼

Transaction ID: SB17.20896.27
Date of Disbursement: 03 / 20 / 2007

Amount of Each Disbursement this Period: 19.88

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

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

Mailing Address PO Box 3717

City: Seattle State: WA Zip Code: 98124

Purpose of Disbursement: Meeting Expenses

Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify) ▼

Transaction ID: SB17.20896.32
Date of Disbursement: 03 / 20 / 2007

Amount of Each Disbursement this Period: 32.50

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

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

Mailing Address 1338 NW Hoyt Street

City: Portland State: OR Zip Code: 97209

Purpose of Disbursement: Catering

Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify) ▼

Transaction ID: SB17.20896.33
Date of Disbursement: 03 / 20 / 2007

Amount of Each Disbursement this Period: 352.50

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

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

27020152603

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial): Pizzicato
Mailing Address: 2523 SE 9th Avenue
City: Portland State: OR Zip Code: 97202
Purpose of Disbursement: Catering
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20896.34
Date of Disbursement: 03 / 20 / 2007
Amount of Each Disbursement this Period: 87.50
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial): Courtyard Restaurant
Mailing Address: 5736 NE 33rd
City: Portland State: OR Zip Code: 97201
Purpose of Disbursement: Catering
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20896.35
Date of Disbursement: 03 / 20 / 2007
Amount of Each Disbursement this Period: 338.10
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial): UPS
Mailing Address: PO Box 650580
City: Dallas State: TX Zip Code: 75265
Purpose of Disbursement: Shipping
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20896.37
Date of Disbursement: 03 / 20 / 2007
Amount of Each Disbursement this Period: 26.06
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

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

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

27020152604

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial): Veritable Quandary
Mailing Address: 1220 SW 1st Avenue
City: Portland State: OR Zip Code: 97204
Purpose of Disbursement: Catering
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20896.38
Date of Disbursement: 03 / 20 / 2007
Amount of Each Disbursement this Period: 1038.40
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial): Comcast Cable Comm.
Mailing Address: PO Box 173885
City: Comcast State: CO Zip Code: 80217
Purpose of Disbursement: Internet Service
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20896.39
Date of Disbursement: 03 / 20 / 2007
Amount of Each Disbursement this Period: 55.95
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial): Senators Dining Room
Mailing Address: S-120 Capitol
City: Washington State: DC Zip Code: 20510
Purpose of Disbursement: Meeting Expenses
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20896.40
Date of Disbursement: 03 / 20 / 2007
Amount of Each Disbursement this Period: 90.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

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

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

27020152605

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial): Yahoo Mail
Mailing Address: 721 First Avenue
City: Sunnyvale State: CA Zip Code: 94089
Purpose of Disbursement: Email
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20896.41
Date of Disbursement: 03 / 20 / 2007
Amount of Each Disbursement this Period: 9.95
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial): Dell Marketing Company
Mailing Address: PO Box 149261
City: Austin State: TX Zip Code: 78714
Purpose of Disbursement: Office Equipment
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20896.42
Date of Disbursement: 03 / 20 / 2007
Amount of Each Disbursement this Period: 169.89
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial): AT&T Worldnet
Mailing Address: PO Box 15158
City: Asheville State: NC Zip Code: 28813
Purpose of Disbursement: Internet Service
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20896.43
Date of Disbursement: 03 / 20 / 2007
Amount of Each Disbursement this Period: 19.95
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

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

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27020152606

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial): Office Depot
Mailing Address: 1901 L Street NW
City: Washington State: DC Zip Code: 20036
Purpose of Disbursement: Office Supplies
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20896.45
Date of Disbursement: 03 / 20 / 2007
Amount of Each Disbursement this Period: 159.99
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial): USPS
Mailing Address: 815 NW Hoyt
City: Portland State: OR Zip Code: 97208
Purpose of Disbursement: Postage
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20896.46
Date of Disbursement: 03 / 20 / 2007
Amount of Each Disbursement this Period: 121.20
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial): Comcast Cable Comm.
Mailing Address: PO Box 173885
City: Comcast State: CO Zip Code: 80217
Purpose of Disbursement: Internet Service
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20896.48
Date of Disbursement: 03 / 20 / 2007
Amount of Each Disbursement this Period: 49.95
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

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27020152607

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial): Starbucks
Mailing Address: PO Box 3717
City: Seattle State: WA Zip Code: 98124
Purpose of Disbursement: Meeting Expenses
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20896.49
Date of Disbursement: 03 / 20 / 2007
Amount of Each Disbursement this Period: 29.70
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial): Elephants Catering
Mailing Address: 1611 SE 7th Street
City: Portland State: OR Zip Code: 97214
Purpose of Disbursement: Catering
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20896.50
Date of Disbursement: 03 / 20 / 2007
Amount of Each Disbursement this Period: 226.25
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial): Safeway
Mailing Address: 1100 NE Broadway
City: Portland State: OR Zip Code: 97232
Purpose of Disbursement: Catering
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20896.51
Date of Disbursement: 03 / 20 / 2007
Amount of Each Disbursement this Period: 150.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

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27020152608

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial): Safeway
Mailing Address: 1100 NE Broadway
City: Portland State: OR Zip Code: 97232
Purpose of Disbursement: Catering
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20896.52
Date of Disbursement: 03 / 20 / 2007
Amount of Each Disbursement this Period: 125.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial): USPS
Mailing Address: 815 NW Hoyt
City: Portland State: OR Zip Code: 97208
Purpose of Disbursement: Postage
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20896.54
Date of Disbursement: 03 / 20 / 2007
Amount of Each Disbursement this Period: 12.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial): USPS
Mailing Address: 815 NW Hoyt
City: Portland State: OR Zip Code: 97208
Purpose of Disbursement: Postage
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20896.55
Date of Disbursement: 03 / 20 / 2007
Amount of Each Disbursement this Period: 4.20
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

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27020152609

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial): Bank of America
Mailing Address: PO Box 3977
City: Seattle State: WA Zip Code: 98124
Purpose of Disbursement: Credit Card
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20960
Date of Disbursement: 03 / 30 / 2007
Amount of Each Disbursement this Period: 2822.08
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial): Bistro Bis
Mailing Address: 15 E Street NW
City: Washington State: DC Zip Code: 20001
Purpose of Disbursement: Catering
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20960.4
Date of Disbursement: 03 / 30 / 2007
Amount of Each Disbursement this Period: 66.18
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial): Senators Dining Room
Mailing Address: S-120 Capitol
City: Washington State: DC Zip Code: 20510
Purpose of Disbursement: Meeting Expenses
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20960.5
Date of Disbursement: 03 / 30 / 2007
Amount of Each Disbursement this Period: 52.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 2822.08

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27020152610

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A.
Full Name (Last, First, Middle Initial): Hudson News
Mailing Address: One Meadowlands Plaza
City: East Rutherford State: NJ Zip Code: 07073
Purpose of Disbursement: Travel Expenses
Candidate Name:
Category/Type: 002
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20960.6
Date of Disbursement: 03 / 30 / 2007
Amount of Each Disbursement this Period: 19.45
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial): Hudson News
Mailing Address: One Meadowlands Plaza
City: East Rutherford State: NJ Zip Code: 07073
Purpose of Disbursement: Travel Expenses
Candidate Name:
Category/Type: 002
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20960.7
Date of Disbursement: 03 / 30 / 2007
Amount of Each Disbursement this Period: 18.40
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial): Comcast Cable Comm.
Mailing Address: PO Box 173885
City: Comcast State: CO Zip Code: 80217
Purpose of Disbursement: Internet Service
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20960.9
Date of Disbursement: 03 / 30 / 2007
Amount of Each Disbursement this Period: 38.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

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

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27020152611

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial): Senators Dining Room
Mailing Address: S-120 Capitol
City: Washington State: DC Zip Code: 20510
Purpose of Disbursement: Meeting Expenses
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20960.10
Date of Disbursement: 03 / 30 / 2007
Amount of Each Disbursement this Period: 52.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial): Senators Dining Room
Mailing Address: S-120 Capitol
City: Washington State: DC Zip Code: 20510
Purpose of Disbursement: Meeting Expenses
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20960.11
Date of Disbursement: 03 / 30 / 2007
Amount of Each Disbursement this Period: 75.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial): Dulles Int'l Airport
Mailing Address: 1 Aviation Circle
City: Washington State: DC Zip Code: 20001
Purpose of Disbursement: Travel Expenses
Candidate Name:
Category/Type: 002
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20960.12
Date of Disbursement: 03 / 30 / 2007
Amount of Each Disbursement this Period: 18.66
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

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27020152612

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER: (check only one)
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[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A.
Full Name (Last, First, Middle Initial): Paradies Portland
Mailing Address: 7000 NE Airport Way, Room B1416
City: Portland State: OR Zip Code: 97218
Purpose of Disbursement: Travel Expenses
Candidate Name:
Category/Type: 002
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20960.14
Date of Disbursement: 03 / 30 / 2007
Amount of Each Disbursement this Period: 25.85
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial): Paradies Portland
Mailing Address: 7000 NE Airport Way, Room B1416
City: Portland State: OR Zip Code: 97218
Purpose of Disbursement: Travel Expenses
Candidate Name:
Category/Type: 002
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20960.15
Date of Disbursement: 03 / 30 / 2007
Amount of Each Disbursement this Period: 6.38
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial): Distinctive Stationary
Mailing Address: 1321 Mercedes Drive
City: Hanover State: MD Zip Code: 21076
Purpose of Disbursement: Stationary
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20960.16
Date of Disbursement: 03 / 30 / 2007
Amount of Each Disbursement this Period: 1493.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

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27020152613

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial): Senators Dining Room
Mailing Address: S-120 Capitol
City: Washington State: DC Zip Code: 20510
Purpose of Disbursement: Meeting Expenses
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20960.17
Date of Disbursement: 03 / 30 / 2007
Amount of Each Disbursement this Period: 44.50
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial): International News
Mailing Address:
City: New York State: NY Zip Code: 10012
Purpose of Disbursement: Travel Expenses
Candidate Name:
Category/Type: 002
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20960.18
Date of Disbursement: 03 / 30 / 2007
Amount of Each Disbursement this Period: 21.79
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial): Hudson News
Mailing Address: One Meadowlands Plaza
City: East Rutherford State: NJ Zip Code: 07073
Purpose of Disbursement: Travel Expenses
Candidate Name:
Category/Type: 002
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20960.19
Date of Disbursement: 03 / 30 / 2007
Amount of Each Disbursement this Period: 11.06
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

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27020152614

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial): Comcast Cable Comm.
Mailing Address: PO Box 173885
City: Comcast State: CO Zip Code: 80217
Purpose of Disbursement: Internet Service
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20960.21
Date of Disbursement: 03 / 30 / 2007
Amount of Each Disbursement this Period: 55.95
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial): Senators Dining Room
Mailing Address: S-120 Capitol
City: Washington State: DC Zip Code: 20510
Purpose of Disbursement: Meeting Expenses
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20960.22
Date of Disbursement: 03 / 30 / 2007
Amount of Each Disbursement this Period: 112.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial): Yahoo Mail
Mailing Address: 721 First Avenue
City: Sunnyvale State: CA Zip Code: 94089
Purpose of Disbursement: Email
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20960.23
Date of Disbursement: 03 / 30 / 2007
Amount of Each Disbursement this Period: 9.95
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

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27020152615

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial): AT&T Worldnet
Mailing Address: PO Box 15158
City: Asheville State: NC Zip Code: 28813
Purpose of Disbursement: Internet Service
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: SB17.20960.24
Date of Disbursement: 03 / 30 / 2007
Amount of Each Disbursement this Period: 19.95
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial): Pizzicato
Mailing Address: 2523 SE 9th Avenue
City: Portland State: OR Zip Code: 97202
Purpose of Disbursement: Catering
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: SB17.20960.26
Date of Disbursement: 03 / 30 / 2007
Amount of Each Disbursement this Period: 157.83
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial): Comcast Cable Comm.
Mailing Address: PO Box 173885
City: Comcast State: CO Zip Code: 80217
Purpose of Disbursement: Internet Service
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: SB17.20960.27
Date of Disbursement: 03 / 30 / 2007
Amount of Each Disbursement this Period: 47.95
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

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

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

27020152816

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial): Cingular Wireless
Mailing Address: PO Box 8229
City: Aurora State: IL Zip Code: 60572
Purpose of Disbursement: Telephone Service
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20810
Date of Disbursement: 01 / 02 / 2007
Amount of Each Disbursement this Period: 65.37
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial): Cingular Wireless
Mailing Address: PO Box 8229
City: Aurora State: IL Zip Code: 60572
Purpose of Disbursement: Telephone Service
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20812
Date of Disbursement: 01 / 02 / 2007
Amount of Each Disbursement this Period: 110.31
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial): Cingular Wireless
Mailing Address: PO Box 8229
City: Aurora State: IL Zip Code: 60572
Purpose of Disbursement: Telephone Service
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20824
Date of Disbursement: 01 / 23 / 2007
Amount of Each Disbursement this Period: 110.44
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 286.12

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

27020152617

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A.
Full Name (Last, First, Middle Initial): Cingular Wireless
Mailing Address: PO Box 8229
City: Aurora State: IL Zip Code: 60572
Purpose of Disbursement: Telephone Service
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.21007
Date of Disbursement: 02 / 06 / 2007
Amount of Each Disbursement this Period: 89.44
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Cingular Wireless
Mailing Address: PO Box 8229
City: Aurora State: IL Zip Code: 60572
Purpose of Disbursement: Telephone Service
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20838
Date of Disbursement: 02 / 26 / 2007
Amount of Each Disbursement this Period: 71.15
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Cingular Wireless
Mailing Address: PO Box 8229
City: Aurora State: IL Zip Code: 60572
Purpose of Disbursement: Telephone Service
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20845
Date of Disbursement: 03 / 20 / 2007
Amount of Each Disbursement this Period: 219.21
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 379.80

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

27020152618

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A.
Full Name (Last, First, Middle Initial): Comcast Cable Comm.
Mailing Address: PO Box 173885
City: Comcast State: CO Zip Code: 80217
Purpose of Disbursement: Internet Service
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.21011
Date of Disbursement: 02 / 08 / 2007
Amount of Each Disbursement this Period: 55.95
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Comcast Cable Comm.
Mailing Address: PO Box 173885
City: Comcast State: CO Zip Code: 80217
Purpose of Disbursement: Internet Service
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.21019
Date of Disbursement: 02 / 14 / 2007
Amount of Each Disbursement this Period: 55.95
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Comcast Cable Comm.
Mailing Address: PO Box 173885
City: Comcast State: CO Zip Code: 80217
Purpose of Disbursement: Internet Service
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20996
Date of Disbursement: 03 / 22 / 2007
Amount of Each Disbursement this Period: 55.95
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 167.85

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

27020152619

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A.
Full Name (Last, First, Middle Initial): Patty Costello
Mailing Address: 7427 SE 30th
City: Portland State: OR Zip Code: 97202
Purpose of Disbursement: Production Expenses
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.21015
Date of Disbursement: 02 / 14 / 2007
Amount of Each Disbursement this Period: 300.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): DEMOCRATIC PARTY OF OREGON
Mailing Address: 232 NE 9th Ave. Suite 105
City: Portland State: OR Zip Code: 97232
Purpose of Disbursement: Rent
Candidate Name: DEMOCRATIC PARTY OF OREGON
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20808
Date of Disbursement: 01 / 02 / 2007
Amount of Each Disbursement this Period: 403.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): DEMOCRATIC PARTY OF OREGON
Mailing Address: 232 NE 9th Ave. Suite 105
City: Portland State: OR Zip Code: 97232
Purpose of Disbursement: Rent
Candidate Name: DEMOCRATIC PARTY OF OREGON
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.21003
Date of Disbursement: 02 / 05 / 2007
Amount of Each Disbursement this Period: 403.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 1106.00

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

27020152620

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A.
Full Name (Last, First, Middle Initial)
DEMOCRATIC PARTY OF OREGON

Mailing Address 232 NE 9th Ave.
Suite 105

City Portland | State OR | Zip Code 97232

Purpose of Disbursement
Rent

Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.21028
Date of Disbursement
03 / 05 / 2007

Amount of Each Disbursement this Period
403.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial)
DEMOCRATIC PARTY OF OREGON

Mailing Address 232 NE 9th Ave.
Suite 105

City Portland | State OR | Zip Code 97232

Purpose of Disbursement
Event Tickets

Candidate Name
DEMOCRATIC PARTY OF OREGON

Category/Type: 011

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.21030
Date of Disbursement
03 / 13 / 2007

Amount of Each Disbursement this Period
500.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial)
Internal Revenue Service

Mailing Address

City Ogden | State UT | Zip Code 84409

Purpose of Disbursement
Taxes

Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.21027
Date of Disbursement
03 / 05 / 2007

Amount of Each Disbursement this Period
9164.87

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 10067.87

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

27020152621

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A.
Full Name (Last, First, Middle Initial): Kardon, Melissa
Mailing Address: 2911 NE Hancock
City: Portland State: OR Zip Code: 97212
Purpose of Disbursement: Telephone Reimbursement
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20814
Date of Disbursement: 01 / 03 / 2007
Amount of Each Disbursement this Period: 177.04
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Kardon, Melissa
Mailing Address: 2911 NE Hancock
City: Portland State: OR Zip Code: 97212
Purpose of Disbursement: Accounting Consultant
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20820
Date of Disbursement: 01 / 12 / 2007
Amount of Each Disbursement this Period: 498.79
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Kardon, Melissa
Mailing Address: 2911 NE Hancock
City: Portland State: OR Zip Code: 97212
Purpose of Disbursement: Accounting Consultant
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20831
Date of Disbursement: 01 / 31 / 2007
Amount of Each Disbursement this Period: 498.79
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 1174.62

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

27020152622

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
Kardon, Melissa

Mailing Address 2911 NE Hancock

City: Portland State: OR Zip Code: 97212

Purpose of Disbursement: Reimbursement

Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.21010
Date of Disbursement: 02 / 08 / 2007

Amount of Each Disbursement this Period: 37.49

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 2911 NE Hancock

City: Portland State: OR Zip Code: 97212

Purpose of Disbursement: Accounting Consultant

Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.20836
Date of Disbursement: 02 / 15 / 2007

Amount of Each Disbursement this Period: 498.79

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 2911 NE Hancock

City: Portland State: OR Zip Code: 97212

Purpose of Disbursement: Accounting Consultant

Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.21023
Date of Disbursement: 02 / 28 / 2007

Amount of Each Disbursement this Period: 498.79

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 1035.07

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

27020152623

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial): Kardon, Melissa
Mailing Address: 2911 NE Hancock
City: Portland State: OR Zip Code: 97212
Purpose of Disbursement: Accounting Consultant
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.21035
Date of Disbursement: 03 / 15 / 2007
Amount of Each Disbursement this Period: 498.79
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial): Kardon, Melissa
Mailing Address: 2911 NE Hancock
City: Portland State: OR Zip Code: 97212
Purpose of Disbursement: Telphone Reimbursement
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20995
Date of Disbursement: 03 / 22 / 2007
Amount of Each Disbursement this Period: 174.22
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial): Kardon, Melissa
Mailing Address: 2911 NE Hancock
City: Portland State: OR Zip Code: 97212
Purpose of Disbursement: Accounting Consultant
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.21040
Date of Disbursement: 03 / 30 / 2007
Amount of Each Disbursement this Period: 498.79
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 1171.80

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

27020152624

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
Mandate Media

Mailing Address 937 NE Webster

City: Portland State: OR Zip Code: 97211

Purpose of Disbursement: Website

Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.21002
Date of Disbursement: 02 / 02 / 2007

Amount of Each Disbursement this Period: 4060.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 937 NE Webster

City: Portland State: OR Zip Code: 97211

Purpose of Disbursement: Website

Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.21013
Date of Disbursement: 02 / 13 / 2007

Amount of Each Disbursement this Period: 4000.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 937 NE Webster

City: Portland State: OR Zip Code: 97211

Purpose of Disbursement: Website

Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.21029
Date of Disbursement: 03 / 13 / 2007

Amount of Each Disbursement this Period: 4000.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 12060.00

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

27020152625

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial): Brian Marcus
Mailing Address: 309 East 8th Street, Apt. D2
City: New York State: NY Zip Code: 10009
Purpose of Disbursement: Photography
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.21004
Date of Disbursement: 02 / 06 / 2007
Amount of Each Disbursement this Period: 750.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial): NARAL Pro-Choice Oregon
Mailing Address: PO Box 40472
City: Portland State: OR Zip Code: 97240
Purpose of Disbursement: Event Tickets
Candidate Name:
Category/Type: 011
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20840
Date of Disbursement: 02 / 26 / 2007
Amount of Each Disbursement this Period: 1250.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial): Open Sourcery
Mailing Address: 4684 SE Johnson Creek Boulevard
City: Portland State: OR Zip Code: 97222
Purpose of Disbursement: Computer Services
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.21031
Date of Disbursement: 03 / 13 / 2007
Amount of Each Disbursement this Period: 613.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 2613.00

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

27020152626

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A.
Full Name (Last, First, Middle Initial): Ron Wyden
Mailing Address: PO Box 3498
City: Portland State: OR Zip Code: 97208
Purpose of Disbursement: Travel Expenses Reimbursement
Candidate Name:
Category/Type: 002
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.21012
Date of Disbursement: 02 / 09 / 2007
Amount of Each Disbursement this Period: 85.40
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): SAIF Corporation
Mailing Address: 400 High Street SE
City: Salem State: OR Zip Code: 97312
Purpose of Disbursement: Workers Compensation
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20997
Date of Disbursement: 03 / 23 / 2007
Amount of Each Disbursement this Period: 528.25
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Sprint
Mailing Address: PO Box 152406
City: Irvine State: TX Zip Code: 75015
Purpose of Disbursement: Telephone Service
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20809
Date of Disbursement: 01 / 02 / 2007
Amount of Each Disbursement this Period: 18.94
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 632.59

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

27020152627

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial): Sprint
Mailing Address: PO Box 152406
City: Irvine State: TX Zip Code: 75015
Purpose of Disbursement: Telephone Service
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.21008
Date of Disbursement: 02 / 07 / 2007
Amount of Each Disbursement this Period: 19.04
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial): Sprint
Mailing Address: PO Box 152406
City: Irvine State: TX Zip Code: 75015
Purpose of Disbursement: Telephone Service
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20839
Date of Disbursement: 02 / 26 / 2007
Amount of Each Disbursement this Period: 19.04
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial): The Portland Observer
Mailing Address: 4747 NE MLK Jr. Blvd
City: Portland State: OR Zip Code: 97211
Purpose of Disbursement: Ad
Candidate Name:
Category/Type: 004
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20825
Date of Disbursement: 01 / 23 / 2007
Amount of Each Disbursement this Period: 500.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 538.08

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

27020152628

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial): Tyree, Jocelyn
Mailing Address: 2803 SE 27th
City: Portland State: OR Zip Code: 97202
Purpose of Disbursement: Salary
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20821
Date of Disbursement: 01 / 12 / 2007
Amount of Each Disbursement this Period: 613.99
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial): Tyree, Jocelyn
Mailing Address: 2803 SE 27th
City: Portland State: OR Zip Code: 97202
Purpose of Disbursement: Salary
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20832
Date of Disbursement: 01 / 31 / 2007
Amount of Each Disbursement this Period: 613.99
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial): Tyree, Jocelyn
Mailing Address: 2803 SE 27th
City: Portland State: OR Zip Code: 97202
Purpose of Disbursement: Salary
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20837
Date of Disbursement: 02 / 15 / 2007
Amount of Each Disbursement this Period: 613.99
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 1841.97

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

27020152629

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
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[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
Tyree, Jocelyn

Mailing Address 2803 SE 27th

City: Portland | State: OR | Zip Code: 97202

Purpose of Disbursement: Salary

Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.21022
Date of Disbursement: 02 / 28 / 2007

Amount of Each Disbursement this Period: 613.98

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 2803 SE 27th

City: Portland | State: OR | Zip Code: 97202

Purpose of Disbursement: Salary

Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.21036
Date of Disbursement: 03 / 15 / 2007

Amount of Each Disbursement this Period: 613.99

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 2803 SE 27th

City: Portland | State: OR | Zip Code: 97202

Purpose of Disbursement: Salary

Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.21041
Date of Disbursement: 03 / 30 / 2007

Amount of Each Disbursement this Period: 613.99

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 1841.96

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

27020152630

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER: (check only one)
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[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial): UPS
Mailing Address: PO Box 650580
City: Dallas State: TX Zip Code: 75265
Purpose of Disbursement: Shipping
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20811
Date of Disbursement: 01 / 02 / 2007
Amount of Each Disbursement this Period: 21.89
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial): UPS
Mailing Address: PO Box 650580
City: Dallas State: TX Zip Code: 75265
Purpose of Disbursement: Shipping
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.21009
Date of Disbursement: 02 / 07 / 2007
Amount of Each Disbursement this Period: 28.47
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial): UPS
Mailing Address: PO Box 650580
City: Dallas State: TX Zip Code: 75265
Purpose of Disbursement: Shipping
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20998
Date of Disbursement: 03 / 23 / 2007
Amount of Each Disbursement this Period: 27.36
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 77.72

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

27020152631

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
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NAME OF COMMITTEE (In Full)
Wyden for Senate

A.
Full Name (Last, First, Middle Initial): UPS
Mailing Address: PO Box 650580
City: Dallas State: TX Zip Code: 75265
Purpose of Disbursement: Shipping
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20999
Date of Disbursement: 03 / 23 / 2007
Amount of Each Disbursement this Period: 23.11
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): USPS
Mailing Address: 815 NW Hoyt
City: Portland State: OR Zip Code: 97208
Purpose of Disbursement: Box Rental
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20841
Date of Disbursement: 02 / 26 / 2007
Amount of Each Disbursement this Period: 144.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Verizon
Mailing Address: PO Box 1915
City: Beltsville State: MD Zip Code: 20705
Purpose of Disbursement: Telephone Service
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20826
Date of Disbursement: 01 / 30 / 2007
Amount of Each Disbursement this Period: 108.59
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 275.70

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

27020152632

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
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[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A.
Full Name (Last, First, Middle Initial): Verizon
Mailing Address: PO Box 1915
City: Beltsville State: MD Zip Code: 20705
Purpose of Disbursement: Telephone Service
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.20827
Date of Disbursement: 01 / 30 / 2007
Amount of Each Disbursement this Period: 119.67
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): Verizon
Mailing Address: PO Box 1915
City: Beltsville State: MD Zip Code: 20705
Purpose of Disbursement: Telephone Service
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.21014
Date of Disbursement: 02 / 13 / 2007
Amount of Each Disbursement this Period: 114.64
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): Verizon
Mailing Address: PO Box 1915
City: Beltsville State: MD Zip Code: 20705
Purpose of Disbursement: Telephone Service
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.21017
Date of Disbursement: 02 / 14 / 2007
Amount of Each Disbursement this Period: 177.80
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 412.11

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

27020152633

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

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

Mailing Address PO Box 1915

City: Beltsville State: MD Zip Code: 20705

Purpose of Disbursement: Telephone Service

Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify) ▼

Transaction ID: SB17.21018
Date of Disbursement: 02 / 14 / 2007

Amount of Each Disbursement this Period: 178.78

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address PO Box 1915

City: Beltsville State: MD Zip Code: 20705

Purpose of Disbursement: Telephone Service

Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify) ▼

Transaction ID: SB17.20843
Date of Disbursement: 03 / 20 / 2007

Amount of Each Disbursement this Period: 117.68

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address PO Box 1915

City: Beltsville State: MD Zip Code: 20705

Purpose of Disbursement: Telephone Service

Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify) ▼

Transaction ID: SB17.20844
Date of Disbursement: 03 / 20 / 2007

Amount of Each Disbursement this Period: 116.16

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 412.62

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27020152634

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