

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) PO Box 25406 Check if different than previously reported. (ACC) Portland OR 97298

2. FEC IDENTIFICATION NUMBER C00153031 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post-Election Report for the: General, Runoff, Special

5. Covering Period 10 01 2009 through 10 31 2009

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

Type or Print Name of Treasurer Dennis Morgan

Signature of Treasurer Electronically Filed by Dennis Morgan Date 11 18 2009

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

Office Use Only FE6AN026 FEC FORM 3X (Rev. 12/2004)

A. Form/Schedule : **F3XN**

Transaction ID :

Memo #1: Note that on Schedule D, the negative amount in the incurred column indicated an adjustment by the vendor to reflect the correct amount owed by the committee. The adjustment amounted to -\$10,000. The committee also incurred \$500 during the period, resulting in the -\$9500 amount incurred. The outstanding balance at the close of the period reflects the correct amount owed to Compliance Consulting LLC by the Party.

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Oregon Republican Party

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><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>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		1405.74
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	16399.16									
(c) Total Receipts (from Line 19)	71235.51	660980.46								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	87634.67	662386.20								
7. Total Disbursements (from Line 31)	42868.79	617620.32								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	44765.88	44765.88								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	141587.65									

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**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Oregon Republican Party

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	9

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		
(i) Itemized (use Schedule A)	20977.00	180831.00
(ii) Unitemized	14218.23	180489.77
(iii) TOTAL (add Lines 11(a)(i) and (ii)	35195.23	361320.77
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	15000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	35195.23	376320.77
12. Transfers From Affiliated/Other Party Committees	30000.00	150499.51
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	5607.94
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)	6040.28	128552.24
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	6040.28	128552.24
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	71235.51	660980.46
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	65195.23	532428.22

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	2699.78	60468.07
(ii) Non-Federal Share.....	10156.32	227474.67
(b) Other Federal Operating Expenditures.....	16868.06	151870.24
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	29724.16	439812.98
22. Transfers to Affiliated/Other Party Committees.....	0.00	28828.83
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	2000.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	30.00	11370.00
(b) Political Party Committees	0.00	550.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	30.00	11920.00
29. Other Disbursements.....	0.00	4000.00
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	13114.63	131058.51
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	13114.63	131058.51
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	42868.79	617620.32
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	32712.47	390145.65

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	35195.23	376320.77
34. Total Contribution Refunds (from Line 28(d))	30.00	11920.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	35165.23	364400.77
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	19567.84	212338.31
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	5607.94
38. Net Operating Expenditures (subtract Line 37 from Line 36)	19567.84	206730.37

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..... <small>(Use Schedule L-A)</small>	0.00	0.00
b. Unitemized.....	0.00	0.00
c. Total.....	0.00	0.00
2. OTHER RECEIPTS.....	0.00	21.50
3. TOTAL RECEIPTS..... <small>(Add Lines 1c and 2)</small>	0.00	21.50
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT <small>(Use Schedule L-B)</small>		
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	10.75
6. TOTAL DISBURSEMENTS..... <small>(Add Lines 4e and 5)</small>	0.00	10.75
7. BEGINNING CASH ON HAND..... <small>(for Column B, use cash as of January 1st)</small>	78.00	67.25
8. RECEIPTS..... <small>(from Line 3)</small>	0.00	21.50
9. SUBTOTAL..... <small>(Add Lines 7 and 8)</small>	78.00	88.75
10. DISBURSEMENTS..... <small>(From Line 6)</small>	0.00	10.75
11. ENDING CASH ON HAND..... <small>(Subtract Line 10 From Line 9)</small>	78.00	78.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 8 / 55
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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)
William B. Adams, Jr.
Mailing Address 16978 SW Blackberry Ln

City State Zip Code
Beaverton OR 97007-6282

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

Name of Employer Occupation
W.B. Adams Insurance

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 9

Transaction ID: 91112.C106699

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Sam Allen
Mailing Address 7209 SE Topper Dr

City State Zip Code
Vancouver WA 98664

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

Name of Employer Occupation
Monarch Hotel Hotelier

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 9

Transaction ID: 91015.C106474

Amount of Each Receipt this Period
500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Michael Brodeur
Mailing Address 324 SE Spokane St

City State Zip Code
Portland OR 97202-6447

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

Name of Employer Occupation
Sellwood Medical Clinic Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: 91019.C106549

Amount of Each Receipt this Period
100.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	850.00
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 9 / 55

(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)
Knute Buehler

Mailing Address 1122 NW Foxwood Pl

City State Zip Code
Bend OR 97701-8606

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

Name of Employer Occupation
Orthopedic Center for the Casc Physician

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 2000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 9

Transaction ID: 91112.C106701

Amount of Each Receipt this Period

2000.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Doris Caldwell

Mailing Address 4700 SW Hollyhock Cir #305

City State Zip Code
Corvallis OR 97333-5137

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

Name of Employer Occupation
Retired Retired

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

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91008.C106093

Amount of Each Receipt this Period

50.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Gene Constant

Mailing Address 66 E 13th Ave

City State Zip Code
Eugene OR 97401

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

Name of Employer Occupation
Clothes 4 All Public Relations/ Media

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 280.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91008.C106083

Amount of Each Receipt this Period

280.00

Receipt

SUBTOTAL of Receipts This Page (optional)

2330.00

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 10 / 55
	<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) Janis Fiske	Date of Receipt MM / DD / YYYY 10 / 20 / 2009
	Mailing Address 1191 Fish Hatchery Rd	Transaction ID: 91112.C106588
	City State Zip Code Grants Pass OR 97527-9599	Amount of Each Receipt this Period 62.00
	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 ▼ 262.00	

B.	Full Name (Last, First, Middle Initial) Richard Geary	Date of Receipt MM / DD / YYYY 10 / 16 / 2009
	Mailing Address 1211 SW 5th Ave Ste 2980	Transaction ID: 91019.C106550
	City State Zip Code Portland OR 97204-3729	Amount of Each Receipt this Period 2000.00
	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 ▼ 2000.00	

C.	Full Name (Last, First, Middle Initial) Frank Gill	Date of Receipt MM / DD / YYYY 10 / 19 / 2009
	Mailing Address 01740 SW Military Rd	Transaction ID: 91112.C106577
	City State Zip Code Portland OR 97219-8384	Amount of Each Receipt this Period 5000.00
	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 ▼ 10000.00	

SUBTOTAL of Receipts This Page (optional)	7062.00
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 11 / 55
(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)
Serena Hickman

Mailing Address 535 Patrick Loop

City State Zip Code
Cottage Grove OR 97424-9323

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
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 9

Transaction ID: 91015.C106485

Amount of Each Receipt this Period
100.00

Receipt

B. Full Name (Last, First, Middle Initial)
James L. Huffman

Mailing Address 5340 SW Hewett Blvd

City State Zip Code
Portland OR 97221-2254

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

Name of Employer Occupation
Lewis & Clark Law School Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 9

Transaction ID: 91112.C106665

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address 13615,SE Rivercrest Drive

City State Zip Code
Vancouver WA 98683-6677

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

Name of Employer Occupation
Columbia Cascade Co. CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 9

Transaction ID: 91112.C106603

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **2100.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 55
(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)
Fred Kurzweil

Mailing Address 583 Rocky Rd

City State Zip Code
Hood River OR 97031

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
10 / 05 / 2009

Transaction ID: 91015.C106323

Amount of Each Receipt this Period
50.00

Receipt

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

Mailing Address 800 NE Tenney Rd Ste 110

City State Zip Code
Vancouver WA 98685-2831

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 9000.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2009

Transaction ID: 91112.C106578

Amount of Each Receipt this Period
1500.00

Receipt

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

Mailing Address 111 SW Columbia St Ste 1380

City State Zip Code
Portland OR 97201-5845

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

Name of Employer Occupation
Melvin Mark Companies Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
MM / DD / YYYY
10 / 15 / 2009

Transaction ID: 91019.C106507

Amount of Each Receipt this Period
500.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 2050.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 55
(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)
Arthur Moshofsky
Mailing Address 2850 SW Lakeview Blvd.
City Lake Oswego State OR Zip Code 97035
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 10 / 27 / 2009
Transaction ID: 91112.C106651
Amount of Each Receipt this Period 500.00
Receipt

B. Full Name (Last, First, Middle Initial)
William J. Moshofsky
Mailing Address 10585 SW 161st Ct
City Beaverton State OR Zip Code 97007-8171
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 ▼ 3030.00
Date of Receipt 10 / 16 / 2009
Transaction ID: 91019.C106547
Amount of Each Receipt this Period 500.00
Receipt

C. Full Name (Last, First, Middle Initial)
Robert Neighbor
Mailing Address 2130 SW Jefferson St Ste 315
City Portland State OR Zip Code 97201-7711
FEC ID number of contributing federal political committee. **C**
Name of Employer RW Neighbor and Co. Occupation Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 10 / 02 / 2009
Transaction ID: 91015.C106293
Amount of Each Receipt this Period 200.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 1200.00
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 / 55
(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)
Lawrence Olsen

Mailing Address 285 N 10th St

City State Zip Code
Central Point OR 97502

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 ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 9

Transaction ID: 91112.C106569

Amount of Each Receipt this Period
100.00

Receipt

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

Mailing Address PO Box 5669

City State Zip Code
Beaverton OR 97006

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

Name of Employer Occupation
Parks Medical Electronics Inc Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: 91019.C106524

Amount of Each Receipt this Period
4000.00

Receipt

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

Mailing Address 8530 Helmick Rd

City State Zip Code
Monmouth OR 97361-9559

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 ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91008.C106098

Amount of Each Receipt this Period
110.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **4210.00**

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 15 / 55
(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)
R. Reinmuth

Mailing Address 870 Hassett Street

City State Zip Code
Brookings OR 97415

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 ▼ 280.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: 91015.C106299

Amount of Each Receipt this Period
75.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Lawrence M. Smith

Mailing Address 7778 SW Green Valley Ter

City State Zip Code
Portland OR 97225-1568

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 ▼ 800.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 8 / 2 0 0 9

Transaction ID: 91015.C106118

Amount of Each Receipt this Period
100.00

Receipt

C.

Full Name (Last, First, Middle Initial)
W L Smith

Mailing Address Box 32

City State Zip Code
Fort Rock OR 97735

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

Name of Employer William Smith Properties Inc Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: 91112.C106680

Amount of Each Receipt this Period
500.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **675.00**

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 16 / 55	
	(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"/> 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) Robert Zagunis		Date of Receipt																					
	Mailing Address 1211 SW 5th Ave Suite 2130		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	0		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	0		3	0		2	0	0	9														
	City	State	Zip Code	Transaction ID: 91112.C106682																				
	Portland	OR	97204	Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.		C	500.00																					
Name of Employer Jensen Investment Management		Occupation Financial Fund Manager	Receipt																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	500.00																					

SUBTOTAL of Receipts This Page (optional)	500.00
TOTAL This Period (last page this line number only)	20977.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 17 / 55
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 12
		<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) Republican National Committee		Date of Receipt
Mailing Address 310 First St SE		<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2009"/>
City	State	Zip Code
Washington	DC	20003-
FEC ID number of contributing federal political committee.	<input type="text" value="C00003418"/>	Transaction ID: 91112.C106909
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="30000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	Transfers From Affil./Auth.
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="130000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="30000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="30000.00"/>

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

A.

Full Name (Last, First, Middle Initial)
Key Bank

Mailing Address PO Box 22114

City Albany State NY Zip Code 12201-

Purpose of Disbursement
Bank Fee

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 91112.E17881
Date of Disbursement

10 / 23 / 2009

Amount of Each Disbursement this Period

15.00

BANK FEE

B.

Full Name (Last, First, Middle Initial)
Key Bank

Mailing Address PO Box 22114

City Albany State NY Zip Code 12201-

Purpose of Disbursement
Bank Fees

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 91112.E17878
Date of Disbursement

10 / 30 / 2009

Amount of Each Disbursement this Period

6.00

BANK FEES

C.

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
List Rental - OR GOP

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 91112.E17817
Date of Disbursement

10 / 16 / 2009

Amount of Each Disbursement this Period

1023.00

LIST RENTAL - OR GOP

SUBTOTAL of Disbursements This Page (optional) ▶

1044.00

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) Direct Mail Systems, Inc	Transaction ID: 91112.E17816 Date of Disbursement
	Mailing Address 12450 Automobile Boulevard	<input type="text" value="10"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Clearwater State FL Zip Code 34622-	Amount of Each Disbursement this Period
	Purpose of Disbursement (Replacement) List Rental - OR GOP	<input type="text" value="2000.00"/>
	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) ▼
		(REPLACEMENT) LIST RENTAL - OR GOP

B.	Full Name (Last, First, Middle Initial) Direct Mail Systems, Inc	Transaction ID: 91112.E17815 Date of Disbursement
	Mailing Address 12450 Automobile Boulevard	<input type="text" value="10"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Clearwater State FL Zip Code 34622-	Amount of Each Disbursement this Period
	Purpose of Disbursement VOIDED Check	<input type="text" value="-2000.00"/>
	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) ▼
		VOIDED CHECK

C.	Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: 91112.E17847 Date of Disbursement
	Mailing Address 7320 N Dreamy Draw Dr	<input type="text" value="10"/> <input type="text" value="02"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Phoenix State AZ Zip Code 85020-5212	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraising Phone Calls- OR GOP	<input type="text" value="35.00"/>
	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 PHONE CALLS- OR GOP

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="35.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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 Fundraising Phone Calls- OR GOP 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: 91112.E17845 Date of Disbursement 10 / 02 / 2009 Amount of Each Disbursement this Period 1000.00 FUNDRAISING PHONE CALLS-OR GOP
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 Fundraising Phone Calls- OR GOP 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: 91112.E17846 Date of Disbursement 10 / 02 / 2009 Amount of Each Disbursement this Period 217.00 FUNDRAISING PHONE CALLS-OR GOP
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 Fundraising Phone Calls- OR GOP 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: 91112.E17842 Date of Disbursement 10 / 02 / 2009 Amount of Each Disbursement this Period 1000.00 FUNDRAISING PHONE CALLS-OR GOP

SUBTOTAL of Disbursements This Page (optional) ▶	2217.00
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: 91112.E17841 Date of Disbursement
	Mailing Address 7320 N Dreamy Draw Dr	<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City Phoenix State AZ Zip Code 85020-5212	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraising Phone Calls- OR GOP	<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 PHONE CALLS-OR GOP

B.	Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: 91112.E17843 Date of Disbursement
	Mailing Address 7320 N Dreamy Draw Dr	<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City Phoenix State AZ Zip Code 85020-5212	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraising Phone Calls- OR GOP	<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 PHONE CALLS-OR GOP

C.	Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: 91112.E17844 Date of Disbursement
	Mailing Address 7320 N Dreamy Draw Dr	<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City Phoenix State AZ Zip Code 85020-5212	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraising Phone Calls- OR GOP	<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 PHONE CALLS-OR GOP

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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: 91112.E17834 Date of Disbursement 10 / 09 / 2009
	Mailing Address 7320 N Dreamy Draw Dr	Amount of Each Disbursement this Period 50.00
	City Phoenix State AZ Zip Code 85020-5212	
	Purpose of Disbursement Fundraising Phone Calls- OR GOP	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	FUNDRAISING PHONE CALLS-OR GOP
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: 91112.E17833 Date of Disbursement 10 / 09 / 2009
	Mailing Address 7320 N Dreamy Draw Dr	Amount of Each Disbursement this Period 700.00
	City Phoenix State AZ Zip Code 85020-5212	
	Purpose of Disbursement Fundraising Phone Calls- OR GOP	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	FUNDRAISING PHONE CALLS-OR GOP
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: 91112.E17831 Date of Disbursement 10 / 09 / 2009
	Mailing Address 7320 N Dreamy Draw Dr	Amount of Each Disbursement this Period 750.00
	City Phoenix State AZ Zip Code 85020-5212	
	Purpose of Disbursement Fundraising Phone Calls- OR GOP	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	FUNDRAISING PHONE CALLS-OR GOP
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	1500.00
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)

PAGE 23 / 55

<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: 91112.E17832 Date of Disbursement 10 / 09 / 2009
	Mailing Address 7320 N Dreamy Draw Dr	Amount of Each Disbursement this Period 750.00
	City Phoenix State AZ Zip Code 85020-5212	
	Purpose of Disbursement Fundraising Phone Calls- OR GOP	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) ▼
		FUNDRAISING PHONE CALLS-OR GOP

B.	Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: 91112.E17830 Date of Disbursement 10 / 09 / 2009
	Mailing Address 7320 N Dreamy Draw Dr	Amount of Each Disbursement this Period 750.00
	City Phoenix State AZ Zip Code 85020-5212	
	Purpose of Disbursement Fundraising Phone Calls- OR GOP	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) ▼
		FUNDRAISING PHONE CALLS-OR GOP

C.	Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: 91112.E17835 Date of Disbursement 10 / 16 / 2009
	Mailing Address 7320 N Dreamy Draw Dr	Amount of Each Disbursement this Period 145.00
	City Phoenix State AZ Zip Code 85020-5212	
	Purpose of Disbursement Fundraising Phone Calls- OR GOP	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) ▼
		FUNDRAISING PHONE CALLS-OR GOP

SUBTOTAL of Disbursements This Page (optional)	▶	1645.00
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: 91112.E17836 Date of Disbursement 10 / 16 / 2009
	Mailing Address 7320 N Dreamy Draw Dr	Amount of Each Disbursement this Period 800.62
	City Phoenix State AZ Zip Code 85020-5212	
	Purpose of Disbursement Fundraising Phone Calls- OR GOP	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) ▼
		FUNDRAISING PHONE CALLS-OR GOP

B.	Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: 91112.E17837 Date of Disbursement 10 / 16 / 2009
	Mailing Address 7320 N Dreamy Draw Dr	Amount of Each Disbursement this Period 400.00
	City Phoenix State AZ Zip Code 85020-5212	
	Purpose of Disbursement Fundraising Phone Calls- OR GOP	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) ▼
		FUNDRAISING PHONE CALLS-OR GOP

C.	Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: 91112.E17838 Date of Disbursement 10 / 16 / 2009
	Mailing Address 7320 N Dreamy Draw Dr	Amount of Each Disbursement this Period 400.00
	City Phoenix State AZ Zip Code 85020-5212	
	Purpose of Disbursement Fundraising Phone Calls- OR GOP	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) ▼
		FUNDRAISING PHONE CALLS-OR GOP

SUBTOTAL of Disbursements This Page (optional)	▶	1600.62
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 Mailing Address 7320 N Dreamy Draw Dr City Phoenix State AZ Zip Code 85020-5212 Purpose of Disbursement Fundraising Phone Calls- OR GOP 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: 91112.E17840 Date of Disbursement 10 / 16 / 2009 Amount of Each Disbursement this Period 400.00 FUNDRAISING PHONE CALLS-OR GOP
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 Fundraising Phone Calls- OR GOP 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: 91112.E17839 Date of Disbursement 10 / 16 / 2009 Amount of Each Disbursement this Period 400.00 FUNDRAISING PHONE CALLS-OR GOP
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 Fundraising Phone Calls- OR GOP 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: 91112.E17828 Date of Disbursement 10 / 23 / 2009 Amount of Each Disbursement this Period 85.00 FUNDRAISING PHONE CALLS-OR GOP

SUBTOTAL of Disbursements This Page (optional) ▶	885.00
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)

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<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: 91112.E17827 Date of Disbursement 10 / 23 / 2009
	Mailing Address 7320 N Dreamy Draw Dr	Amount of Each Disbursement this Period 386.00
	City Phoenix State AZ Zip Code 85020-5212	
	Purpose of Disbursement Fundraising Phone Calls- OR GOP	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	FUNDRAISING PHONE CALLS-OR GOP
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: 91112.E17829 Date of Disbursement 10 / 23 / 2009
	Mailing Address 7320 N Dreamy Draw Dr	Amount of Each Disbursement this Period 160.00
	City Phoenix State AZ Zip Code 85020-5212	
	Purpose of Disbursement Fundraising Phone Calls- OR GOP	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	FUNDRAISING PHONE CALLS-OR GOP
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: 91112.E17826 Date of Disbursement 10 / 23 / 2009
	Mailing Address 7320 N Dreamy Draw Dr	Amount of Each Disbursement this Period 2000.00
	City Phoenix State AZ Zip Code 85020-5212	
	Purpose of Disbursement Fundraising Phone Calls- OR GOP	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	FUNDRAISING PHONE CALLS-OR GOP
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	2546.00
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)

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<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

<p>A. Full Name (Last, First, Middle Initial) Green Office LLC</p> <p>Mailing Address 11560 SW 67th Ave Suite 333</p> <p>City Portland State OR Zip Code 97223-</p> <p>Purpose of Disbursement Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 91015.E17770</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2000.00"/></p> <p>RENT</p>
<p>B. Full Name (Last, First, Middle Initial) Key Merchants</p> <p>Mailing Address 7300 Chapman Highway</p> <p>City Knoxville State TN Zip Code 37920-</p> <p>Purpose of Disbursement Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 91112.E17875</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="285.76"/></p> <p>CREDIT CARD FEES</p>
<p>C. Full Name (Last, First, Middle Initial) Key Merchants</p> <p>Mailing Address 7300 Chapman Highway</p> <p>City Knoxville State TN Zip Code 37920-</p> <p>Purpose of Disbursement Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 91112.E17876</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="25.00"/></p> <p>CREDIT CARD FEES</p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2310.76"/>
TOTAL This Period (last page this line number only)	<input type="text" value="16783.38"/>

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>A. Full Name (Last, First, Middle Initial) Kevin Hoar</p> <p>Mailing Address 12563 NW Millford St</p> <p>City Portland State OR Zip Code 97229-9303</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>Transaction ID: 91015.E17742</p> <p>Date of Disbursement 10 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 449.05</p> <p>FEA PAYROLL</p>
<p>B. Full Name (Last, First, Middle Initial) Kevin Hoar</p> <p>Mailing Address 12563 NW Millford St</p> <p>City Portland State OR Zip Code 97229-9303</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>Transaction ID: 91112.E17805</p> <p>Date of Disbursement 10 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 449.05</p> <p>FEA PAYROLL</p>
<p>C. Full Name (Last, First, Middle Initial) Internal Revenue Svc-Payroll Tax Dept.</p> <p>Mailing Address c/o Key Bank 1500 Edgewater St NW</p> <p>City Salem State OR Zip Code 97304-</p> <p>Purpose of Disbursement FEA Payroll Taxes</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>Transaction ID: 91015.E17705</p> <p>Date of Disbursement 10 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 91.80</p> <p>FEA PAYROLL TAXES</p>

SUBTOTAL of Disbursements This Page (optional) **989.90**

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)

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<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) Internal Revenue Svc-Payroll Tax Dept. Mailing Address c/o Key Bank 1500 Edgewater St NW City Salem State OR Zip Code 97304- Purpose of Disbursement FEA Payroll Taxes 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: 91015.E17704 Date of Disbursement 10 / 05 / 2009
	Amount of Each Disbursement this Period 4.80 FEA PAYROLL TAXES

B. Full Name (Last, First, Middle Initial) Internal Revenue Svc-Payroll Tax Dept. Mailing Address c/o Key Bank 1500 Edgewater St NW City Salem State OR Zip Code 97304- Purpose of Disbursement FEA Payroll Taxes 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: 91015.E17745 Date of Disbursement 10 / 19 / 2009
	Amount of Each Disbursement this Period 1481.26 FEA PAYROLL TAXES

C. Full Name (Last, First, Middle Initial) LifeWise Mailing Address 815 SW Bond St City Bend State OR Zip Code 97702- Purpose of Disbursement Insurance 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: 91112.E17853 Date of Disbursement 10 / 02 / 2009
	Amount of Each Disbursement this Period 812.85 INSURANCE

SUBTOTAL of Disbursements This Page (optional) ▶	2298.91
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)

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<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) LifeWise Mailing Address 815 SW Bond St City Bend State OR Zip Code 97702- Purpose of Disbursement Insurance 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: 91112.E17854 Date of Disbursement 10 / 23 / 2009 Amount of Each Disbursement this Period 695.25 INSURANCE	
B.	Full Name (Last, First, Middle Initial) Julia Miller Mailing Address 6574 SW Arranmore Ct City Portland State OR Zip Code 97223- Purpose of Disbursement FEA Payroll 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: 91015.E17740 Date of Disbursement 10 / 15 / 2009 Amount of Each Disbursement this Period 814.60 FEA PAYROLL	
C.	Full Name (Last, First, Middle Initial) Julia Miller Mailing Address 6574 SW Arranmore Ct City Portland State OR Zip Code 97223- Purpose of Disbursement FEA Payroll 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: 91112.E17807 Date of Disbursement 10 / 30 / 2009 Amount of Each Disbursement this Period 814.60 FEA PAYROLL	

SUBTOTAL of Disbursements This Page (optional) ▶	2324.45
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 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) Oregon Department of Revenue Mailing Address P.O. Box 14800 City Salem State OR Zip Code 97309-0920 Purpose of Disbursement FEA Payroll Taxes 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: 91015.E17706 Date of Disbursement 10 / 05 / 2009 Amount of Each Disbursement this Period 19.08 FEA PAYROLL TAXES
B.	Full Name (Last, First, Middle Initial) Oregon Department of Revenue Mailing Address P.O. Box 14800 City Salem State OR Zip Code 97309-0920 Purpose of Disbursement FEA Payroll Taxes 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: 91015.E17744 Date of Disbursement 10 / 19 / 2009 Amount of Each Disbursement this Period 457.97 FEA PAYROLL TAXES
C.	Full Name (Last, First, Middle Initial) Andrew Over Mailing Address 1485 SW 134th Ave City Beaverton State OR Zip Code 97005-0986 Purpose of Disbursement FEA Payroll 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: 91015.E17741 Date of Disbursement 10 / 15 / 2009 Amount of Each Disbursement this Period 2622.95 FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional) ▶

3100.00

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)

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<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) Andrew Over Mailing Address 1485 SW 134th Ave City Beaverton State OR Zip Code 97005-0986 Purpose of Disbursement FEA Payroll 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: 91112.E17804 Date of Disbursement 10 / 30 / 2009 Amount of Each Disbursement this Period 2622.94 FEA PAYROLL
B.	Full Name (Last, First, Middle Initial) Paula Warren Mailing Address 18320 NW Chemeketa Lane #237 City Portland State OR Zip Code 97229- Purpose of Disbursement FEA Payroll 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: 91015.E17743 Date of Disbursement 10 / 15 / 2009 Amount of Each Disbursement this Period 612.58 FEA PAYROLL
C.	Full Name (Last, First, Middle Initial) Paula Warren Mailing Address 18320 NW Chemeketa Lane #237 City Portland State OR Zip Code 97229- Purpose of Disbursement FEA Payroll 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: 91112.E17799 Date of Disbursement 10 / 30 / 2009 Amount of Each Disbursement this Period 612.59 FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional) ▶

3848.11

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)

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<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)
Lucas Zinserling

Mailing Address 12035 SW Rose Vista DR

City State Zip Code
Portland OR 97223-

Purpose of Disbursement
FEA Payroll

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 91112.E17806
Date of Disbursement

^M ^M / ^D ^D / ^Y ^Y ^Y ^Y

Amount of Each Disbursement this Period

FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE C (FEC Form 3X)

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

LOANS

NAME OF COMMITTEE (In Full)
Oregon Republican Party

Transaction ID: LS90219.C93909

LOAN SOURCE Full Name (Last, First, Middle Initial) F. Douglas Day	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 4386 Rowan Ave N	
City Keizer State OR ZIP Code 97303-5824	

Original Amount of Loan 10000.00	Cumulative Payment To Date 1000.00	Balance Outstanding at Close of This Period 9000.00
-------------------------------------	---------------------------------------	--

TERMS

Date Incurred MM DD YY YY 02 04 2008	Date Due 20091231	Interest Rate 8.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--	----------------------	-------------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional)	<input style="width: 100%;" type="text" value="9000.00"/>
TOTALS This Period (last page in this line only)	<input style="width: 100%;" type="text"/>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE C (FEC Form 3X)

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

FOR LINE 13 OF FORM 3X

LOANS

NAME OF COMMITTEE (In Full)
Oregon Republican Party

Transaction ID: LS90219.C93964

LOAN SOURCE Full Name (Last, First, Middle Initial)
Michael Scheel

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 3951 Croisan Creek Rd S

City Salem State OR ZIP Code 97302-9474

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
10000.00	1000.00	9000.00

TERMS

Date Incurred: MM DD YYYY 01 31 2008
 Date Due: 20091231
 Interest Rate: 8.00 % (apr)
 Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)	▶	9000.00
TOTALS This Period (last page in this line only)	▶	[]

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

SCHEDULE C (FEC Form 3X)

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

FOR LINE 13 OF FORM 3X

LOANS

NAME OF COMMITTEE (In Full)
Oregon Republican Party

Transaction ID: LS90219.C93966

LOAN SOURCE Full Name (Last, First, Middle Initial) Donald Malarkey	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 2495 E Nob Hill St SE	
City Salem State OR ZIP Code 97302-3733	

Original Amount of Loan 10000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 10000.00
-------------------------------------	------------------------------------	---

TERMS

Date Incurred MM DD YY YY 01 30 2008	Date Due 20091231	Interest Rate 8.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--	----------------------	-------------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional)	<input style="width: 100%;" type="text" value="10000.00"/>
TOTALS This Period (last page in this line only)	<input style="width: 100%;" type="text"/>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE C (FEC Form 3X)

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

FOR LINE 13 OF FORM 3X

LOANS

NAME OF COMMITTEE (In Full)
Oregon Republican Party

Transaction ID: LS90219.C93965

LOAN SOURCE Full Name (Last, First, Middle Initial)
Julie Scheel

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 3951 Croisan Creek Rd S

City Salem State OR ZIP Code 97302-9474

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
10000.00	0.00	10000.00

TERMS

Date Incurred: MM DD YY YY 01 31 2008
Date Due: 20091231
Interest Rate: 8.00 % (apr)
Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)	▶	10000.00
TOTALS This Period (last page in this line only)	▶	38000.00

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

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Aristotle International			Nature of Debt (Purpose): Computer Support
Mailing Address 205 Pennsylvania Ave SE			
City Washington	State DC	ZIP Code 20003-1182	

Outstanding Balance Beginning This Period <input type="text" value="2250.00"/>		Transaction ID: LS91116.E17909	
Amount Incurred This Period <input type="text" value="13.97"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2263.97"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Direct Mail Systems, Inc			Nature of Debt (Purpose): List Rental - OR GOP
Mailing Address 12450 Automobile Boulevard			
City Clearwater	State FL	ZIP Code 34622-	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: LS91114.E17891	
Amount Incurred This Period <input type="text" value="5698.87"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="5698.87"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Office Depot			Nature of Debt (Purpose): Office Supplies
Mailing Address 10520 SW Cascade Ave			
City Portland	State OR	ZIP Code 97223-4302	

Outstanding Balance Beginning This Period <input type="text" value="791.99"/>		Transaction ID: LS91112.E17858	
Amount Incurred This Period <input type="text" value="482.74"/>	Payment This Period <input type="text" value="592.74"/>	Outstanding Balance at Close of This Period <input type="text" value="681.99"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="8644.83"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) 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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor LifeWise			Nature of Debt (Purpose): Insurance
Mailing Address 815 SW Bond St			
City Bend	State OR	ZIP Code 97702-	

Outstanding Balance Beginning This Period <input type="text" value="812.85"/>		Transaction ID: LS91112.E17853	
Amount Incurred This Period <input type="text" value="695.25"/>	Payment This Period <input type="text" value="1508.10"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Pitney Bowes Purchase Power			Nature of Debt (Purpose): Postage - OR GOP
Mailing Address PO Box 856042			
City Louisville	State KY	ZIP Code 40285-6042	

Outstanding Balance Beginning This Period <input type="text" value="1993.61"/>		Transaction ID: LS91114.E17889	
Amount Incurred This Period <input type="text" value="1179.16"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3172.77"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor AT&T Wireless			Nature of Debt (Purpose): Phone service
Mailing Address PO Box 30459			
City Los Angeles	State CA	ZIP Code 90030-	

Outstanding Balance Beginning This Period <input type="text" value="67180.90"/>		Transaction ID: LS90219.E11336	
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="67180.90"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="70353.67"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) 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 40 / 55
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Andrew Over	Nature of Debt (Purpose): Reimbursement for Travel
Mailing Address 1485 SW 134th Ave	
City State ZIP Code Beaverton OR 97005-0986	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID: LS91116.E17934	
Amount Incurred This Period <input type="text" value="1676.65"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1676.65"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Lynx Group Inc.	Nature of Debt (Purpose): Printing - ORGOP
Mailing Address 2746 Front St Ne	
City State ZIP Code Salem OR 97301-	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID: LS91114.E17887	
Amount Incurred This Period <input type="text" value="1575.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1575.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Compliance Consulting Company	Nature of Debt (Purpose): Compliance Consulting
Mailing Address PO Box 365	
City State ZIP Code Mc Lean VA 22101-0365	

Outstanding Balance Beginning This Period <input type="text" value="25000.00"/>	Transaction ID: LS91112.E17818	
Amount Incurred This Period <input type="text" value="-9500.00"/>	Payment This Period <input type="text" value="3500.00"/>	Outstanding Balance at Close of This Period <input type="text" value="12000.00"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="15251.65"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) 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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Lori Hardwick Fundraising			Nature of Debt (Purpose): Fundraising Consulting -- OR GOP
Mailing Address PO Box 25445			
City Portland	State OR	ZIP Code 97298-0445	

Outstanding Balance Beginning This Period <input type="text" value="7000.00"/>		Transaction ID: LS91112.E17856	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="3000.00"/>	Outstanding Balance at Close of This Period <input type="text" value="4000.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Bradshaw Advertising			Nature of Debt (Purpose): Advertising - OR GOP
Mailing Address 811 NW 19th			
City Portland	State OR	ZIP Code 97209-	

Outstanding Balance Beginning This Period <input type="text" value="3450.00"/>		Transaction ID: LS91114.E17892	
Amount Incurred This Period <input type="text" value="887.50"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="4337.50"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Leo Company			Nature of Debt (Purpose): Communications Services - OR GOP
Mailing Address 9318 Champoeg Rd NE			
City Aurora	State OR	ZIP Code 97002-	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: LS91114.E17888	
Amount Incurred This Period <input type="text" value="1000.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1000.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="9337.50"/>
2) TOTALS This Period (last page this line number only).....	<input type="text" value="103587.65"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="38000.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text" value="141587.65"/>

**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 NON-FED STA-
 TE ACCT c/o Key Ba-
 nk

DATE OF RECEIPT

M M / D D / Y Y Y Y
 1 0 / 0 2 / 2 0 0 9

TOTAL AMOUNT TRANSFERRED

2370.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

2370.00

Transaction ID: H391112.C106910

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) _____

Transaction ID:

b) _____

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

Transaction ID:

v) Direct Candidate Support (List of Activity or Event Identifier)

a) _____

Transaction ID:

b) _____

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

Transaction ID:

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

Transaction ID:

TOTAL This Period (Generic Voter Drive)

Transaction ID:

TOTAL This Period (Exempt Activities)

Transaction ID:

TOTAL This Period (Direct Fundraising)

Transaction ID:

TOTAL This Period (Direct Candidate Support)

Transaction ID:

TOTAL This Period (Public Communications Referring Only to Party)

Transaction ID:

TOTAL This Period (Total Amount Transferred)

Transaction ID:

**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 NON-FED STA-
 TE ACCT c/o Key Ba-
 nk

DATE OF RECEIPT

M M / D D / Y Y Y Y
 1 0 / 0 9 / 2 0 0 9

TOTAL AMOUNT TRANSFERRED

2137.68

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

2137.68

Transaction ID: H391112.C106911

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) _____

Transaction ID:

b) _____

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

Transaction ID:

v) Direct Candidate Support (List of Activity or Event Identifier)

a) _____

Transaction ID:

b) _____

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

Transaction ID:

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

Transaction ID:

TOTAL This Period (Generic Voter Drive)

Transaction ID:

TOTAL This Period (Exempt Activities)

Transaction ID:

TOTAL This Period (Direct Fundraising)

Transaction ID:

TOTAL This Period (Direct Candidate Support)

Transaction ID:

TOTAL This Period (Public Communications Referring Only to Party)

Transaction ID:

TOTAL This Period (Total Amount Transferred)

Transaction ID:

**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 NON-FED STA- TE ACCT c/o Key Ba- nk	DATE OF RECEIPT M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 9	TOTAL AMOUNT TRANSFERRED 1532.60
---	---	-------------------------------------

BREAKDOWN OF TRANSFER RECEIVED		
i) Total Administrative		1532.60 Transaction ID: H391112.C106912
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		
		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED	
TOTAL This Period (Administrative)	6040.28
TOTAL This Period (Generic Voter Drive)	0.00
TOTAL This Period (Exempt Activities)	0.00
TOTAL This Period (Direct Fundraising)	0.00
TOTAL This Period (Direct Candidate Support)	0.00
TOTAL This Period (Public Communications Referring Only to Party)	0.00
TOTAL This Period (Total Amount Transferred)	6040.28

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)
Paula Warren

Mailing Address
18320 NW Chemeketa Lane #237

City State Zip Code
Portland OR 97229-

Purpose of Disbursement:
Reimbursement-- See Below

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

241428.63

Activity or Event Identifier:
ADMINISTRATION B 31 1

Date 10 / 23 / 2009

Transaction ID: H491112.E17800

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.07		7.77		9.84

B. Full Name (Last, First, Middle Initial)
The UPS Store

Mailing Address
2373 NW 185th

City State Zip Code
Hillsboro OR 97124-

Purpose of Disbursement:
Shipping

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

9.84

Activity or Event Identifier:
ADMINISTRATION B 31 1

[MEMO ITEM] Shipping

Date 10 / 23 / 2009

Transaction ID: H491112.E17803

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.07		7.77		9.84

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

Mailing Address
18320 NW Chemeketa Lane #237

City State Zip Code
Portland OR 97229-

Purpose of Disbursement:
Reimbursement-- See Below

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

239057.79

Activity or Event Identifier:
ADMINISTRATION B 31 1

Date 10 / 09 / 2009

Transaction ID: H491112.E17801

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.80		66.95		84.75

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.87		74.72		94.59

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) T- Mobile			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 37380			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">84.75</div>		
City Albuquerque	State NM	Zip Code 87176-7380	Category/ Type <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>		
Purpose of Disbursement: Phone Bill					
Activity or Event Identifier: ADMINISTRATION B 31 1 [MEMO ITEM] Phone Bill			Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 09 / 2009</div>		
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			Transaction ID: H491112.E17802		
<div style="border: 1px solid black; padding: 2px; width: 100%;">17.80</div>		<div style="border: 1px solid black; padding: 2px; width: 100%;">66.95</div>		<div style="border: 1px solid black; padding: 2px; width: 100%;">84.75</div>	

B. Full Name (Last, First, Middle Initial) Julia Miller			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 6574 SW Arranmore Ct			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">240822.44</div>		
City Portland	State OR	Zip Code 97223-	Category/ Type <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>		
Purpose of Disbursement: Reimbursement-- See Below					
Activity or Event Identifier: ADMINISTRATION B 31 1			Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 16 / 2009</div>		
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			Transaction ID: H491112.E17808		
<div style="border: 1px solid black; padding: 2px; width: 100%;">90.84</div>		<div style="border: 1px solid black; padding: 2px; width: 100%;">341.72</div>		<div style="border: 1px solid black; padding: 2px; width: 100%;">432.56</div>	

C. Full Name (Last, First, Middle Initial) Alaska Airlines			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 530 SW Madison St			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">304.20</div>		
City Portland	State OR	Zip Code 97204-1021	Category/ Type <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>		
Purpose of Disbursement: Travel					
Activity or Event Identifier: ADMINISTRATION B 31 1 [MEMO ITEM] Travel			Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 16 / 2009</div>		
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			Transaction ID: H491112.E17810		
<div style="border: 1px solid black; padding: 2px; width: 100%;">63.88</div>		<div style="border: 1px solid black; padding: 2px; width: 100%;">240.32</div>		<div style="border: 1px solid black; padding: 2px; width: 100%;">304.20</div>	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px; width: 100%;">90.84</div>		<div style="border: 1px solid black; padding: 2px; width: 100%;">341.72</div>		<div style="border: 1px solid black; padding: 2px; width: 100%;">432.56</div>

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
<div style="border: 1px solid black; padding: 2px; width: 100%;"></div>	<div style="border: 1px solid black; padding: 2px; width: 100%;"></div>	<div style="border: 1px solid black; padding: 2px; width: 100%;"></div>

**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) AT&T Wireless			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 30459			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: center;">128.36</div>		
City Los Angeles	State CA	Zip Code 90030-	Date M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 9 Transaction ID: H491112.E17809		
Purpose of Disbursement: Phone Service					
Activity or Event Identifier: ADMINISTRATION B 31 1 [MEMO ITEM] Phone Service					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px;">26.96</div>		<div style="border: 1px solid black; padding: 2px;">101.40</div>		<div style="border: 1px solid black; padding: 2px;">128.36</div>

B. Full Name (Last, First, Middle Initial) Paula Warren			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 18320 NW Chemeketa Lane #237			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: center;">239062.79</div>		
City Portland	State OR	Zip Code 97229-	Date M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 9 Transaction ID: H491112.E17813		
Purpose of Disbursement: Reimbursement-- See Below					
Activity or Event Identifier: ADMINISTRATION B 31 1					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px;">1.05</div>		<div style="border: 1px solid black; padding: 2px;">3.95</div>		<div style="border: 1px solid black; padding: 2px;">5.00</div>

C. Full Name (Last, First, Middle Initial) T- Mobile			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 37380			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: center;">5.00</div>		
City Albuquerque	State NM	Zip Code 87176-7380	Date M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 9 Transaction ID: H491112.E17814		
Purpose of Disbursement: Phone Bill					
Activity or Event Identifier: ADMINISTRATION B 31 1 [MEMO ITEM] Phone Bill					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px;">1.05</div>		<div style="border: 1px solid black; padding: 2px;">3.95</div>		<div style="border: 1px solid black; padding: 2px;">5.00</div>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px;">1.05</div>		<div style="border: 1px solid black; padding: 2px;">3.95</div>		<div style="border: 1px solid black; padding: 2px;">5.00</div>

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
<div style="border: 1px solid black; padding: 2px;"></div>	<div style="border: 1px solid black; padding: 2px;"></div>	<div style="border: 1px solid black; padding: 2px;"></div>

**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) Compliance Consulting Company			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 365			Allocated Activity or Event Year-To-Date 233015.97		
City	State	Zip Code	Category/ Type		
Mc Lean	VA	22101-0365			
Purpose of Disbursement: Compliance Consulting			Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/>		
Activity or Event Identifier: ADMINISTRATION B 31 1			Transaction ID: H491112.E17818		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
630.00		2370.00		3000.00

B. Full Name (Last, First, Middle Initial) Compliance Consulting Company			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 365			Allocated Activity or Event Year-To-Date 233515.97		
City	State	Zip Code	Category/ Type		
Mc Lean	VA	22101-0365			
Purpose of Disbursement: Compliance Consulting			Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/>		
Activity or Event Identifier: ADMINISTRATION B 31 1			Transaction ID: H491112.E17820		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
105.00		395.00		500.00

C. Full Name (Last, First, Middle Initial) U.S. Postmaster			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 Tigard or Main Branch			Allocated Activity or Event Year-To-Date 229918.67		
City	State	Zip Code	Category/ Type		
Tigard	OR	97223-			
Purpose of Disbursement: Postage -- OR GOP			Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/>		
Activity or Event Identifier: ADMINISTRATION B 31 1			Transaction ID: H491112.E17821		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
38.85		146.15		185.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
773.85		2911.15		3685.00

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)
U.S. Postmaster

Mailing Address
Tigard or Main Branch

City State Zip Code
Tigard OR 97223-

Purpose of Disbursement:
Postage -- OR GOP

Activity or Event Identifier:
ADMINISTRATION B 31 1

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
238038.22

Date 10 / 07 / 2009

Transaction ID: H491112.E17822

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
63.00 + 237.00 = 300.00

B. Full Name (Last, First, Middle Initial)
U.S. Postmaster

Mailing Address
Tigard or Main Branch

City State Zip Code
Tigard OR 97223-

Purpose of Disbursement:
Postage -- OR GOP

Activity or Event Identifier:
ADMINISTRATION B 31 1

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
240991.84

Date 10 / 22 / 2009

Transaction ID: H491112.E17823

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
9.24 + 34.76 = 44.00

C. Full Name (Last, First, Middle Initial)
U.S. Postmaster

Mailing Address
Tigard or Main Branch

City State Zip Code
Tigard OR 97223-

Purpose of Disbursement:
Postage -- OR GOP

Activity or Event Identifier:
ADMINISTRATION B 31 1

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
239848.58

Date 10 / 16 / 2009

Transaction ID: H491112.E17824

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
105.00 + 395.00 = 500.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
177.24 + 666.76 = 844.00

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)
Global Crossing

Mailing Address
PO Box 790407

City State Zip Code
Saint Louis MO 63179-0407

Purpose of Disbursement:
Phone Conferencing - OR GOP

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 31 1

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

240947.84

Date 10 / 16 / 2009

Transaction ID: H491112.E17848

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
26.33		99.07		125.40

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

Mailing Address
PO Box 34988

City State Zip Code
Seattle WA 98124-1988

Purpose of Disbursement:
Phone Service

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 31 1

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

241649.87

Date 10 / 26 / 2009

Transaction ID: H491112.E17849

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
46.46		174.78		221.24

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

Mailing Address
PO Box 34988

City State Zip Code
Seattle WA 98124-1988

Purpose of Disbursement:
Phone Service

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 31 1

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

240187.88

Date 10 / 16 / 2009

Transaction ID: H491112.E17850

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
39.75		149.55		189.30

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
112.54		423.40		535.94

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)
Lori Hardwick Fundraising

Mailing Address
PO Box 25445

City State Zip Code
Portland OR 97298-0445

Purpose of Disbursement:
Fundraising Consulting -- OR GOP

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

236871.22

Activity or Event Identifier:
ADMINISTRATION B 31 1

Date 10 / 02 / 2009

Transaction ID: H491112.E17856

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
630.00		2370.00		3000.00

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

Mailing Address
Box 1593

City State Zip Code
Portland OR 97207-1593

Purpose of Disbursement:
Newsclipping Service - OR GOP

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

239182.79

Activity or Event Identifier:
ADMINISTRATION B 31 1

Date 10 / 16 / 2009

Transaction ID: H491112.E17857

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.20		94.80		120.00

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

Mailing Address
10520 SW Cascade Ave

City State Zip Code
Portland OR 97223-4302

Purpose of Disbursement:
Office Supplies

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

241418.79

Activity or Event Identifier:
ADMINISTRATION B 31 1

Date 10 / 23 / 2009

Transaction ID: H491112.E17858

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
89.66		337.29		426.95

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
744.86		2802.09		3546.95

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) 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 10520 SW Cascade Ave			Allocated Activity or Event Year-To-Date 239348.58		
City Portland	State OR	Zip Code 97223-4302	Date <input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Office Supplies			Transaction ID: H491112.E17859		
Activity or Event Identifier: ADMINISTRATION B 31 1					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
34.82		130.97		165.79

B. Full Name (Last, First, Middle Initial) Philadelphia Insurance Company			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 1 Bala Plz			Allocated Activity or Event Year-To-Date 233871.22		
City Bala Cynwyd	State PA	Zip Code 19004-1409	Date <input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Insurance			Transaction ID: H491112.E17860		
Activity or Event Identifier: ADMINISTRATION B 31 1					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
74.60		280.65		355.25

C. Full Name (Last, First, Middle Initial) Philadelphia Insurance Company			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 1 Bala Plz			Allocated Activity or Event Year-To-Date 238973.04		
City Bala Cynwyd	State PA	Zip Code 19004-1409	Date <input type="text" value="10"/> / <input type="text" value="09"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Insurance			Transaction ID: H491112.E17861		
Activity or Event Identifier: ADMINISTRATION B 31 1					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
74.60		280.65		355.25

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
184.02		692.27		876.29

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)
Quinn Thomas Public Affairs

Mailing Address
5 Centerpointe Drive, Suite 400

City	State	Zip Code	
Lake Oswego	OR	97035-	

Purpose of Disbursement: Consulting Public Relations--OR GOP	Category/ Type
---	-------------------

Activity or Event Identifier:
ADMINISTRATION B 31 1

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
237738.22

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	2	/	2	0	0	9

Transaction ID: H491112.E17862

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
182.07		684.93		867.00

B. Full Name (Last, First, Middle Initial)
Ricoh Customer Finance Corp.

Mailing Address
PO Box 310010273

City	State	Zip Code	
Pasadena	CA	91110-0001	

Purpose of Disbursement: Equipment Lease	Category/ Type
---	-------------------

Activity or Event Identifier:
ADMINISTRATION B 31 1

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
240324.88

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	6	/	2	0	0	9

Transaction ID: H491112.E17863

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
28.77		108.23		137.00

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

Mailing Address
400 High Street

City	State	Zip Code	
Salem	OR	97312-1000	

Purpose of Disbursement: Insurance	Category/ Type
---------------------------------------	-------------------

Activity or Event Identifier:
ADMINISTRATION B 31 1

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
238617.79

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	9	/	2	0	0	9

Transaction ID: H491112.E17864

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
121.71		457.86		579.57

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
332.55		1251.02		1583.57

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) 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 6270 SE 29th Way			Allocated Activity or Event Year-To-Date 239998.58		
City Gresham	State OR	Zip Code 97080-	Date <input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Web Service			Transaction ID: H491112.E17865		
Activity or Event Identifier: ADMINISTRATION B 31 1					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
31.50		118.50		150.00

B. Full Name (Last, First, Middle Initial) Verizon Online			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 140 West Street			Allocated Activity or Event Year-To-Date 240389.88		
City New York	State NY	Zip Code 10007-	Date <input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Phone Service			Transaction ID: H491112.E17866		
Activity or Event Identifier: ADMINISTRATION B 31 1					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.65		51.35		65.00

C. Full Name (Last, First, Middle Initial) U-Haul Storage			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 11552 SW Pacific Hwy			Allocated Activity or Event Year-To-Date 229733.67		
City Portland	State OR	Zip Code 97223-	Date <input type="text" value="10"/> / <input type="text" value="01"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Storage Rental - OR GOP			Transaction ID: H491112.E17867		
Activity or Event Identifier: ADMINISTRATION B 31 1					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.69		55.26		69.95

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
59.84		225.11		284.95

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) U-Haul Storage			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 11552 SW Pacific Hwy			Allocated Activity or Event Year-To-Date 241719.82																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y										
M	M	/	D	D	/	Y	Y	Y	Y																
Portland	OR	97223-	Transaction ID: H491112.E17868																						
Purpose of Disbursement: Storage Rental - OR GOP			Category/ Type																						
Activity or Event Identifier: ADMINISTRATION B 31 1			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>2</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	8	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y																
1	0	/	2	8	/	2	0	0	9																

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.69		55.26		69.95

B. Full Name (Last, First, Middle Initial) Dell Financial			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 120001			Allocated Activity or Event Year-To-Date 230015.97																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y										
M	M	/	D	D	/	Y	Y	Y	Y																
Dallas	TX	75312-	Transaction ID: H491112.E17882																						
Purpose of Disbursement: Equipment Lease			Category/ Type																						
Activity or Event Identifier: ADMINISTRATION B 31 1			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	0	2	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y																
1	0	/	0	2	/	2	0	0	9																

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.43		76.87		97.30

C. Full Name (Last, First, Middle Initial) AM 1360 Kuik			Type of Allocated Activity: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input checked="" type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 566			Allocated Activity or Event Year-To-Date 46222.92																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y										
M	M	/	D	D	/	Y	Y	Y	Y																
Hillsboro	OR	97123-	Transaction ID: H491112.E17825																						
Purpose of Disbursement: Radio -- OR GOP			Category/ Type																						
Activity or Event Identifier: PUBLIC COMMUNICATIONS (REF TO			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>0</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	0	9	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y																
1	0	/	0	9	/	2	0	0	9																

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
168.00		632.00		800.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
203.12		764.13		967.25

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
2699.78	10156.32	12856.10