



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Oregon Republican Party

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	4

 To: 

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	4

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>4</td></tr></table>	Y	Y	Y	Y	2	0	0	4		11106.57
Y	Y	Y	Y							
2	0	0	4							
(b) Cash on Hand at Beginning of Reporting Period .....	272600.80									
(c) Total Receipts (from Line 19) .....	58676.00	533316.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	331276.80	544422.57								
7. Total Disbursements (from Line 31) .....	64912.20	278057.97								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	266364.60	266364.60								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	97444.22									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
Oregon Republican Party

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	4

 To: 

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	4

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	33475.00	417968.60
(i) Itemized (use Schedule A) .....	20501.00	100797.40
(ii) Unitemized .....	53976.00	518766.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	9850.00
(c) Other Political Committees (such as PACs) .....	0.00	528616.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	0.00	0.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	4700.00	4700.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	4700.00	4700.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	58676.00	533316.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	53976.00	528616.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	5999.96	25555.25
(ii) Non-Federal Share.....	10666.62	45431.56
(b) Other Federal Operating Expenditures.....	17797.07	56932.63
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	34463.65	127919.44
22. Transfers to Affiliated/Other Party Committees.....	10180.00	25480.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	100.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	100.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	20268.55	124558.53
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	20268.55	124558.53
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	64912.20	278057.97
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	54245.58	232626.41

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3 .....	53976.00	528616.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	100.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	53976.00	528516.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	23797.03	82487.88
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	23797.03	82487.88

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

**AGGREGATION PAGE: LEVIN FUNDS**

Transaction ID: SL1

NAME OF COMMITTEE (In Full) Oregon Republican Party
NAME OF ACCOUNT KEY LEVIN

	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
a. Itemized..... (Use Schedule L-A)	5000.00	5000.00
b. Unitemized.....	150.00	255.93
c. Total.....	5150.00	5255.93
2. OTHER RECEIPTS.....	150.00	79850.00
3. TOTAL RECEIPTS..... (Add Lines 1c and 2)	5300.00	85105.93
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
a. Voter Registration.....	0.00	0.00
b. Voter ID.....	0.00	0.00
c. GOTV.....	0.00	0.00
d. Generic Campaign.....	0.00	0.00
e. Total.....	0.00	0.00
5. OTHER DISBURSEMENTS.....	0.00	113.25
6. TOTAL DISBURSEMENTS..... (Add Lines 4e and 5)	0.00	113.25
7. BEGINNING CASH ON HAND..... (for Column B, use cash as of January 1st)	79692.68	0.00
8. RECEIPTS..... (from Line 3)	5300.00	85105.93
9. SUBTOTAL..... (Add Lines 7 and 8)	84992.68	85105.93
10. DISBURSEMENTS..... (From Line 6)	0.00	113.25
11. ENDING CASH ON HAND..... (Subtract Line 10 From Line 9)	84992.68	84992.68

**SCHEDULE L-A (FEC Form 3X)  
ITEMIZED RECEIPTS OF LEVIN FUNDS**

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

FOR LINE NUMBER:  
(check only one)  1a  2

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)  
William P. & Gail McCormick

Mailing Address 11837 SW Riverwood Road

City Portland State OR Zip Code 97219-

Name of Employer or Principal Place of Business  
McCormick & Schmick Mgt

Occupation  
CEO

Transaction ID: SL71029.C93313

Date of Receipt

/   /

Amount of Each Receipt this Period

Aggregate Year-to-Date

Account: 8

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

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

**SCHEDULE L-A (FEC Form 3X)  
ITEMIZED RECEIPTS OF LEVIN FUNDS**

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

FOR LINE NUMBER:  1a  2  
(check only one)

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

Full Name (Last, First, Middle Initial)  
**A. Northwest Grassroots & Communications**

Mailing Address 5 Centerpointe Drive Suite 400

City Lake Oswego State OR Zip Code 97035-

Name of Employer or Principal Place of Business

Occupation

Transaction ID: SLC71962

Date of Receipt

/   /

Amount of Each Receipt this Period

Aggregate Year-to-Date

Account: 8

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

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 47  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

**A.** Full Name (Last, First, Middle Initial)  
Rick Bosch

Mailing Address 8780 SW Bomar Ct

City State Zip Code  
Portland OR 97223

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Heinz Mechanical Contractor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt M M / D D / Y Y Y Y  
04 / 15 / 2004

**Transaction ID:** C72373

Amount of Each Receipt this Period 500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Mr. Clifford M. Bryden

Mailing Address 1058 S.E. Kane St.

City State Zip Code  
Roseburg OR 97470-4803

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt M M / D D / Y Y Y Y  
04 / 16 / 2004

**Transaction ID:** C72479

Amount of Each Receipt this Period 200.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Dean Bundy

Mailing Address 10550 S Kelland Ct

City State Zip Code  
Oregon City OR 97045

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt M M / D D / Y Y Y Y  
04 / 01 / 2004

**Transaction ID:** C71961

Amount of Each Receipt this Period 200.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... 900.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 47

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

**A.**

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

Mailing Address 7877 SW Edgewater East

City State Zip Code  
Wilsonville OR 97070-9482

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

Name of Employer Self Occupation Farming

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

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 2 / 2 0 0 4

Transaction ID: C72635

Amount of Each Receipt this Period

250.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Earle Chiles

Mailing Address 111 SW 5th Avenue, STE 400

City State Zip Code  
Portland OR 97204

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

Name of Employer Self Employed Occupation Investor

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

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 6 / 2 0 0 4

Transaction ID: C72687

Amount of Each Receipt this Period

1000.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
James & Barbara Damon

Mailing Address PO Box 2848

City State Zip Code  
Seaside OR 97138-2848

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

Name of Employer Retired Occupation Retired

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

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 4 / 2 0 0 4

Transaction ID: C72457

Amount of Each Receipt this Period

250.00

Receipt

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

1500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A.</b>	Full Name (Last, First, Middle Initial) Bonnie J. Ford	Date of Receipt MM / DD / YYYY 04 / 15 / 2004
	Mailing Address PO Box 1183	<b>Transaction ID:</b> C72372
	City State Zip Code Roseburg OR 97470	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Retired Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) William Halter	Date of Receipt MM / DD / YYYY 04 / 06 / 2004
	Mailing Address 1771 E Lincoln Rd	<b>Transaction ID:</b> C72148
	City State Zip Code Woodburn OR 97071	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Self Employed Animal Feed Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. George L. Hibbard	Date of Receipt MM / DD / YYYY 04 / 14 / 2004
	Mailing Address 32140 SW Boones Bend Rd	<b>Transaction ID:</b> C72472
	City State Zip Code Wilsonville OR 97070-6414	Amount of Each Receipt this Period 225.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Retired Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	525.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 12 / 47  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

**A.** Full Name (Last, First, Middle Initial)  
Mark L. Holloway

Mailing Address 13221 SW 68th Pkwy Ste 420  
8824 SW Firview Pl., Beaverton

City State Zip Code  
Portland OR 97223-8371

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

Name of Employer Occupation  
Holloway Investment Advisors Investor

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
04 / 14 / 2004

**Transaction ID: C72454**

Amount of Each Receipt this Period  
250.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Mr. Robert O. Holmes

Mailing Address 1210 Spyglass Dr.

City State Zip Code  
Eugene OR 97401-2057

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
04 / 19 / 2004

**Transaction ID: C72576**

Amount of Each Receipt this Period  
250.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Ms. Janice Hooson

Mailing Address 4308 SW Fraser Avenue

City State Zip Code  
Portland OR 97225-1911

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  
MM / DD / YYYY  
04 / 27 / 2004

**Transaction ID: C72679**

Amount of Each Receipt this Period  
750.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1250.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 47  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

**A.**

Full Name (Last, First, Middle Initial)  
Kermit & Linda Houser

Mailing Address 10131 Morning Dove Drive

City State Zip Code  
Klamath Falls OR 97601

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
04 / 15 / 2004

Transaction ID: C72347

Amount of Each Receipt this Period  
500.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Mr. George Mack

Mailing Address 4380 SW Macadam #590

City State Zip Code  
Portland OR 97201-6408

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

Name of Employer Occupation  
Mack, Roberts Certified Public Accountant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
MM / DD / YYYY  
04 / 15 / 2004

Transaction ID: C72341

Amount of Each Receipt this Period  
200.00

Receipt

**C.**

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

Mailing Address 1240 E 22nd Ave

City State Zip Code  
Eugene OR 97403-1509

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
MM / DD / YYYY  
04 / 20 / 2004

Transaction ID: C72517

Amount of Each Receipt this Period  
200.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **900.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 47  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

**A.** Full Name (Last, First, Middle Initial)  
Mr. Mark G. Mounsey

Mailing Address 1254 SW Cardinell Drive

City Portland State OR Zip Code 97201

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

Name of Employer FTL Inc. Occupation Exec.

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 04 / 13 / 2004  
Transaction ID: C72308  
Amount of Each Receipt this Period: 250.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
Betty Roberts

Mailing Address PO Box 7007

City Eugene State OR Zip Code 97401

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 04 / 19 / 2004  
Transaction ID: C72583  
Amount of Each Receipt this Period: 500.00  
Receipt

**C.** Full Name (Last, First, Middle Initial)  
Doris C. Storms

Mailing Address 2135 Westwood Lane

City Eugene State OR Zip Code 97401-5428

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt: 04 / 26 / 2004  
Transaction ID: C72689  
Amount of Each Receipt this Period: 200.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 950.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 47		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Warren J. Ulrich		Date of Receipt
	Mailing Address 3445 NW Luzon St.		<input type="text" value="04"/> / <input type="text" value="16"/> / <input type="text" value="2004"/>
	City	State	Zip Code
	Portland	OR	97210
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Pacific Machinery & Tool		Occupation President	Transaction ID: C72499
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="250.00"/>
		<input type="text" value="250.00"/>	Receipt

<b>B.</b>	Full Name (Last, First, Middle Initial) Carol Wendt		Date of Receipt
	Mailing Address 2120 Fairmount Street		<input type="text" value="04"/> / <input type="text" value="20"/> / <input type="text" value="2004"/>
	City	State	Zip Code
	Klamath Falls	OR	97601
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Self		Occupation Homemaker	Transaction ID: 71026.C93296
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="10000.00"/>
		<input type="text" value="10000.00"/>	Reattribution Memo
			<b>[MEMO ITEM]</b> Reattribution from Spouse

<b>C.</b>	Full Name (Last, First, Middle Initial) Rod & Carol Wendt		Date of Receipt
	Mailing Address 2120 Fairmount Street		<input type="text" value="04"/> / <input type="text" value="20"/> / <input type="text" value="2004"/>
	City	State	Zip Code
	Klamath Falls	OR	97601-1536
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer JELD-WEN, Inc.		Occupation President	Transaction ID: C72510
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="25000.00"/>
		<input type="text" value="25000.00"/>	Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="25250.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 / 47
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A.</b>	Full Name (Last, First, Middle Initial) Rod & Carol Wendt	Date of Receipt MM / DD / YYYY 04 / 20 / 2004
	Mailing Address 2120 Fairmount Street	<b>Transaction ID:</b> 71026.C93297
	City State Zip Code Klamath Falls OR 97601-1536	Amount of Each Receipt this Period -10000.00
	FEC ID number of contributing federal political committee. C	Reattribution Memo
	Name of Employer Occupation JELD-WEN, Inc. President	<b>[MEMO ITEM]</b> Reattribution to Spouse
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) James M. Wilson	Date of Receipt MM / DD / YYYY 04 / 19 / 2004
	Mailing Address 21458 Oak Ln	<b>Transaction ID:</b> C72604
	City State Zip Code Aurora OR 97002	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Retired Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) James M. Wilson	Date of Receipt MM / DD / YYYY 04 / 27 / 2004
	Mailing Address 21458 Oak Ln	<b>Transaction ID:</b> C72684
	City State Zip Code Aurora OR 97002	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Retired Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 47  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)  
John S Wilson

Mailing Address PO Box 129

City State Zip Code  
North Powder OR 97867

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

Name of Employer Occupation  
Wilson Cattle Co Rancher

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	5	/	2	0	0	4

Transaction ID: C72054

Amount of Each Receipt this Period  
2000.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	33475.00

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A.</b> Full Name (Last, First, Middle Initial) Creative Strategies Mailing Address 9 Monroe Parkway, Suite 120 City Lake Oswego State OR Zip Code 97035- Purpose of Disbursement Direct Mail Consulting fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E9472 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 4
	Amount of Each Disbursement this Period 1350.00 DIRECT MAIL CONSULTING FEE

<b>B.</b> Full Name (Last, First, Middle Initial) Creative Strategies Mailing Address 9 Monroe Parkway, Suite 120 City Lake Oswego State OR Zip Code 97035- Purpose of Disbursement postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E9494 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 4
	Amount of Each Disbursement this Period 1500.00 POSTAGE

<b>C.</b> Full Name (Last, First, Middle Initial) Direct Mail Systems, Inc Mailing Address 12450 Automobile Boulevard City Clearwater State FL Zip Code 34622- Purpose of Disbursement fundraising mail Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E9358 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 4
	Amount of Each Disbursement this Period 1000.00 FUNDRAISING MAIL

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3850.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) Direct Mail Systems, Inc	Transaction ID: E9391 Date of Disbursement
	Mailing Address 12450 Automobile Boulevard	<input type="text" value="04"/> / <input type="text" value="08"/> / <input type="text" value="2004"/>
	City Clearwater State FL Zip Code 34622-	Amount of Each Disbursement this Period
	Purpose of Disbursement fundraising mail	<input type="text" value="1000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FUNDRAISING MAIL

B.	Full Name (Last, First, Middle Initial) Direct Mail Systems, Inc	Transaction ID: E9414 Date of Disbursement
	Mailing Address 12450 Automobile Boulevard	<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2004"/>
	City Clearwater State FL Zip Code 34622-	Amount of Each Disbursement this Period
	Purpose of Disbursement direct mail	<input type="text" value="1000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		DIRECT MAIL

C.	Full Name (Last, First, Middle Initial) Direct Mail Systems, Inc	Transaction ID: E9454 Date of Disbursement
	Mailing Address 12450 Automobile Boulevard	<input type="text" value="04"/> / <input type="text" value="19"/> / <input type="text" value="2004"/>
	City Clearwater State FL Zip Code 34622-	Amount of Each Disbursement this Period
	Purpose of Disbursement direct mail	<input type="text" value="1000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		DIRECT MAIL

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 47

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

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) Direct Mail Systems, Inc	Transaction ID: E9496 Date of Disbursement 04 / 30 / 2004
	Mailing Address 12450 Automobile Boulevard	Amount of Each Disbursement this Period 1000.00
	City Clearwater State FL Zip Code 34622-	
	Purpose of Disbursement direct mail	Category/ Type DIRECT MAIL
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Electric Lightwave	Transaction ID: E9361 Date of Disbursement 04 / 01 / 2004
	Mailing Address PO Box 20553	Amount of Each Disbursement this Period 500.00
	City Rochester State NY Zip Code 14602-	
	Purpose of Disbursement autodial info calls/OGOP	Category/ Type AUTODIAL INFO CALLS/OGOP
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Electric Lightwave	Transaction ID: E9415 Date of Disbursement 04 / 15 / 2004
	Mailing Address PO Box 20553	Amount of Each Disbursement this Period 1000.00
	City Rochester State NY Zip Code 14602-	
	Purpose of Disbursement auto dial info calls/OGOP	Category/ Type AUTO DIAL INFO CALLS/OGOP
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2500.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

A.

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

Mailing Address 7320 N Dreamy Draw Dr

City Phoenix State AZ Zip Code 85020-5212

Purpose of Disbursement telemarketing  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Transaction ID: E9359  
Date of Disbursement

04 / 01 / 2004

Amount of Each Disbursement this Period

2900.00

TELEMARKETING

B.

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

Mailing Address 7320 N Dreamy Draw Dr

City Phoenix State AZ Zip Code 85020-5212

Purpose of Disbursement telemarketing  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Transaction ID: E9416  
Date of Disbursement

04 / 15 / 2004

Amount of Each Disbursement this Period

1000.00

TELEMARKETING

C.

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

Mailing Address 7320 N Dreamy Draw Dr

City Phoenix State AZ Zip Code 85020-5212

Purpose of Disbursement telemarketing  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Transaction ID: E9466  
Date of Disbursement

04 / 20 / 2004

Amount of Each Disbursement this Period

630.00

TELEMARKETING

SUBTOTAL of Disbursements This Page (optional) ▶

4530.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: E9497 Date of Disbursement 04 / 30 / 2004
	Mailing Address 7320 N Dreamy Draw Dr	Amount of Each Disbursement this Period 445.00
	City Phoenix State AZ Zip Code 85020-5212	
	Purpose of Disbursement telemarketing	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		TELEMARKETING

B.	Full Name (Last, First, Middle Initial) LifeWise	Transaction ID: E9362 Date of Disbursement 04 / 01 / 2004
	Mailing Address 815 SW Bond St	Amount of Each Disbursement this Period 1658.00
	City Bend State OR Zip Code 97702-	
	Purpose of Disbursement health insurance	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		HEALTH INSURANCE

C.	Full Name (Last, First, Middle Initial) Oregon Department of Revenue	Transaction ID: E9393 Date of Disbursement 04 / 12 / 2004
	Mailing Address PO Box 14800	Amount of Each Disbursement this Period 128.00
	City Salem State OR Zip Code 97309-	
	Purpose of Disbursement Corp Taxes	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		CORP TAXES

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2231.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 23 / 47

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

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

A.

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

Mailing Address PO Box 14800

City Salem State OR Zip Code 97309-

Purpose of Disbursement  
Q1 Quarterly Payroll Taxes

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: E9500

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1307.29

Q1 QUARTERLY PAYROLL TAXES

SUBTOTAL of Disbursements This Page (optional) ▶

1307.29

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

17418.29

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 24 / 47

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

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) Oregon Republican Party	Transaction ID: 71026.E13191 Date of Disbursement 04 / 27 / 2004
	Mailing Address c/o Key Bank Levin Account 1500 Edgewater St NW	Amount of Each Disbursement this Period 5000.00
	City Salem State OR Zip Code 97302-	
	Purpose of Disbursement Xfer to Levin W.McCormick	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Oregon Republican Party	Transaction ID: 71029.E13192 Date of Disbursement 04 / 27 / 2004
	Mailing Address c/o Key Bank Levin Account 1500 Edgewater St NW	Amount of Each Disbursement this Period 150.00
	City Salem State OR Zip Code 97302-	
	Purpose of Disbursement Xfer to Levin D. Morgan	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Oregon Republican Party	Transaction ID: E9477 Date of Disbursement 04 / 27 / 2004
	Mailing Address Key Bank NonFederal Acct 1500 Edgewater St NW	Amount of Each Disbursement this Period 30.00
	City Salem State OR Zip Code 97302-	
	Purpose of Disbursement Ruth Biensberg Re-allocation	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	5180.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 25 / 47

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

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

A.

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

Transaction ID: E9460

Date of Disbursement

<sup>M</sup> 0	<sup>M</sup> 4	/	<sup>D</sup> 2	<sup>D</sup> 0	/	<sup>Y</sup> 2	<sup>Y</sup> 0	<sup>Y</sup> 0	<sup>Y</sup> 4
----------------	----------------	---	----------------	----------------	---	----------------	----------------	----------------	----------------

Mailing Address Key Bank NonFederal Acct  
1500 Edgewater St NW

City Salem State OR Zip Code 97302-

Amount of Each Disbursement this Period

5000.00
---------

Purpose of Disbursement  
4-20-04 Wendt contribution re-alloc

--

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

5000.00
---------

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

10180.00
----------

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<p><b>A.</b> Full Name (Last, First, Middle Initial) Michelle Ashenfelter</p> <p>Mailing Address 2012 NE 15th</p> <p>City Portland State OR Zip Code 97212-</p> <p>Purpose of Disbursement FEA payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> E9357 <b>Date of Disbursement</b> 04 / 01 / 2004</p> <p>Amount of Each Disbursement this Period 1559.88</p> <p>FEA PAYROLL</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Michelle Ashenfelter</p> <p>Mailing Address 2012 NE 15th</p> <p>City Portland State OR Zip Code 97212-</p> <p>Purpose of Disbursement Travel exps reimbursed</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> E9377 <b>Date of Disbursement</b> 04 / 01 / 2004</p> <p>Amount of Each Disbursement this Period 966.46</p> <p>TRAVEL EXPS REIMBURSED</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Michelle Ashenfelter</p> <p>Mailing Address 2012 NE 15th</p> <p>City Portland State OR Zip Code 97212-</p> <p>Purpose of Disbursement FEA Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> E9409 <b>Date of Disbursement</b> 04 / 15 / 2004</p> <p>Amount of Each Disbursement this Period 1554.79</p> <p>FEA PAYROLL</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	4081.13
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) Michelle Ashenfelter	Transaction ID: E9459 Date of Disbursement 04 / 19 / 2004
	Mailing Address 2012 NE 15th	Amount of Each Disbursement this Period 424.90
	City Portland State OR Zip Code 97212-	
	Purpose of Disbursement FEA reimburse for travel expenses	FEA REIMBURSE FOR TRAVEL EXPENSES
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Peter Corvallis Productions	Transaction ID: E9381 Date of Disbursement 04 / 06 / 2004
	Mailing Address 79 SW Oak	Amount of Each Disbursement this Period 683.50
	City Portland State OR Zip Code 97204-	
	Purpose of Disbursement meeting set up fees/OGOP	MEETING SET UP FEES/OGOP
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Darryl Howard & Asso	Transaction ID: E9412 Date of Disbursement 04 / 14 / 2004
	Mailing Address 7514 Harley Way SE	Amount of Each Disbursement this Period 2500.00
	City Salem State OR Zip Code 97301-	
	Purpose of Disbursement FEA accounting services	FEA ACCOUNTING SERVICES
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3608.40
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<p><b>A.</b> Full Name (Last, First, Middle Initial) Sandy Howard</p> <p>Mailing Address PO Box 1083</p> <p>City Salem State OR Zip Code 97308-</p> <p>Purpose of Disbursement FEA vacation payout</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> E9360 <b>Date of Disbursement</b> 04 / 01 / 2004</p> <p>Amount of Each Disbursement this Period 2345.70</p> <p>FEA VACATION PAYOUT</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Sandy Howard</p> <p>Mailing Address PO Box 1083</p> <p>City Salem State OR Zip Code 97308-</p> <p>Purpose of Disbursement FEA Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> E9355 <b>Date of Disbursement</b> 04 / 01 / 2004</p> <p>Amount of Each Disbursement this Period 1528.66</p> <p>FEA PAYROLL</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Sandy Howard</p> <p>Mailing Address PO Box 1083</p> <p>City Salem State OR Zip Code 97308-</p> <p>Purpose of Disbursement FEA reimburse for Travel expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> E9457 <b>Date of Disbursement</b> 04 / 19 / 2004</p> <p>Amount of Each Disbursement this Period 107.30</p> <p>FEA REIMBURSE FOR TRAVEL EXPENSES</p>

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

3981.66

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 29 / 47

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

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) Key Bank**	Transaction ID: E9498 Date of Disbursement 04 / 30 / 2004
	Mailing Address 1500 Edgewater St NW	Amount of Each Disbursement this Period 168.00
	City Salem State OR Zip Code 97304-	
	Purpose of Disbursement FEA Q1 940 Tax	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA Q1 940 TAX

B.	Full Name (Last, First, Middle Initial) Amy Langdon	Transaction ID: E9356 Date of Disbursement 04 / 01 / 2004
	Mailing Address 2830 Foxhaven Dr SE	Amount of Each Disbursement this Period 2064.94
	City Salem State OR Zip Code 97306-2526	
	Purpose of Disbursement FEA payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA PAYROLL

C.	Full Name (Last, First, Middle Initial) Amy Langdon	Transaction ID: E9378 Date of Disbursement 04 / 01 / 2004
	Mailing Address 2830 Foxhaven Dr SE	Amount of Each Disbursement this Period 936.48
	City Salem State OR Zip Code 97306-2526	
	Purpose of Disbursement FEA Hotel/Air Expense Reim	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA HOTEL/AIR EXPENSE REIM

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	3169.42
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) Amy Langdon	Transaction ID: E9428 Date of Disbursement 04 / 14 / 2004
	Mailing Address 2830 Foxhaven Dr SE	Amount of Each Disbursement this Period 651.48
	City Salem State OR Zip Code 97306-2526	
	Purpose of Disbursement FEA reimburse for travel expenses	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	FEA REIMBURSE FOR TRAVEL EXPENSES
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Amy Langdon	Transaction ID: E9410 Date of Disbursement 04 / 15 / 2004
	Mailing Address 2830 Foxhaven Dr SE	Amount of Each Disbursement this Period 2059.86
	City Salem State OR Zip Code 97306-2526	
	Purpose of Disbursement FEA payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	FEA PAYROLL
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Amy Langdon	Transaction ID: E9458 Date of Disbursement 04 / 19 / 2004
	Mailing Address 2830 Foxhaven Dr SE	Amount of Each Disbursement this Period 425.17
	City Salem State OR Zip Code 97306-2526	
	Purpose of Disbursement FEA reimburse for Travel expenses	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	FEA REIMBURSE FOR TRAVEL EXPENSES
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	3136.51
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A.</b> Full Name (Last, First, Middle Initial) Oregon Department of Revenue Mailing Address PO Box 14800 City Salem State OR Zip Code 97309- Purpose of Disbursement FEA payroll taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: E9456 Date of Disbursement 04 / 19 / 2004
	Amount of Each Disbursement this Period 500.00 Category/Type FEA PAYROLL TAXES

<b>B.</b> Full Name (Last, First, Middle Initial) Oregon Department of Revenue Mailing Address PO Box 14800 City Salem State OR Zip Code 97309- Purpose of Disbursement FEA payroll tax Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: E9455 Date of Disbursement 04 / 19 / 2004
	Amount of Each Disbursement this Period 507.00 Category/Type FEA PAYROLL TAX

<b>C.</b> Full Name (Last, First, Middle Initial) Oregon Department of Revenue Mailing Address PO Box 14800 City Salem State OR Zip Code 97309- Purpose of Disbursement FEA: payroll taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: E9499 Date of Disbursement 04 / 30 / 2004
	Amount of Each Disbursement this Period 500.00 Category/Type FEA: PAYROLL TAXES

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1507.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 32 / 47

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

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)  
Annastasia Pannas

Mailing Address 5225 Chapman St. S

City State Zip Code  
Salem OR 97306-

Purpose of Disbursement  
FEA payroll

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: E9411

Date of Disbursement

/   /

Amount of Each Disbursement this Period

784.43

FEA PAYROLL

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

784.43

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

20268.55

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

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

Outstanding Balance Beginning This Period <input type="text" value="626.04"/>		<b>Transaction ID:</b> LS71015.E13094	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="626.04"/>	

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

Outstanding Balance Beginning This Period <input type="text" value="3355.38"/>		<b>Transaction ID:</b> LSE9472	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1350.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2005.38"/>	

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

Outstanding Balance Beginning This Period <input type="text" value="34896.24"/>		<b>Transaction ID:</b> LSE9359	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="4975.00"/>	Outstanding Balance at Close of This Period <input type="text" value="29921.24"/>	

1) <b>SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="32552.66"/>
2) <b>TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

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

Outstanding Balance Beginning This Period <input type="text" value="36525.28"/>		<b>Transaction ID: LSE9358</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="4000.00"/>	Outstanding Balance at Close of This Period <input type="text" value="32525.28"/>	

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

Outstanding Balance Beginning This Period <input type="text" value="840.00"/>		<b>Transaction ID: LSE9463</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="325.00"/>	Outstanding Balance at Close of This Period <input type="text" value="515.00"/>	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Oregon Department of Revenue			Nature of Debt (Purpose): payroll taxes
Mailing Address PO Box 14800			
City Salem	State OR	ZIP Code 97309-	

Outstanding Balance Beginning This Period <input type="text" value="1565.00"/>		<b>Transaction ID: LSE9122</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1565.00"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="34605.28"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

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

Outstanding Balance Beginning This Period 872.04		<b>Transaction ID: LSE9392</b>	
Amount Incurred This Period 0.00	Payment This Period 872.04	Outstanding Balance at Close of This Period 0.00	

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

Outstanding Balance Beginning This Period 3079.37		<b>Transaction ID: LSE9470</b>	
Amount Incurred This Period 0.00	Payment This Period 3079.37	Outstanding Balance at Close of This Period 0.00	

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

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

<b>1) SUBTOTALS</b> This Period This Page (optional).....	2150.00
<b>2) TOTALS</b> This Period (last page this line number only).....	[ ]
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	[ ]
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	[ ]

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 36 / 47
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

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

Outstanding Balance Beginning This Period 1794.74	<b>Transaction ID: LSE9417</b>	
Amount Incurred This Period 0.00	Payment This Period 504.92	Outstanding Balance at Close of This Period 1289.82

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

Outstanding Balance Beginning This Period -3691.30	<b>Transaction ID: LSE9589</b>	
Amount Incurred This Period 7837.69	Payment This Period 0.00	Outstanding Balance at Close of This Period 4146.39

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

Outstanding Balance Beginning This Period 4500.00	<b>Transaction ID: LS70929.E13085</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4500.00

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	9936.21
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

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

Outstanding Balance Beginning This Period <input type="text" value="2188.50"/>		<b>Transaction ID: LSE9361</b>	
Amount Incurred This Period <input type="text" value="451.33"/>	Payment This Period <input type="text" value="1500.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1139.83"/>	

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

Outstanding Balance Beginning This Period <input type="text" value="3658.70"/>		<b>Transaction ID: LSE9591</b>	
Amount Incurred This Period <input type="text" value="1163.90"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="4822.60"/>	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Fred Gabriel, PC			Nature of Debt (Purpose): CPA services
Mailing Address 2011 State			
City Salem	State OR	ZIP Code 97301-	

Outstanding Balance Beginning This Period <input type="text" value="2150.00"/>		<b>Transaction ID: LSE11071</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2150.00"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="8112.43"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 38 / 47
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

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

Outstanding Balance Beginning This Period 4001.56	<b>Transaction ID: LSE9468</b>	
Amount Incurred This Period 0.00	Payment This Period 575.72	Outstanding Balance at Close of This Period 3425.84

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Key Bank for IRS Payroll taxes	Nature of Debt (Purpose): payroll taxes
Mailing Address 1105 Edgewater	
City State ZIP Code Salem OR 97304-	

Outstanding Balance Beginning This Period 6661.80	<b>Transaction ID: LSE9120</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 6661.80

1) <b>SUBTOTALS</b> This Period This Page (optional).....	10087.64
2) <b>TOTALS</b> This Period (last page this line number only).....	97444.22
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	97444.22

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
 Oregon Republican Party

NAME OF ACCOUNT OREGON NONFED 3009 S-Key Key Bank NonF	DATE OF RECEIPT M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 4	TOTAL AMOUNT TRANSFERRED 4700.00
--	---	-------------------------------------

BREAKDOWN OF TRANSFER RECEIVED

<b>i) Total Administrative</b> .....	4700.00	Transaction ID: H3C72417
<b>ii) Generic Voter Drive</b> .....		Transaction ID:
<b>iii) Exempt Activities</b> .....		Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

<b>TOTAL</b> This Period (Administrative) .....	4700.00
<b>TOTAL</b> This Period (Generic Voter Drive) .....	0.00
<b>TOTAL</b> This Period (Exempt Activities) .....	0.00
<b>TOTAL</b> This Period (Direct Fundraising) .....	0.00
<b>TOTAL</b> This Period (Direct Candidate Support) .....	0.00
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	0.00
<b>TOTAL</b> This Period (Total Amount Transferred) .....	4700.00

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

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A. Full Name (Last, First, Middle Initial)</b> Pitney Bowes Credit Corp			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 85460			Allocated Activity or Event Year-To-Date 53970.27	
City Louisville	State KY	Zip Code 40285-5460	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 04 / 08 / 2004 <b>Transaction ID:</b> H4E9392	
Purpose of Disbursement: postage machine lease				
Activity or Event Identifier: ADMINISTRATION B 2111				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
313.93		558.11		872.04

<b>B. Full Name (Last, First, Middle Initial)</b> Office Depot**			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2945 Liberty St S			Allocated Activity or Event Year-To-Date 54523.82	
City Salem	State OR	Zip Code 97306-	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 04 / 14 / 2004 <b>Transaction ID:</b> H4E9413	
Purpose of Disbursement: office supplies				
Activity or Event Identifier: ADMINISTRATION B 2111				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
90.00		160.00		250.00

<b>C. Full Name (Last, First, Middle Initial)</b> Premiere Conferencing			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 87-5450			Allocated Activity or Event Year-To-Date 56734.77	
City Kansas City	State MO	Zip Code 64180-	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 04 / 15 / 2004 <b>Transaction ID:</b> H4E9417	
Purpose of Disbursement: conference calls				
Activity or Event Identifier: ADMINISTRATION B 2111				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
181.77		323.15		504.92

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
585.70		1041.26		1626.96

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A. Full Name (Last, First, Middle Initial)</b> Kevin Mannix			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 375 18th St NE			Allocated Activity or Event Year-To-Date 56229.85		
City Salem	State OR	Zip Code 97301-4307	Date MM / DD / YYYY 04 / 14 / 2004		
Purpose of Disbursement: reimburse for travel expenses			Transaction ID: H4E9427		
Activity or Event Identifier: ADMINISTRATION B 2111					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
614.17		1091.86		1706.03

<b>B. Full Name (Last, First, Middle Initial)</b> Certified Property			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 269			Allocated Activity or Event Year-To-Date 62434.77		
City Salem	State OR	Zip Code 97308-0269	Date MM / DD / YYYY 04 / 19 / 2004		
Purpose of Disbursement: office rent			Transaction ID: H4E9453		
Activity or Event Identifier: ADMINISTRATION B 2111					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2052.00		3648.00		5700.00

<b>C. Full Name (Last, First, Middle Initial)</b> Norton & Butler CPA			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 12873			Allocated Activity or Event Year-To-Date 62759.77		
City Salem	State OR	Zip Code 97309-	Date MM / DD / YYYY 04 / 20 / 2004		
Purpose of Disbursement: CPA Services			Transaction ID: H4E9463		
Activity or Event Identifier: ADMINISTRATION B 2111					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
117.00		208.00		325.00

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2783.17		4947.86		7731.03

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A. Full Name (Last, First, Middle Initial)</b> Eagle Security			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 4531			Allocated Activity or Event Year-To-Date 68098.18		
City	State	Zip Code	Category/Type		
Salem	OR	97302-			
Purpose of Disbursement: security system			Date		
Activity or Event Identifier: ADMINISTRATION B 2111			M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 4 Transaction ID: H4E9464		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
56.05		99.65		155.70

<b>B. Full Name (Last, First, Middle Initial)</b> Environment Control			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 1065			Allocated Activity or Event Year-To-Date 68243.18		
City	State	Zip Code	Category/Type		
Salem	OR	97308-			
Purpose of Disbursement: office cleaning service			Date		
Activity or Event Identifier: ADMINISTRATION B 2111			M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 4 Transaction ID: H4E9465		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.20		92.80		145.00

<b>C. Full Name (Last, First, Middle Initial)</b> Office Depot**			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2945 Liberty St S			Allocated Activity or Event Year-To-Date 64476.50		
City	State	Zip Code	Category/Type		
Salem	OR	97306-			
Purpose of Disbursement: office supplies			Date		
Activity or Event Identifier: ADMINISTRATION B 2111			M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 4 Transaction ID: H4E9467		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
618.02		1098.71		1716.73

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
726.27		1291.16		2017.43

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A. Full Name (Last, First, Middle Initial)</b> Pitney Bowes Purchase Power			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 856042			Allocated Activity or Event Year-To-Date 68818.90		
City Louisville	State KY	Zip Code 40285-	Date <input type="text" value="04"/> / <input type="text" value="20"/> / <input type="text" value="2004"/>		
Purpose of Disbursement: postage			Transaction ID: H4E9468		
Activity or Event Identifier: ADMINISTRATION B 2111					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
207.26		368.46		575.72

<b>B. Full Name (Last, First, Middle Initial)</b> QWest**			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 12480			Allocated Activity or Event Year-To-Date 67942.48		
City Seattle	State WA	Zip Code 98111-	Date <input type="text" value="04"/> / <input type="text" value="20"/> / <input type="text" value="2004"/>		
Purpose of Disbursement: phone bill			Transaction ID: H4E9469		
Activity or Event Identifier: ADMINISTRATION B 2111					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
139.18		247.43		386.61

<b>C. Full Name (Last, First, Middle Initial)</b> Reed Harris Mailhouse			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 322 NW 14th			Allocated Activity or Event Year-To-Date 67555.87		
City Portland	State OR	Zip Code 97210-	Date <input type="text" value="04"/> / <input type="text" value="20"/> / <input type="text" value="2004"/>		
Purpose of Disbursement: generic direct mail/ogop			Transaction ID: H4E9470		
Activity or Event Identifier: ADMINISTRATION B 2111					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1108.57		1970.80		3079.37

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1455.01		2586.69		4041.70

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A. Full Name (Last, First, Middle Initial)</b> Stafford Studios			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 11594 SE Meadowgold Place			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">69043.90</div>	
City Clackamas	State OR	Zip Code 97015-	Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> <div style="border: 1px solid black; padding: 2px; display: inline-block;">04 / 20 / 2004</div>	
Purpose of Disbursement: website maintenance				
Activity or Event Identifier: ADMINISTRATION B 2111			Transaction ID: H4E9471	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
81.00		144.00		225.00

<b>B. Full Name (Last, First, Middle Initial)</b> Key Bank**			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1500 Edgewater St NW			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">69469.76</div>	
City Salem	State OR	Zip Code 97304-	Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> <div style="border: 1px solid black; padding: 2px; display: inline-block;">04 / 30 / 2004</div>	
Purpose of Disbursement: Bank fees				
Activity or Event Identifier: ADMINISTRATION B 2111			Transaction ID: H4E9575	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
153.31		272.55		425.86

<b>C. Full Name (Last, First, Middle Initial)</b> Pitney Bowes Credit Corp			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 85460			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">54273.82</div>	
City Louisville	State KY	Zip Code 40285-5460	Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> <div style="border: 1px solid black; padding: 2px; display: inline-block;">04 / 08 / 2004</div>	
Purpose of Disbursement: Postage machine				
Activity or Event Identifier: ADMINISTRATION B 2111			Transaction ID: H4E9588	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
109.28		194.27		303.55

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
343.59		610.82		954.41

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A. Full Name (Last, First, Middle Initial)</b> Clackamas County Central Comm.			Type of Allocated Activity: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input checked="" type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 1326			Allocated Activity or Event Year-To-Date 1223.00		
City Clackamas	State OR	Zip Code 97015-	Date MM / DD / YYYY 04 / 01 / 2004		
Purpose of Disbursement: Voter Registration/OGOP-generic			Transaction ID: H4E9373		
Activity or Event Identifier: GV GENERICVOTER DRIVE					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.36		0.64		1.00

<b>B. Full Name (Last, First, Middle Initial)</b> Deschutes County Central Committee			Type of Allocated Activity: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input checked="" type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 18160 Cottonwood Rd PMB #448			Allocated Activity or Event Year-To-Date 1405.00		
City Bend	State OR	Zip Code 97707-	Date MM / DD / YYYY 04 / 01 / 2004		
Purpose of Disbursement: Voter Registration/OGOP-generic			Transaction ID: H4E9374		
Activity or Event Identifier: GV GENERICVOTER DRIVE					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
47.52		84.48		132.00

<b>C. Full Name (Last, First, Middle Initial)</b> Coos County Republican Central Committee			Type of Allocated Activity: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input checked="" type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1156 N. 9th St.			Allocated Activity or Event Year-To-Date 1273.00		
City Coos Bay	State OR	Zip Code 97420-	Date MM / DD / YYYY 04 / 01 / 2004		
Purpose of Disbursement: Voter Registration/OGOP-generic			Transaction ID: H4E9375		
Activity or Event Identifier: GV GENERICVOTER DRIVE					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.40		25.60		40.00

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
62.28		110.72		173.00

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

**A. Full Name (Last, First, Middle Initial)**  
Central Committee Lane County

Mailing Address  
PO Box 10247

City	State	Zip Code
Eugene	OR	97440-2247

Purpose of Disbursement:  
Voter Registration/OGOP-generic

Activity or Event Identifier:  
GV GENERICVOTER DRIVE

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
1233.00

Date  /  /   
**Transaction ID:** H4E9376

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.60		6.40		10.00

**B. Full Name (Last, First, Middle Initial)**  
Benton County Clerk

Mailing Address  
120 NW 4th St

City	State	Zip Code
Corvallis	OR	97330-4734

Purpose of Disbursement:  
voter file/lists OGOP

Activity or Event Identifier:  
GV GENERICVOTER DRIVE

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
1407.00

Date  /  /   
**Transaction ID:** H4E9394

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.72		1.28		2.00

**C. Full Name (Last, First, Middle Initial)**  
Josephine Co. Elections

Mailing Address  
PO Box 69

City	State	Zip Code
Grants Pass	OR	97526-

Purpose of Disbursement:  
voter file/lists OGOP

Activity or Event Identifier:  
GV GENERICVOTER DRIVE

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
1457.00

Date  /  /   
**Transaction ID:** H4E9474

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.00		32.00		50.00

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.32		39.68		62.00

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

**A. Full Name (Last, First, Middle Initial)**  
Wallowa County Clerk

Mailing Address

101 S River Street Room 100, Door 16

City	State	Zip Code
Enterprise	OR	97828-1335

Purpose of Disbursement:  
voter file/lists-OGOP

Category/  
Type

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

1517.05

Activity or Event Identifier:  
GV GENERICVOTER DRIVE

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	3	/	2	0	0	4

Transaction ID: H4E9475

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.62		38.43		60.05

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.62		38.43		60.05

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
5999.96	10666.62	16666.58