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# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

CALLAHAN FOR OREGON

ADDRESS (number and street)

PO BOX 4352



Check if different than previously reported. (ACC)

SALEM

OR

97302

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C 00548115

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

OR

00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y Y Y

in the State of

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



General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y Y Y

in the State of

5. Covering Period

M M / 10

D D / 01

Y Y Y Y Y Y / 2013

through

M M / 12

D D / 31

Y Y Y Y Y Y / 2013

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 MARK ALLEN CALLAHAN

Signature of Treasurer MARK ALLEN CALLAHAN

[Electronically Filed]

Date

M M / 01

D D / 31

Y Y Y Y Y Y / 2014

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

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FEC FORM 3 (Revised 02/2003)

14020152598

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**CALLAHAN FOR OREGON**

Report Covering the Period: From:

M M	/	D D	/	Y Y Y Y
10		01		2013

To:

M M	/	D D	/	Y Y Y Y
12		31		2013

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)) ....	8830.00	9514.54
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	8830.00	9514.54
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	5580.41	6264.94
(b) Total Offsets to Operating Expenditures (from Line 14) .....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	5580.41	6264.94
8. Cash on Hand at Close of Reporting Period (from Line 27) .....	3249.60	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

**For further information contact:**

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

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

14020152599

DETAILED SUMMARY PAGE  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

CALLAHAN FOR OREGON

Report Covering the Period: From:

MM / DD / YYYY  
10 / 01 / 2013

To:

MM / DD / YYYY  
12 / 31 / 2013

I. RECEIPTS

COLUMN A  
Total This Period

COLUMN B  
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than  
Political Committees

(i) Itemized (use Schedule A).....

500.00

500.00

(ii) Unitemized.....

1330.00

1440.00

(iii) TOTAL of contributions  
from individuals ▶

1830.00

1940.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees  
(such as PACs).....

0.00

0.00

(d) The Candidate.....

7000.00

7574.54

(e) TOTAL CONTRIBUTIONS  
(other than loans)  
(add Lines 11(a)(iii), (b), (c), and (d))..

8830.00

9514.54

12. TRANSFERS FROM OTHER  
AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the  
Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS  
(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING  
EXPENDITURES  
(Refunds, Rebates, etc.).....

0.00

0.00

15. OTHER RECEIPTS  
(Dividends, Interest, etc.).....

0.00

0.00

16. TOTAL RECEIPTS (add Lines  
11(e), 12, 13(c), 14, and 15)  
(Carry Total to Line 24, page 4)..... ▶

8830.00

9514.54

14020152600

DETAILED SUMMARY PAGE  
of Disbursements

II. DISBURSEMENTS

COLUMN A  
Total This Period

COLUMN B  
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	5580.41	6264.94
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	5580.41	6264.94

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.01
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	8830.00
25. SUBTOTAL (add Line 23 and Line 24).....	8830.01
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	5580.41
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	3249.60

14020152601

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 8
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CALLAHAN FOR OREGON**

**A.** Full Name (Last, First, Middle Initial)  
**Joseph Henry**

Mailing Address **1347 Ewald Ave SE**

City **Salem** State **OR** Zip Code **97302**

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

Name of Employer **Oregon Health Authority** Occupation **Systems Analyst**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **MM / DD / YYYY**  
**12 / 31 / 2013**

Transaction ID : **SA11AI.4347**

Amount of Each Receipt this Period  
**500.00**

Campaign Contribution

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt **MM / DD / YYYY**

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt **MM / DD / YYYY**

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... **500.00**

**TOTAL** This Period (last page this line number only)..... **500.00**

14020152602

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 6 OF 8	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**CALLAHAN FOR OREGON**

**A.** Full Name (Last, First, Middle Initial)  
**MARK ALLEN CALLAHAN**

Mailing Address **PO BOX 4352**

City **SALEM** State **OR** Zip Code **97302**

FEC ID number of contributing federal political committee. **C S4OR00172**

Name of Employer **Robert Half International** Occupation **Information Technology Consultant**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2574.54**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 30 / 2013**

Transaction ID : **SA11D.4350**

Amount of Each Receipt this Period  
**2000.00**

Campaign Contribution

**B.** Full Name (Last, First, Middle Initial)  
**MARK ALLEN CALLAHAN**

Mailing Address **PO BOX 4352**

City **SALEM** State **OR** Zip Code **97302**

FEC ID number of contributing federal political committee. **C S4OR00172**

Name of Employer **Robert Half International** Occupation **Information Technology Consultant**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5074.54**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 30 / 2013**

Transaction ID : **SA11D.4351**

Amount of Each Receipt this Period  
**2500.00**

Campaign Contribution

**C.** Full Name (Last, First, Middle Initial)  
**MARK ALLEN CALLAHAN**

Mailing Address **PO BOX 4352**

City **SALEM** State **OR** Zip Code **97302**

FEC ID number of contributing federal political committee. **C S4OR00172**

Name of Employer **Robert Half International** Occupation **Information Technology Consultant**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**7574.54**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 28 / 2013**

Transaction ID : **SA11D.4343**

Amount of Each Receipt this Period  
**2500.00**

Campaign Contribution

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

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

**7000.00**

**7000.00**

14020152603

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 OF 8	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**CALLAHAN FOR OREGON**

Full Name (Last, First, Middle Initial)  
**A. Daniel Clopton**

Mailing Address P.O. Box 7442

City Springfield State OR Zip Code 97475

Purpose of Disbursement Campaign Manager Consultant Fee

Candidate Name **CALLAHAN FOR OREGON**

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: OR District: 00

Date of Disbursement: MM / DD / YYYY  
10 / 24 / 2013

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB17.4290

Full Name (Last, First, Middle Initial)  
**B. Daniel Clopton**

Mailing Address P.O. Box 7442

City Springfield State OR Zip Code 97475

Purpose of Disbursement Campaign Manager Consulting Fee

Candidate Name **CALLAHAN FOR OREGON**

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: OR District: 00

Date of Disbursement: MM / DD / YYYY  
11 / 26 / 2013

Amount of Each Disbursement this Period: 1100.00

Transaction ID : SB17.4288

Full Name (Last, First, Middle Initial)  
**c. Political Innovations**

Mailing Address P.O. Box 1902

City Spring State TX Zip Code 77383

Purpose of Disbursement Website Re-Design/Development

Candidate Name **CALLAHAN FOR OREGON**

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: OR District: 00

Date of Disbursement: MM / DD / YYYY  
12 / 26 / 2013

Amount of Each Disbursement this Period: 900.00

Transaction ID : SB17.4335

**SUBTOTAL** of Disbursements This Page (optional)..... 3000.00

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

14020152604

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 8	
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21		

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NAME OF COMMITTEE (In Full)  
**CALLAHAN FOR OREGON**

Full Name (Last, First, Middle Initial) <b>A. Vistaprint.com</b>		Date of Disbursement MM / DD / YYYY 10 / 14 / 2013
Mailing Address 95 Hayden Avenue		Amount of Each Disbursement this Period 93.44 Transaction ID : SB17.4188
City Lexington State MA Zip Code 02421	Purpose of Disbursement Campaign materials - Mini car door magnets, bumper stickers and business cards Category/Type 006	
Candidate Name <b>CALLAHAN FOR OREGON</b>	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OR District: 00		

Full Name (Last, First, Middle Initial) <b>B. Vistaprint.com</b>		Date of Disbursement MM / DD / YYYY 10 / 29 / 2013
Mailing Address 95 Hayden Avenue		Amount of Each Disbursement this Period 57.22 Transaction ID : SB17.4244
City Lexington State MA Zip Code 02421	Purpose of Disbursement Campaign business cards - 1000ct Category/Type 006	
Candidate Name <b>CALLAHAN FOR OREGON</b>	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OR District: 00		

Full Name (Last, First, Middle Initial) <b>c. Vistaprint.com</b>		Date of Disbursement MM / DD / YYYY 12 / 31 / 2013
Mailing Address 95 Hayden Avenue		Amount of Each Disbursement this Period 169.35 Transaction ID : SB17.4364
City Lexington State MA Zip Code 02421	Purpose of Disbursement Campaign sign, business cards, and car door magnets Category/Type 004	
Candidate Name <b>CALLAHAN FOR OREGON</b>	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OR District: 00		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	320.01
<b>TOTAL</b> This Period (last page this line number only).....	3320.01

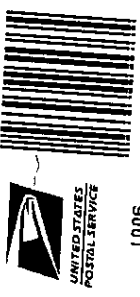
14020152605



14020152606

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# United States Senate

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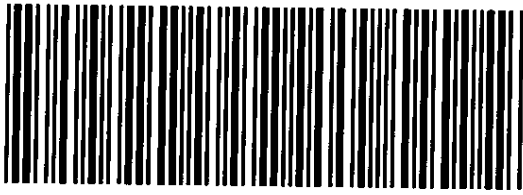
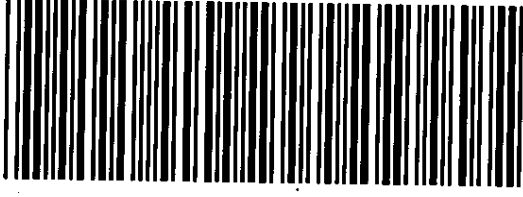
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DATE PREPARED **2-20-14**

14020152607



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