

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5
Blumenauer for Congress

ADDRESS (number and street) 830 NE Holladay, Suite 105
Check if different than previously reported. (ACC) Portland OR 97232

2. FEC IDENTIFICATION NUMBER C C00307314
3. IS THIS REPORT NEW (N) OR AMENDED (A)
CITY STATE ZIP CODE STATE DISTRICT
OR 03

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
[X] 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 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 in the State of

5. Covering Period M M / D D / Y Y Y Y 01 / 01 / 2014 through M M / D D / Y Y Y Y 03 / 31 / 2014

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 Henry Hewitt

Signature of Treasurer Henry Hewitt [Electronically Filed] Date M M / D D / Y Y Y Y 04 / 15 / 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.

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Blumenauer for Congress

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

	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))....	149376.01	687259.59
(b) Total Contribution Refunds (from Line 20(d))	100.00	104.17
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	149276.01	687155.42
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	124912.39	456398.03
(b) Total Offsets to Operating Expenditures (from Line 14).....	147.33	178.42
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	124765.06	456219.61
8. Cash on Hand at Close of Reporting Period (from Line 27).....	683067.68	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Blumenauer for Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	41510.00	177699.38
(ii) Unitemized.....	19591.01	47233.42
(iii) TOTAL of contributions from individuals ▶	61101.01	224932.80
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	88275.00	462326.79
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	149376.01	687259.59
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.)	147.33	178.42
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	78.14	450.35
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	149601.48	687888.36

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	124912.39	456398.03
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	100.00	104.17
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	100.00	104.17
21. OTHER DISBURSEMENTS	100000.00	232000.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	225012.39	688502.20

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	758478.59
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	149601.48
25. SUBTOTAL (add Line 23 and Line 24).....	908080.07
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	225012.39
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	683067.68

**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 104
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Marcela A. Alcantar

Mailing Address 5265 SW 153rd Ave.

City State Zip Code
Beaverton OR 97007

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

Name of Employer Occupation
Alcantar & Associates LLC President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 14 / 2014

Transaction ID : C8686521

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Gerald A. Baugh

Mailing Address 3327 NE 59th

City State Zip Code
portland OR 97213

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

Name of Employer Occupation
Group AGB, LTD Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1550.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 19 / 2014

Transaction ID : C8697687

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Margaret J. Bax

Mailing Address 3435 NE 22nd Ave

City State Zip Code
Portland OR 97212

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

Name of Employer Occupation
NA Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 24 / 2014

Transaction ID : C8747913

Amount of Each Receipt this Period
75.00

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

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

225.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 104
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Elisabeth T. Blizzard

Mailing Address 16815 SW Pleasant Valley Rd

City: Beaverton State: OR Zip Code: 97007

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

Name of Employer: Retired Occupation: N/A

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 225.00

Date of Receipt: 02 / 21 / 2014

Transaction ID : C8699276

Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial)
Elisabeth T. Blizzard

Mailing Address 16815 SW Pleasant Valley Rd

City: Beaverton State: OR Zip Code: 97007

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

Name of Employer: Retired Occupation: N/A

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 225.00

Date of Receipt: 03 / 04 / 2014

Transaction ID : C8704344

Amount of Each Receipt this Period: 125.00

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

Mailing Address P.O. Box 1150

City: Gaston State: OR Zip Code: 97119

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

Name of Employer: Self Occupation: Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 350.00

Date of Receipt: 02 / 13 / 2014

Transaction ID : C8685913

Amount of Each Receipt this Period: 100.00

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

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

275.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 104
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Caroline Boutard

Mailing Address P.O. Box 1150

City State Zip Code
Gaston OR 97119

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

Name of Employer Self Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 19 / 2014

Transaction ID : C8697655

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Sandra W. Bradley

Mailing Address 3590 SW Hillside Dr

City State Zip Code
Portland OR 97221

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

Name of Employer TriMet Occupation analyst

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
275.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 18 / 2014

Transaction ID : C8696557

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Kandis Brewer Nunn

Mailing Address 0841 SW Gaines Street, #606

City State Zip Code
Portland OR 97239

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

Name of Employer Strategic Resources LLC Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 23 / 2014

Transaction ID : C8699634

Amount of Each Receipt this Period
125.00

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

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

425.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 104
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Theresa Carr

Mailing Address 5922 SE Jennings Ave

City Portland State OR Zip Code 97267

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

Name of Employer CH2M HILL, Inc. Occupation Planner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 12 / 2014

Transaction ID : C8685793

Amount of Each Receipt this Period
150.00

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

Mailing Address 5922 SE Jennings Ave

City Portland State OR Zip Code 97267

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

Name of Employer CH2M HILL, Inc. Occupation Planner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 10 / 2014

Transaction ID : C8727423

Amount of Each Receipt this Period
125.00

C. Full Name (Last, First, Middle Initial)
John D. Carter

Mailing Address 17575 Little River Drive

City Bend State OR Zip Code 97707

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

Name of Employer NA Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 18 / 2014

Transaction ID : C8727407

Amount of Each Receipt this Period
2600.00

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

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

2875.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 104
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Joan Cirillo

Mailing Address 1910 SW Myrtle Street

City Portland State OR Zip Code 97201

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

Name of Employer Self-employed Occupation Journalist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 13 / 2014

Transaction ID : C8712418

Amount of Each Receipt this Period
1250.00

B. Full Name (Last, First, Middle Initial)
Confederated Tribes Of Grand Ronde

Mailing Address 9615 Grand Ronde Rd

City Grand Ronde State OR Zip Code 97347-9712

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 13 / 2014

Transaction ID : C8727399

Amount of Each Receipt this Period
1250.00

C. Full Name (Last, First, Middle Initial)
Confederated Tribes Of Grand Ronde

Mailing Address 9615 Grand Ronde Rd

City Grand Ronde State OR Zip Code 97347-9712

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : C8834467

Amount of Each Receipt this Period
100.00

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

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

2600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 104
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Confederated Tribes Of Grand Ronde

Mailing Address 9615 Grand Ronde Rd

City Grand Ronde State OR Zip Code 97347-9712

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : C8834466

Amount of Each Receipt this Period
900.00

B. Full Name (Last, First, Middle Initial)
Cheryl F. Coon

Mailing Address 2939 NW 53rd Drive

City Portland State OR Zip Code 97210

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

Name of Employer Occupation
Swanson Thomas Coon & Newton attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 13 / 2014

Transaction ID : C8685884

Amount of Each Receipt this Period
100.00

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

Mailing Address 1001 NW Lovejoy Street, PH 2

City Portland State OR Zip Code 97209

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

Name of Employer Occupation
Fortuna Group Business consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 10 / 2014

Transaction ID : C8727413

Amount of Each Receipt this Period
1250.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 104
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Katherine H. Cowan

Mailing Address 4707 Hastings Place

City Lake Oswego State OR Zip Code 97035

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

Name of Employer Eid Passport, Inc. Occupation General Counsel

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 02 / 2014

Transaction ID : C8703965

Amount of Each Receipt this Period
125.00

B. Full Name (Last, First, Middle Initial)
Lori L. Denham

Mailing Address 5714 MacArthur Blvd NW

City Washington State DC Zip Code 20016

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

Name of Employer Kountoupes Denham Occupation lobbyist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : C8747891

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Cara M. Denver

Mailing Address 710 S Street

City Vancouver State WA Zip Code 98661

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

Name of Employer NIMCO Occupation Investor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : C8747894

Amount of Each Receipt this Period
1600.00

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

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

2225.00

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

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

FOR LINE NUMBER: PAGE 12 OF 104
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Cara M. Denver

Mailing Address 710 S Street

City Vancouver State WA Zip Code 98661

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

Name of Employer NIMCO Occupation Investor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : C8894982

Amount of Each Receipt this Period
900.00

B. Full Name (Last, First, Middle Initial)
Jillian T. Detweiler

Mailing Address 4809 NE 41st Ave

City Portland State OR Zip Code 97211

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

Name of Employer TriMet Occupation Planner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 18 / 2014

Transaction ID : C8723574

Amount of Each Receipt this Period
125.00

C. Full Name (Last, First, Middle Initial)
Robert L. Dove

Mailing Address 3663 Lake Grove Ave.

City Portland State OR Zip Code 97035

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

Name of Employer Clear Channel Media + Entertainment Occupation Market President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 11 / 2014

Transaction ID : C8685667

Amount of Each Receipt this Period
100.00

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

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

1125.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 104
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Robert L. Dove

Mailing Address 3663 Lake Grove Ave.

City Portland State OR Zip Code 97035

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

Name of Employer Clear Channel Media + Entertainment Occupation Market President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 13 / 2014

Transaction ID : C8712401

Amount of Each Receipt this Period
125.00

B. Full Name (Last, First, Middle Initial)
Ann P. Edlen

Mailing Address 0841 SW Gaines St #2202

City Portland State OR Zip Code 97239

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

Name of Employer Think Joule Occupation Managing Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y
02 / 20 / 2014

Transaction ID : C8697921

Amount of Each Receipt this Period
1250.00

C. Full Name (Last, First, Middle Initial)
Brad G. Figel

Mailing Address 3114 51st Place NW

City Washington State DC Zip Code 20016

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

Name of Employer Mars Incorporated Occupation Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 05 / 2014

Transaction ID : C8704850

Amount of Each Receipt this Period
1000.00

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

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

2375.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 104
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Nancy Fishman

Mailing Address 725 NW 10th Ave.
No. 209

City Portland State OR Zip Code 97209

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

Name of Employer Zimmer Gunsul Frasca Architects LLP Occupation Director of Marketing

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
375.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 03 / 2014

Transaction ID : C8704075

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Phillip G. Fogg

Mailing Address 4560 SE International Way
Suite 100

City Milwaukie State OR Zip Code 97222

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

Name of Employer Marquis Companies Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 19 / 2014

Transaction ID : C8699571

Amount of Each Receipt this Period
1250.00

C. Full Name (Last, First, Middle Initial)
Janet A. Gillaspie

Mailing Address 2336 NE 23rd Ave.

City Portland State OR Zip Code 97212

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

Name of Employer Environmental Strategies, LLC Occupation Env. Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
525.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : C8747921

Amount of Each Receipt this Period
150.00

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

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

1650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 104
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Linda M. Girard

Mailing Address 3108 SE Claybourne

City Portland State OR Zip Code 97202

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

Name of Employer NA Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 13 / 2014

Transaction ID : C8727393

Amount of Each Receipt this Period
125.00

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

Mailing Address 4502 Lamont Way

City Lake Oswego State OR Zip Code 97035

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

Name of Employer Providence Health Plans Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
01 / 23 / 2014

Transaction ID : C8681238

Amount of Each Receipt this Period
500.00

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

Mailing Address 2523 NE 31st Avenue

City Portland State OR Zip Code 97212

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

Name of Employer Cycle Oregon Occupation Executive Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **625.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 10 / 2014

Transaction ID : C8707164

Amount of Each Receipt this Period
625.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 104
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

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

Mailing Address 4330 SW 48th Pl

City State Zip Code
Portland OR 97221

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

Name of Employer Occupation
Barran Liebman, LLP Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 31 / 2014

Transaction ID : C8678868

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Bobby L. Heagerty

Mailing Address 6836 SW Raleighwood Way

City State Zip Code
Portland OR 97225

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

Name of Employer Occupation
OHSU science educator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
938.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 23 / 2014

Transaction ID : C8681261

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Bobby L. Heagerty

Mailing Address 6836 SW Raleighwood Way

City State Zip Code
Portland OR 97225

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

Name of Employer Occupation
OHSU science educator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
938.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 03 / 2014

Transaction ID : C8679131

Amount of Each Receipt this Period
100.00

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 104
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Bobby L. Heagerty

Mailing Address 6836 SW Raleighwood Way

City Portland State OR Zip Code 97225

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

Name of Employer OHSU Occupation science educator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **938.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 24 / 2014

Transaction ID : C8747926

Amount of Each Receipt this Period
125.00

B. Full Name (Last, First, Middle Initial)
Jeff S. Heatherington

Mailing Address 6206 NE Cleveland

City Portland State OR Zip Code 97211

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

Name of Employer FamilyCare Inc. Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M / D D / Y Y Y Y
01 / 23 / 2014

Transaction ID : C8681237

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
Nancy E. Heim

Mailing Address 830 SW Broadway Dr Apt. 1

City Portland State OR Zip Code 97201

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

Name of Employer Nan Heim Associates Occupation Public Relations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
01 / 23 / 2014

Transaction ID : C8681262

Amount of Each Receipt this Period
250.00

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

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

2975.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 104
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Joshua Hinerfeld

Mailing Address 0600 SW Palatine Hill Rd

City State Zip Code
Portland OR 97219

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

Name of Employer Occupation
Organically Grown Company Organic Produce Distributor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 12 / 2014

Transaction ID : C8685869

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Maureen E. Hoatlin

Mailing Address 4432 SW Chesapeake Ave

City State Zip Code
portland OR 97239

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

Name of Employer Occupation
Oregon Health and Science University Scientist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 13 / 2014

Transaction ID : C8712468

Amount of Each Receipt this Period
125.00

C. Full Name (Last, First, Middle Initial)
Steven M. Hohf

Mailing Address 2033 SW Madison Street

City State Zip Code
Portland OR 97205

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

Name of Employer Occupation
Westside Internal Medicine Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 23 / 2014

Transaction ID : C8681236

Amount of Each Receipt this Period
250.00

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

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

875.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 104
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) Pamela F. Howard		Date of Receipt M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address 2124 SW Laurel Street		Transaction ID : C8727408
City Portland	State OR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer NA	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 225.00	

Full Name (Last, First, Middle Initial) Rachel Jacky		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 2060 SW 75th Ave		Transaction ID : C8747924
City Portland	State OR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Portland Emergency Services	Occupation Dir. of community relations	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) Daniel M. James		Date of Receipt M M / D D / Y Y Y Y 03 / 14 / 2014
Mailing Address 3460 N.E. 36th Avenue		Transaction ID : C8722656
City Portland	State OR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer PNGC Power	Occupation VP	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00	

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

**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 20 OF 104
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. Joanne Jene		Date of Receipt M M / D D / Y Y Y Y 01 / 23 / 2014
Mailing Address 2221 SW 1st Ave. Apt. 1921		Transaction ID : C8681235
City Portland	State OR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 375.00
Name of Employer NA	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 375.00	

Full Name (Last, First, Middle Initial) B. Elizabeth K. Johnson		Date of Receipt M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address PO Box R		Transaction ID : C8821223
City Scappoose	State OR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
Name of Employer State of Oregon	Occupation State Senator	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 225.00	

Full Name (Last, First, Middle Initial) C. Bill Johnstone		Date of Receipt M M / D D / Y Y Y Y 02 / 03 / 2014
Mailing Address 16727 SW Monterey Lane		Transaction ID : C8679754
City King City	State OR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Oregon Association of Broadcasters	Occupation President / CEO	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**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 21 OF 104
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Bill Johnstone

Mailing Address 16727 SW Monterey Lane

City State Zip Code
King City OR 97224

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

Name of Employer Occupation
Oregon Association of Broadcasters President / CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 05 / 2014

Transaction ID : C8704862

Amount of Each Receipt this Period
125.00

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

Mailing Address 1905 NW Northrup St

City State Zip Code
Portland OR 97209

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

Name of Employer Occupation
KLK Consulting Small Business Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 12 / 2014

Transaction ID : C8685874

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Karen L Karlsson

Mailing Address 1905 NW Northrup St

City State Zip Code
Portland OR 97209

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

Name of Employer Occupation
KLK Consulting Small Business Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 28 / 2014

Transaction ID : C8703893

Amount of Each Receipt this Period
250.00

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

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

475.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 104	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Charles Kilo

Mailing Address 2310 NE Regents Drive

City State Zip Code
Portland OR 97212

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

Name of Employer Occupation
OHSU Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 23 / 2014

Transaction ID : C8681244

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Douglas A. Koekkoek

Mailing Address 11929 SE Redhawks Lane

City State Zip Code
Happy Valley OR 97086

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

Name of Employer Occupation
Providence Health and Services Chief Medical Officer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 23 / 2014

Transaction ID : C8681240

Amount of Each Receipt this Period
250.00

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

Mailing Address 3726 SW Martins

City State Zip Code
Portland OR 97202

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

Name of Employer Occupation
Self Gallery Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 24 / 2014

Transaction ID : C8747907

Amount of Each Receipt this Period
250.00

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 104
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Claudia Leonard

Mailing Address 325 NW 86th Ave.

City Portland State OR Zip Code 97229

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

Name of Employer Providence St. Vincent Hospital Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 23 / 2014

Transaction ID : C8681242

Amount of Each Receipt this Period
 250.00

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

Mailing Address 822 Hwy 395 South, #423

City Hermiston State OR Zip Code 97838

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

Name of Employer Self - L&L Farms Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 31 / 2014

Transaction ID : C8678786

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 2525 NE Tillamook

City Portland State OR Zip Code 97212

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

Name of Employer Portland Housing Center Occupation Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : C8747899

Amount of Each Receipt this Period
 125.00

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

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

1375.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 104	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Bradley Malsin

Mailing Address 5000 SE 43rd Ave

City Portland State OR Zip Code 97206

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

Name of Employer Beam Development Occupation Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **850.00**

Date of Receipt
 M M / D D / Y Y Y Y
02 / 17 / 2014

Transaction ID : C8690429

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Dean C. Marriott

Mailing Address 3105 NE 32nd Street

City Portland State OR Zip Code 97212

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

Name of Employer City of Portland Occupation Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
 M M / D D / Y Y Y Y
02 / 24 / 2014

Transaction ID : C8700764

Amount of Each Receipt this Period
100.00

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

Mailing Address 4575 Browns Creek Rd

City The Dalles State OR Zip Code 97058

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

Name of Employer McClaskey Orchards Occupation Orchardist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 13 / 2014

Transaction ID : C8727387

Amount of Each Receipt this Period
250.00

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

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

450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 104
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Mary Louise McClintock

Mailing Address 2521 NE 24th Avenue

City Portland State OR Zip Code 97212

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

Name of Employer The Oregon Community Foundation Occupation Education Program Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **375.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 13 / 2014

Transaction ID : C8712222

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Linda Taylor McGeady

Mailing Address 2229 NE Thompson St

City Portland State OR Zip Code 97212

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

Name of Employer none Occupation philanthropist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 06 / 2014

Transaction ID : C8704985

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Katharine Leadbetter Mills

Mailing Address 4699 Leisure Drive

City Mt Hood Parkdale State OR Zip Code 97041

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 10 / 2014

Transaction ID : C8727420

Amount of Each Receipt this Period
125.00

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

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

625.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 104
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Peter A. Peyser Jr.

Mailing Address 250 W. 93rd Street
Apt. 15F

City State Zip Code
New York NY 10025

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

Name of Employer Occupation
Peyer Associates LLC Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : C8828053

Amount of Each Receipt this Period
1000.00

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

Mailing Address 730 Ridge Drive

City State Zip Code
McLean VA 22101

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

Name of Employer Occupation
Akin Gump Struass Hauer & Feld LLP Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1125.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 10 / 2014

Transaction ID : C8727411

Amount of Each Receipt this Period
625.00

C. Full Name (Last, First, Middle Initial)
Janis Sue Porter Kelly

Mailing Address 35393 Hwy 19

City State Zip Code
Kimberly OR 97848

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

Name of Employer Occupation
US Mediation and Arbitration Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : C8834465

Amount of Each Receipt this Period
1250.00

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

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

2875.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 104
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

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

Mailing Address 830 SE Sellwood Blvd

City Portland State OR Zip Code 97202

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

Name of Employer PSU Occupation Professor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 24 / 2014

Transaction ID : C8700812

Amount of Each Receipt this Period
 60.00

Amount of Each Receipt this Period
 1560.00

B. Full Name (Last, First, Middle Initial)
T. Austin Raglione

Mailing Address 1504 Montgomery Street

City Portland State OR Zip Code 97201

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

Name of Employer NA Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 13 / 2014

Transaction ID : C8712402

Amount of Each Receipt this Period
 125.00

Amount of Each Receipt this Period
 225.00

C. Full Name (Last, First, Middle Initial)
Laura J. Recko

Mailing Address 1422 SE Umatilla Street

City Portland State OR Zip Code 97202

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

Name of Employer REACH CDC Occupation Director of Resource Development

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 28 / 2014

Transaction ID : C8703102

Amount of Each Receipt this Period
 1250.00

Amount of Each Receipt this Period
 1250.00

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

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

1435.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 104
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Joseph E. Robertson

Mailing Address 3375 SW Terwilliger Blvd

City: Portland State: OR Zip Code: 97201

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

Name of Employer: OHSU Occupation: Ophthalmologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1250.00

Date of Receipt: 01 / 23 / 2014

Transaction ID : C8681233

Amount of Each Receipt this Period: 1250.00

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

Mailing Address 1743 N. Holman Street

City: Portland State: OR Zip Code: 97217

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

Name of Employer: All Hands Raised Occupation: Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 02 / 20 / 2014

Transaction ID : C8697920

Amount of Each Receipt this Period: 250.00

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

Mailing Address 445 SE 41st Ave

City: Portland State: OR Zip Code: 97214

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

Name of Employer: Skin by Marywynn Occupation: Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 03 / 07 / 2014

Transaction ID : C8706743

Amount of Each Receipt this Period: 250.00

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

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

1750.00

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

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

FOR LINE NUMBER: PAGE 29 OF 104
(check only one)
 11a 12
 11b 13a
 11c 13b
 11d 14
 15

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Zari Santner

Mailing Address 3016 NW Luray Terrace

City State Zip Code
Portland OR 97210

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

Name of Employer Occupation
NA Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 13 / 2014

Transaction ID : C8712408

Amount of Each Receipt this Period
125.00

B. Full Name (Last, First, Middle Initial)
Alexander D. Schafir

Mailing Address 2824 NE 25th Ave.

City State Zip Code
Portland OR 97212

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

Name of Employer Occupation
Providence Health Systems Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 23 / 2014

Transaction ID : C8681239

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Georgia A. Schell

Mailing Address 7335 SW Canyon Lane

City State Zip Code
Beaverton OR 97225

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

Name of Employer Occupation
N/A Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 04 / 2014

Transaction ID : C8680210

Amount of Each Receipt this Period
100.00

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

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

475.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 104
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Penny H. Serrurier

Mailing Address 837 NW Albemarle Ter

City Portland State OR Zip Code 97210

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

Name of Employer Stoel Rives Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 25 / 2014

Transaction ID : C8821221

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mary Megan Shipley

Mailing Address 645 NW Skyline

City Portland State OR Zip Code 97229

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

Name of Employer Kaiser Occupation Nurse-Midwife

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **375.00**

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 18 / 2014

Transaction ID : C8723586

Amount of Each Receipt this Period
125.00

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

Mailing Address 12152 SE Reginald Court

City Happy Valley State OR Zip Code 97086

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

Name of Employer Providence Medical Group Occupation Physician Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 23 / 2014

Transaction ID : C8681243

Amount of Each Receipt this Period
250.00

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

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

625.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 104
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Jenny R. Silberger

Mailing Address 10172 SW Washington Street

City Portland State OR Zip Code 97225

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

Name of Employer NW Permanente PC Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 23 / 2014

Transaction ID : C8681241

Amount of Each Receipt this Period
250.00

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

Mailing Address 602 NW Westover

City Portland State OR Zip Code 97210

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

Name of Employer OHSU Occupation Professor/Scientist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : C8747897

Amount of Each Receipt this Period
125.00

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

Mailing Address 3434 SE Brooklyn

City Portland State OR Zip Code 97202

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

Name of Employer Metro Occupation Metro Councilor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 23 / 2014

Transaction ID : C8699636

Amount of Each Receipt this Period
100.00

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

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

475.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 104
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Nancy J. Stueber

Mailing Address 15119 SE River Road

City Portland State OR Zip Code 97267

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

Name of Employer OMSI Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 23 / 2014

Transaction ID : C8699638

Amount of Each Receipt this Period
 100.00

B. Full Name (Last, First, Middle Initial)
Katherine A. Eastman Tell

Mailing Address 3311 NE Tillamook Street

City Portland State OR Zip Code 97212

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

Name of Employer Self Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 19 / 2014

Transaction ID : C8729239

Amount of Each Receipt this Period
 125.00

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

Mailing Address 3334 NE 25th Ave.

City Portland State OR Zip Code 97212

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

Name of Employer Meyer Memorial Trust Occupation Program Officer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 05 / 2014

Transaction ID : C8704894

Amount of Each Receipt this Period
 125.00

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

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

350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 104
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
John Thoren

Mailing Address 2106 SE 31st Ave.

City Portland State OR Zip Code 97214

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

Name of Employer Self Occupation Computer Network Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 31 / 2014

Transaction ID : C8678867

Amount of Each Receipt this Period
 300.00

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

Mailing Address 1001 NW Lovejoy Street
Unit 1301

City Portland State OR Zip Code 97209

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

Name of Employer Compli Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 06 / 2014

Transaction ID : C8653355

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 2420 Tunlaw Rd., NW

City Washington State DC Zip Code 20007

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

Name of Employer Advocacy Associates Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 11 / 2014

Transaction ID : C8707464

Amount of Each Receipt this Period
 1000.00

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

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

2300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 104
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Christine Vernier

Mailing Address 2351 NW Westover Rd #1301

City	State	Zip Code
Portland	OR	97210

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

Name of Employer	Occupation
Vernier Software & Technology	CFO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 08 / 2014

Transaction ID : C8684262

Amount of Each Receipt this Period
1250.00

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

Mailing Address 620 SW Caruthers St. #278

City	State	Zip Code
Portland	OR	97201

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

Name of Employer	Occupation
Retired	Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 06 / 2014

Transaction ID : C8705619

Amount of Each Receipt this Period
125.00

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

Mailing Address 2727 NW Westover Road

City	State	Zip Code
Portland	OR	97210

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

Name of Employer	Occupation
Self-employed	Community Service Volunteer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 18 / 2014

Transaction ID : C8699569

Amount of Each Receipt this Period
1250.00

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

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

2625.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 104
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Karen Williams

Mailing Address 12014 NE 245th ct

City State Zip Code
Brush Prairie WA 98606

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

Name of Employer Occupation
Carroll Community Investments LLC Community Developer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 12 / 2014

Transaction ID : C8685850

Amount of Each Receipt this Period
375.00

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

Mailing Address 173 NE Bridgeton Rd #2

City State Zip Code
Portland OR 97211

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

Name of Employer Occupation
State of Oregon Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 10 / 2014

Transaction ID : C8707258

Amount of Each Receipt this Period
125.00

C. Full Name (Last, First, Middle Initial)
George N. Dorshimer

Mailing Address 435 Vernon Road

City State Zip Code
Jenkintown PA 19046

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

Name of Employer Occupation
LTK Engineering Services Engineering Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 23 / 2014

Transaction ID : C8827723A

Amount of Each Receipt this Period
250.00

* Earmarked Contribution: See Below

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 104
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

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

Mailing Address P.O. Box 382110

City State Zip Code
Cambridge MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
261.01

Date of Receipt
M M / D D / Y Y Y Y
03 / 23 / 2014

Transaction ID : C8827723AB

Amount of Each Receipt this Period
250.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Ball Janik, LLP

Mailing Address 101 SW Main St
Suite 1100

City State Zip Code
Portland OR 97204

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3200.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 24 / 2014

Transaction ID : C8747932

Amount of Each Receipt this Period
600.00

PARTNERSHIP--partners below if itemized

C. Full Name (Last, First, Middle Initial)
Phillip E. Joseph

Mailing Address 101 SW Main Street
Ste 1100

City State Zip Code
Portland OR 97204

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

Name of Employer Occupation
Ball Janik LLP Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
413.23

Date of Receipt
M M / D D / Y Y Y Y
03 / 24 / 2014

Transaction ID : C8894887

Amount of Each Receipt this Period
76.65

[MEMO ITEM]
*

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 104
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
James T. McDermott

Mailing Address 101 SW Main Street
Ste 1100

City Portland State OR Zip Code 97204

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

Name of Employer Ball Janik LLP Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
329.55

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2014

Transaction ID : C8894891

Amount of Each Receipt this Period
61.87

[MEMO ITEM]
*

B. Full Name (Last, First, Middle Initial)
Bradley S. Miller

Mailing Address 101 SW Main Street
Ste 1100

City Portland State OR Zip Code 97204

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

Name of Employer Ball Janik LLP Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
304.37

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2014

Transaction ID : C8894892

Amount of Each Receipt this Period
57.88

[MEMO ITEM]
*

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

Mailing Address 101 SW Main Street
Ste 1100

City Portland State OR Zip Code 97204

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

Name of Employer Ball Janik LLP Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
413.23

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2014

Transaction ID : C8894899

Amount of Each Receipt this Period
76.64

[MEMO ITEM]
*

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

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

0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 104
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Ball Janik, LLP

Mailing Address 101 SW Main St
Suite 1100

City State Zip Code
Portland OR 97204

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3200.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 24 / 2014

Transaction ID : C8747933

Amount of Each Receipt this Period
600.00

PARTNERSHIP--partners below if itemized

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

Mailing Address 101 SW Main Street
Ste 1100

City State Zip Code
Portland OR 97204

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

Name of Employer Occupation
Ball Janik LLP Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
413.23

Date of Receipt
M M / D D / Y Y Y Y
03 / 24 / 2014

Transaction ID : C8894886

Amount of Each Receipt this Period
76.64

[MEMO ITEM]
*

C. Full Name (Last, First, Middle Initial)
James T. McDermott

Mailing Address 101 SW Main Street
Ste 1100

City State Zip Code
Portland OR 97204

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

Name of Employer Occupation
Ball Janik LLP Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
329.55

Date of Receipt
M M / D D / Y Y Y Y
03 / 24 / 2014

Transaction ID : C8894890

Amount of Each Receipt this Period
61.88

[MEMO ITEM]
*

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 104
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Bradley S. Miller

Mailing Address 101 SW Main Street
Ste 1100

City Portland State OR Zip Code 97204

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

Name of Employer Ball Janik LLP Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
304.37

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2014

Transaction ID : C8894893

Amount of Each Receipt this Period
57.89

[MEMO ITEM]
*

B. Full Name (Last, First, Middle Initial)
James C. Prichard

Mailing Address 101 SW Main Street
Ste 1100

City Portland State OR Zip Code 97204

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

Name of Employer Ball Janik LLP Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
413.23

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2014

Transaction ID : C8894898

Amount of Each Receipt this Period
76.65

[MEMO ITEM]
*

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

0.00

41510.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 104
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Academy of Nutrition and Dietetics PAC (ANDPAC)

Full Name (Last, First, Middle Initial)
Academy of Nutrition and Dietetics PAC (ANDPAC)

Mailing Address 1120 CONNECTICUT AVE. NW
SUITE 480

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C C00143560**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : C8834470

Amount of Each Receipt this Period
250.00

B. Accenture, Inc. PAC

Full Name (Last, First, Middle Initial)
Accenture, Inc. PAC

Mailing Address 800 Connecticut Avenue NW
Suite 600

City State Zip Code
Washington DC 20006

FEC ID number of contributing federal political committee. **C C00300707**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 10 / 2014

Transaction ID : C8653716

Amount of Each Receipt this Period
3000.00

C. AFSCME People

Full Name (Last, First, Middle Initial)
AFSCME People

Mailing Address 1625 L Street, NW

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C C00011114**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 29 / 2014

Transaction ID : C8827726

Amount of Each Receipt this Period
1000.00

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

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

4250.00

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

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

FOR LINE NUMBER: PAGE 41 OF 104
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Akin, Gump, Strauss, Hauer & Feld LLP Civic Action

Mailing Address 1333 New Hampshire Ave NW
Suite 400

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00104901**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 10 / 2014

Transaction ID : C8727455

Amount of Each Receipt this Period
 1875.00

B. Full Name (Last, First, Middle Initial)
American Academy of Neurology Professional Assoc. (BRAIN PAC)

Mailing Address 401 C ST NE

City WASHINGTON State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C C00435933**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 29 / 2014

Transaction ID : C8827728

Amount of Each Receipt this Period
 1250.00

C. Full Name (Last, First, Middle Initial)
American Apparel and Footwear Assoc. PAC

Mailing Address 1601 North Kent Street
Suite 1200

City Arlington State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C C00338442**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 10 / 2014

Transaction ID : C8727448

Amount of Each Receipt this Period
 1000.00

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

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

4125.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 104
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial)
AMERICAN ASSOCIATION OF NURSE ANESTHETISTS SEPARATE SEGREGATED FUND (CRNA-PAC)

A. Mailing Address 222 SOUTH PROSPECT AVE
C/O FINANCE DEPARTMENT

City State Zip Code
PARK RIDGE IL 60068

FEC ID number of contributing federal political committee. **C** C00173153

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 13 / 2014

Transaction ID : C8727381

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. American Chiropractic Association PAC

Mailing Address 1701 Clarendon Boulevard
2nd Floor

City State Zip Code
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00102764

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 26 / 2014

Transaction ID : C8681226

Amount of Each Receipt this Period
1250.00

Full Name (Last, First, Middle Initial)
C. American College of Physicians Services PAC

Mailing Address 25 Massachusetts Ave, NW
Suite 700

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00403881

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 23 / 2014

Transaction ID : C8681224

Amount of Each Receipt this Period
1500.00

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

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

3250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 104
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
American College of Physicians Services PAC

Mailing Address 25 Massachusetts Ave, NW
Suite 700

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00403881**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y
01 / 23 / 2014

Transaction ID : C8681225

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
American College of Radiology Assn. PAC

Mailing Address 1891 Preston White Drive

City Reston State VA Zip Code 20191

FEC ID number of contributing federal political committee. **C C00343459**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 10 / 2014

Transaction ID : C8727453

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
American Council of Life Insurers PAC

Mailing Address 101 Constitution Ave., NW
Suite 700

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00147066**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 10 / 2014

Transaction ID : C8727446

Amount of Each Receipt this Period
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 104
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
American Federation of Teachers, AFL-CIO COPE

Mailing Address 555 New Jersey Avenue NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00028860**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 29 / 2014

Transaction ID : C8827729

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
American Hospital Association PAC

Mailing Address 325 Seventh Street, NW

City Washington State DC Zip Code 20004-2802

FEC ID number of contributing federal political committee. **C C00106146**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3250.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 23 / 2014

Transaction ID : C8681227

Amount of Each Receipt this Period
1250.00

C. Full Name (Last, First, Middle Initial)
American Nurses Association PAC

Mailing Address 8515 Georgia Ave Suite 400

City Silver Spring State MD Zip Code 20910-3403

FEC ID number of contributing federal political committee. **C C00017525**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 10 / 2014

Transaction ID : C8727444

Amount of Each Receipt this Period
1250.00

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

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

7500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 104
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial)
AMERICAN OSTEOPATHIC INFORMATION ASSOCIATION - OSTEOPATHIC POLITICAL ACTION COMMITTEE

A. Mailing Address 1090 VERMONT AVE., NW
SUITE 500
City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00113803

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date 1000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 29 / 2014

Transaction ID : C8827733

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
AMERICAN PSYCHOLOGICAL ASSOCIATION PRACTICE ORGANIZATION POLITICAL ACTION COMMITTEE (APAPO)

B. Mailing Address PO BOX 65353
City WASHINGTON State DC Zip Code 20035

FEC ID number of contributing federal political committee. **C** C00522094

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date 1000.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 28 / 2014

Transaction ID : C8727432

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
American Society of Anesthesiologists PAC

C. Mailing Address 520 N. Northwest Highway
City Park Ridge State IL Zip Code 60068

FEC ID number of contributing federal political committee. **C** C00255752

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date 2000.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 30 / 2014

Transaction ID : C8681222

Amount of Each Receipt this Period
1000.00

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

3000.00

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

**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 46 OF 104
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
American Society of Association Executives APAC

Mailing Address 1575 I Street NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00041566

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 29 / 2014

Transaction ID : C8827730

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Applied Materials, Inc. PAC

Mailing Address 20 Park Road Suite E

City Burlingame State CA Zip Code 94010

FEC ID number of contributing federal political committee. **C** C00406892

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 25 / 2014

Transaction ID : C8821228

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Association for Advanced Life Underwriting PAC

Mailing Address 11921 FREEDOM DRIVE SUITE 1100

City RESTON State VA Zip Code 20190

FEC ID number of contributing federal political committee. **C** C00447565

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7000.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 19 / 2014

Transaction ID : C8699570

Amount of Each Receipt this Period
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 104
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) Bechtel PAC		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2014
Mailing Address PO Box 193965		Transaction ID : C8727450
City San Francisco	State Zip Code CA 94119	
FEC ID number of contributing federal political committee. C C00103697		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) Boeing PAC		Date of Receipt M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 1200 Wilson Blvd		Transaction ID : C8727433
City Arlington	State Zip Code VA 22209	
FEC ID number of contributing federal political committee. C C00142711		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00	

Full Name (Last, First, Middle Initial) Boeing PAC		Date of Receipt M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 1200 Wilson Blvd		Transaction ID : C8727434
City Arlington	State Zip Code VA 22209	
FEC ID number of contributing federal political committee. C C00142711		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00	

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 48 OF 104
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial)
CITIGROUP INC. POLITICAL ACTION COMMITTEE - FEDERAL (CITIGROUP PAC-FEDERAL)

Mailing Address 1101 PENNSYLVANIA AVENUE NW #1000

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C C00008474**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : **C8835412**

Amount of Each Receipt this Period
 1000.00

Full Name (Last, First, Middle Initial)
Comcast Corp. Political Action Committee

Mailing Address 1701 JFK Blvd, 49th Floor
35th Floor

City State Zip Code
Philadelphia PA 19103

FEC ID number of contributing federal political committee. **C C00248716**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 29 / 2014

Transaction ID : **C8827727**

Amount of Each Receipt this Period
 1000.00

Full Name (Last, First, Middle Initial)
Credit Union Legislative Action Council (CULAC)

Mailing Address 601 Pennsylvania Ave NW
South Bldg Suite 600

City State Zip Code
Washington DC 20004

FEC ID number of contributing federal political committee. **C C00007880**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2014

Transaction ID : **C8747935**

Amount of Each Receipt this Period
 2500.00

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

4500.00

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

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

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

FOR LINE NUMBER: PAGE 49 OF 104
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Electrical Contractors PAC

Mailing Address 3 Bethesda Metro Center
Suite 1100

City State Zip Code
Bethesda MD 20814

FEC ID number of contributing federal political committee. **C** C00113811

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 24 / 2014

Transaction ID : C8747936

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Electrical Contractors PAC

Mailing Address 3 Bethesda Metro Center
Suite 1100

City State Zip Code
Bethesda MD 20814

FEC ID number of contributing federal political committee. **C** C00113811

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 24 / 2014

Transaction ID : C8747937

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
General Electric Co. PAC

Mailing Address 1299 Pennsylvania Ave NW
Suite 900W

City State Zip Code
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 10 / 2014

Transaction ID : C8727454

Amount of Each Receipt this Period
1000.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 104
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Honeywell Int'l PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 101 Constitution Avenue NW
 Suite 500 West
 City Washington State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C C00096156**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2014
Transaction ID : C8727437
 Amount of Each Receipt this Period
 1000.00
 4000.00

B. Intel Corporation PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1155 F STREET N.W. #1025
 City WASHINGTON State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C C00125641**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 10 / 2014
Transaction ID : C8727451
 Amount of Each Receipt this Period
 1250.00
 7500.00

C. Intel Corporation PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1155 F STREET N.W. #1025
 City WASHINGTON State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C C00125641**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 10 / 2014
Transaction ID : C8727452
 Amount of Each Receipt this Period
 1250.00
 7500.00

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 104
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Intel Corporation PAC

Mailing Address 1155 F STREET N.W. #1025

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00125641**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : C8836326

Amount of Each Receipt this Period
1250.00

B. Full Name (Last, First, Middle Initial)
International Brotherhood of Electrical Workers COPE

Mailing Address 900 Seventh St. N.W.

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00027342**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 10 / 2014

Transaction ID : C8727447

Amount of Each Receipt this Period
4750.00

C. Full Name (Last, First, Middle Initial)
International Paper PAC

Mailing Address 1101 Pennsylvania Avenue NW Suite 200

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00034405**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 28 / 2014

Transaction ID : C8727431

Amount of Each Receipt this Period
1000.00

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 104
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) K&L Gates PAC		Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address 1601 K Street, NW		Transaction ID : C8727383
City Washington	State DC	
FEC ID number of contributing federal political committee. C C00213173		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) Kroger PAC		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2014
Mailing Address 1014 Vine Street		Transaction ID : C8727445
City Cincinnati	State OH	
FEC ID number of contributing federal political committee. C C00059238		Amount of Each Receipt this Period 1250.00
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1250.00	

Full Name (Last, First, Middle Initial) Laborers' International Union of North America PAC (LIUNA PAC)		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2014
Mailing Address 905 16TH ST., N.W. SECOND FLOOR		Transaction ID : C8727443
City WASHINGTON	State DC	
FEC ID number of contributing federal political committee. C C00007922		Amount of Each Receipt this Period 3000.00
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00	

SUBTOTAL of Receipts This Page (optional).....	5250.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 53 OF 104
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address 1301 CONCORD TERRACE

City State Zip Code
SUNRISE FL 33323

FEC ID number of contributing federal political committee. **C C00469205**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
03 / 18 / 2014

Transaction ID : C8727436

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
Morgan Stanley PAC

Mailing Address 1585 Broadway
39th Floor

City State Zip Code
New York NY 10036

FEC ID number of contributing federal political committee. **C C00337626**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : C8834471

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Nat'l Emergency Medicine PAC (NEMPAC)

Mailing Address 1125 Executive Circle

City State Zip Code
Irving TX 75038

FEC ID number of contributing federal political committee. **C C00140061**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : C8834469

Amount of Each Receipt this Period
1000.00

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

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

7000.00

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

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

FOR LINE NUMBER: PAGE 54 OF 104
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

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

Mailing Address 1325 Massachusetts Ave. NW

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 24 / 2014

Transaction ID : C8700814

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE

Mailing Address 430 NORTH MICHIGAN AVENUE

City CHICAGO State IL Zip Code 60611

FEC ID number of contributing federal political committee. **C C00030718**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 24 / 2014

Transaction ID : C8700817

Amount of Each Receipt this Period
3000.00

C. Full Name (Last, First, Middle Initial)
NATIONAL CONFECTIONERS ASSOCIATION OF THE UNITED STATES, INC. POLITICAL ACTION COMMITTEE (CANDY PAC)

Mailing Address 1101 30TH STREET NW, SUITE 200

City WASHINGTON State DC Zip Code 20007

FEC ID number of contributing federal political committee. **C C00003855**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 10 / 2014

Transaction ID : C8727449

Amount of Each Receipt this Period
1000.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 104
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. National Stone Sand & Gravel Assn. ROCKPAC

Full Name (Last, First, Middle Initial)
Mailing Address 1605 King Street

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C C00089458**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 18 / 2014

Transaction ID : C8727435

Amount of Each Receipt this Period
1000.00

B. Novo Nordisk Inc. PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1155 F Street NW Suite 1150

City Washington State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : C8828466

Amount of Each Receipt this Period
1000.00

C. PAC of the American Assoc. of Orthopaedic Surgeons (AAOS)

Full Name (Last, First, Middle Initial)
Mailing Address 317 Massachusetts Avenue, NE

City Washington State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C C00343137**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
9650.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 29 / 2014

Transaction ID : C8827732

Amount of Each Receipt this Period
4650.00

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

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

6650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 104
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
Portland General Electric Co. Bi-Partisan PAC

Mailing Address 121 SW Salmon
1WTC 03

City Portland State OR Zip Code 97204

FEC ID number of contributing federal political committee. **C C00381020**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 23 / 2014

Transaction ID : C8681223

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Portland General Electric Co. Bi-Partisan PAC

Mailing Address 121 SW Salmon
1WTC 03

City Portland State OR Zip Code 97204

FEC ID number of contributing federal political committee. **C C00381020**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : C8747934

Amount of Each Receipt this Period
1250.00

C. Full Name (Last, First, Middle Initial)
PRUDENTIAL FINANCIAL INC. FEDERAL POLITICAL ACTION COMMITTEE (AKA - PRUDENTIAL FEDERAL PAC)

Mailing Address 751 BROAD STREET
14TH FLOOR

City NEWARK State NJ Zip Code 07102

FEC ID number of contributing federal political committee. **C C00127779**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 20 / 2014

Transaction ID : C8699572

Amount of Each Receipt this Period
1000.00

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

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

3250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 104
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
The American Congress Of OB-GYNS PAC (OB-GYN PAC)

Mailing Address 409 12th Street, SW

City Washington State DC Zip Code 20024

FEC ID number of contributing federal political committee. **C C00364158**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 18 / 2014

Transaction ID : C8727440

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
TOYOTA MOTOR NORTH AMERICA INC PAC AKA TOYOTA/LEXUS PAC

Mailing Address 601 THIRTEENTH STREET NW
STE 910 S

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00542365**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 13 / 2014

Transaction ID : C8727382

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
UAW-V-CAP (UAW Voluntary Community Act'n Program)

Mailing Address 8000 East Jefferson

City Detroit State MI Zip Code 48214

FEC ID number of contributing federal political committee. **C C00002840**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 29 / 2014

Transaction ID : C8827731

Amount of Each Receipt this Period
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 104
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

A. Full Name (Last, First, Middle Initial)
United Food & Commercial Workers ABC

Mailing Address 1775 K Street, NW
7th Floor

City Washington State DC Zip Code 20006-1598

FEC ID number of contributing federal political committee. **C C00002766**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 18 / 2014

Transaction ID : C8727438

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
United Transportation Union PAC

Mailing Address 24950 Country Club Blvd., Suite 3

City North Olmsted State OH Zip Code 44070

FEC ID number of contributing federal political committee. **C C00001636**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 18 / 2014

Transaction ID : C8727439

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
WAL-MART Stores, Inc. PAC for Responsible Government

Mailing Address 702 S.W. 8th Street

City Bentonville State AR Zip Code 72716

FEC ID number of contributing federal political committee. **C C00093054**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 18 / 2014

Transaction ID : C8727441

Amount of Each Receipt this Period
1000.00

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

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

8500.00

88275.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 104
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. KeyBank of Oregon		Date of Receipt M M / D D / Y Y Y Y 01 / 31 / 2014	
Mailing Address 444 SW 5th Ave		Transaction ID : C8686969	
City Portland	State OR	Zip Code 97204-2206	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 17.84	
Name of Employer	Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 370.23		
		Interest	

Full Name (Last, First, Middle Initial) B. KeyBank of Oregon		Date of Receipt M M / D D / Y Y Y Y 01 / 31 / 2014	
Mailing Address 444 SW 5th Ave		Transaction ID : C8686970	
City Portland	State OR	Zip Code 97204-2206	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 0.76	
Name of Employer	Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 370.23		
		Interest	

Full Name (Last, First, Middle Initial) C. KeyBank of Oregon		Date of Receipt M M / D D / Y Y Y Y 02 / 28 / 2014	
Mailing Address 444 SW 5th Ave		Transaction ID : C8727398	
City Portland	State OR	Zip Code 97204-2206	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 16.12	
Name of Employer	Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 370.23		
		Interest	

SUBTOTAL of Receipts This Page (optional).....	34.72
TOTAL This Period (last page this line number only).....	[Empty Box]

**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 60 OF 104
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. KeyBank of Oregon		Date of Receipt M M / D D / Y Y Y Y 02 / 28 / 2014	
Mailing Address 444 SW 5th Ave		Transaction ID : C8727456	
City Portland	State OR	Zip Code 97204-2206	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period _____ 0.69	
Name of Employer Occupation		Interest	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 370.23	

Full Name (Last, First, Middle Initial) B. KeyBank of Oregon		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 444 SW 5th Ave		Transaction ID : C8834463	
City Portland	State OR	Zip Code 97204-2206	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period _____ 0.76	
Name of Employer Occupation		Interest	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 370.23	

Full Name (Last, First, Middle Initial) C. KeyBank of Oregon		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 444 SW 5th Ave		Transaction ID : C8834464	
City Portland	State OR	Zip Code 97204-2206	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period _____ 17.84	
Name of Employer Occupation		Interest	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 370.23	

SUBTOTAL of Receipts This Page (optional).....	_____ 19.29
TOTAL This Period (last page this line number only).....	_____ 54.01

**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 61 OF 104			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. Ace Parking		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address 700 NE Multnomah		Amount of Each Disbursement this Period 240.00 Transaction ID : D445533
City Portland	State OR	
Zip Code 97232	Purpose of Disbursement Parking	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Ace Parking		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2014
Mailing Address 700 NE Multnomah		Amount of Each Disbursement this Period 192.00 Transaction ID : D446298
City Portland	State OR	
Zip Code 97232	Purpose of Disbursement Parking	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Ace Parking		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address 700 NE Multnomah		Amount of Each Disbursement this Period 192.00 Transaction ID : D449530
City Portland	State OR	
Zip Code 97232	Purpose of Disbursement Parking	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	624.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 104			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2014
Mailing Address 14 Arrow Street		Amount of Each Disbursement this Period 9.88
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Credit Card Processing Fee	Transaction ID : D450403
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 14 Arrow Street		Amount of Each Disbursement this Period 0.07
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Credit Card Processing Fee	Transaction ID : D451118
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2014
Mailing Address 14 Arrow Street		Amount of Each Disbursement this Period 0.07
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Credit Card Processing Fee	Transaction ID : D449520
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	10.02
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 104			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2014
Mailing Address 14 Arrow Street		Amount of Each Disbursement this Period 0.31 Transaction ID : D445638
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ADP Easypay		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 4099 SE International Way Ste 203		Amount of Each Disbursement this Period 4085.25 Transaction ID : D445532
City Milwaukie	State OR	
Zip Code 97222-8853	Purpose of Disbursement Payroll Taxes	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. ADP Easypay		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address 4099 SE International Way Ste 203		Amount of Each Disbursement this Period 40.00 Transaction ID : D445732
City Milwaukie	State OR	
Zip Code 97222-8853	Purpose of Disbursement Payroll Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4125.56
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 104			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. ADP Easy pay		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 4099 SE International Way Ste 203		Amount of Each Disbursement this Period 6.00
City Milwaukie	State OR	
Zip Code 97222-8853	Purpose of Disbursement Payroll Services	Transaction ID : D445821
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ADP Easy pay		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2014
Mailing Address 4099 SE International Way Ste 203		Amount of Each Disbursement this Period 253.15
City Milwaukie	State OR	
Zip Code 97222-8853	Purpose of Disbursement Payroll Taxes	Transaction ID : D445536
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. ADP Easy pay		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 4099 SE International Way Ste 203		Amount of Each Disbursement this Period 4705.90
City Milwaukie	State OR	
Zip Code 97222-8853	Purpose of Disbursement Payroll Taxes	Transaction ID : D449503
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4965.05
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 104			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

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

Mailing Address 4099 SE International Way
Ste 203

City Milwaukie State OR Zip Code 97222-8853

Purpose of Disbursement Payroll Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 01 / 21 / 2014

Amount of Each Disbursement this Period: 38.00

Transaction ID : D445823

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

Mailing Address 4099 SE International Way
Ste 203

City Milwaukie State OR Zip Code 97222-8853

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 01 / 31 / 2014

Amount of Each Disbursement this Period: 33.71

Transaction ID : D445826

Full Name (Last, First, Middle Initial)
c. ADP Easypay

Mailing Address 4099 SE International Way
Ste 203

City Milwaukie State OR Zip Code 97222-8853

Purpose of Disbursement Payroll Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 21 / 2014

Amount of Each Disbursement this Period: 7.00

Transaction ID : D450768

SUBTOTAL of Disbursements This Page (optional) 78.71

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 104			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

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

Mailing Address 4099 SE International Way
Ste 203

City Milwaukie State OR Zip Code 97222-8853

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 28 / 2014

Amount of Each Disbursement this Period: 62.06

Transaction ID : D450770

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

Mailing Address 4099 SE International Way
Ste 203

City Milwaukie State OR Zip Code 97222-8853

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 31 / 2014

Amount of Each Disbursement this Period: 4748.66

Transaction ID : D450392

Full Name (Last, First, Middle Initial)
c. ADP Easy pay

Mailing Address 4099 SE International Way
Ste 203

City Milwaukie State OR Zip Code 97222-8853

Purpose of Disbursement Payroll Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 07 / 2014

Amount of Each Disbursement this Period: 141.75

Transaction ID : D449555

SUBTOTAL of Disbursements This Page (optional) 4952.47

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 104			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. ADP Easypay		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2014
Mailing Address 4099 SE International Way Ste 203		Amount of Each Disbursement this Period 92.76
City Milwaukie State OR Zip Code 97222-8853	Purpose of Disbursement Payroll Taxes	
Candidate Name	Category/Type	Transaction ID : D449556
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ADP Easypay		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2014
Mailing Address 4099 SE International Way Ste 203		Amount of Each Disbursement this Period 6.00
City Milwaukie State OR Zip Code 97222-8853	Purpose of Disbursement Payroll Services	
Candidate Name	Category/Type	Transaction ID : D449557
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. ADP Easypay		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2014
Mailing Address 4099 SE International Way Ste 203		Amount of Each Disbursement this Period 141.75
City Milwaukie State OR Zip Code 97222-8853	Purpose of Disbursement Payroll Services	
Candidate Name	Category/Type	Transaction ID : D449558
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional)	240.51
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 68 OF 104	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. American Express Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2014
Mailing Address P.O. Box 2878		Amount of Each Disbursement this Period 0.74 Transaction ID : D449559
City Omaha	State NE	
Zip Code 68103-2878	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. American Express Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address P.O. Box 2878		Amount of Each Disbursement this Period 7.95 Transaction ID : D449560
City Omaha	State NE	
Zip Code 68103-2878	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. American Express Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2014
Mailing Address P.O. Box 2878		Amount of Each Disbursement this Period 30.98 Transaction ID : D449561
City Omaha	State NE	
Zip Code 68103-2878	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	39.67
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 69 OF 104	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. American Express Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address P.O. Box 2878		Amount of Each Disbursement this Period 7.95
City Omaha State NE Zip Code 68103-2878	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : D450769
State: District:		

Full Name (Last, First, Middle Initial) B. American Express Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2014
Mailing Address P.O. Box 2878		Amount of Each Disbursement this Period 7.95
City Omaha State NE Zip Code 68103-2878	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : D445824
State: District:		

Full Name (Last, First, Middle Initial) C. Anzalone Liszt Grove Research		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2014
Mailing Address 260 Commerce Street - 4th Floor		Amount of Each Disbursement this Period 38100.00
City Montgomery State AL Zip Code 36104	Purpose of Disbursement Research	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : D449531
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	38115.90
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 104			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. Augusta Bowden		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address 2135 NE Jamie Drive		Amount of Each Disbursement this Period 180.00 Transaction ID : D449529
City Hillsboro State OR Zip Code 97124	Purpose of Disbursement Graphic Design	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Augusta Bowden		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2014
Mailing Address 2135 NE Jamie Drive		Amount of Each Disbursement this Period 150.00 Transaction ID : D445539
City Hillsboro State OR Zip Code 97124	Purpose of Disbursement Graphic Design	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Comcast		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address 900 Michigan Ave., NE		Amount of Each Disbursement this Period 83.95 Transaction ID : D445822
City Washington State DC Zip Code 20017	Purpose of Disbursement Telephone	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	413.95
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 104			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. Kim Countryman		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 3026 Watercrest Rd		Amount of Each Disbursement this Period 830.68 Transaction ID : D445526
City Forest Grove	State OR	
Zip Code 97116	Purpose of Disbursement Payroll	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Kim Countryman		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 3026 Watercrest Rd		Amount of Each Disbursement this Period 1940.71 Transaction ID : D449504
City Forest Grove	State OR	
Zip Code 97116	Purpose of Disbursement Payroll	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Kim Countryman		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 3026 Watercrest Rd		Amount of Each Disbursement this Period 1940.71 Transaction ID : D450393
City Forest Grove	State OR	
Zip Code 97116	Purpose of Disbursement Payroll	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4712.10
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 104			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. Integra Telecom		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address PO Box 3034		Amount of Each Disbursement this Period 300.87 Transaction ID : D446297
City Portland	State OR	
Zip Code 97208-3034	Purpose of Disbursement Telephone	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Integra Telecom		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2014
Mailing Address PO Box 3034		Amount of Each Disbursement this Period 291.19 Transaction ID : D441286
City Portland	State OR	
Zip Code 97208-3034	Purpose of Disbursement Telecommunications	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Integra Telecom		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2014
Mailing Address PO Box 3034		Amount of Each Disbursement this Period 285.02 Transaction ID : D445656
City Portland	State OR	
Zip Code 97208-3034	Purpose of Disbursement Telephone	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	877.08
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 104			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. Liberty Mutual Northwest		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2014
Mailing Address P.O. Box 6486		Amount of Each Disbursement this Period 32,000.00 Transaction ID : D449522
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement Insurance	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Morel, Ink		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2014
Mailing Address PO Box 4625		Amount of Each Disbursement this Period 2933.21 Transaction ID : D449525
City Portland	State OR	
Zip Code 97208-4625	Purpose of Disbursement Printing and Postage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Morel, Ink		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address PO Box 4625		Amount of Each Disbursement this Period 75.00 Transaction ID : D449992
City Portland	State OR	
Zip Code 97208-4625	Purpose of Disbursement Printing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3028.21
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 104			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. NGP Software, Inc.		Date of Disbursement MM / DD / YYYY 02 / 24 / 2014
Mailing Address 1101 Vermont Ave NW Ste 710		Amount of Each Disbursement this Period 35.00 Transaction ID : D446320
City Washington State DC Zip Code 20005-3521	Purpose of Disbursement Web and Internet Services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. NGP Software, Inc.		Date of Disbursement MM / DD / YYYY 02 / 28 / 2014
Mailing Address 1101 Vermont Ave NW Ste 710		Amount of Each Disbursement this Period 1985.00 Transaction ID : D449521
City Washington State DC Zip Code 20005-3521	Purpose of Disbursement Database Software	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Oregon Assembly For Black Affairs		Date of Disbursement MM / DD / YYYY 03 / 29 / 2014
Mailing Address PO Box 12485 Attn: Hank Miggins		Amount of Each Disbursement this Period 350.00 Transaction ID : D450405
City Salem State OR Zip Code 97309	Purpose of Disbursement Advertising	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2370.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 75 OF 104	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. Oregon Square		Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2014
Mailing Address P.O. Box 843534		Amount of Each Disbursement this Period 1015.15 Transaction ID : D450404
City Los Angeles	State CA	
Zip Code 90084	Purpose of Disbursement Office Rent	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Oregon Square		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2014
Mailing Address P.O. Box 843534		Amount of Each Disbursement this Period 1015.15 Transaction ID : D449523
City Los Angeles	State CA	
Zip Code 90084	Purpose of Disbursement Office Rent	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Oregon Square		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2014
Mailing Address P.O. Box 843534		Amount of Each Disbursement this Period 10.00 Transaction ID : D449524
City Los Angeles	State CA	
Zip Code 90084	Purpose of Disbursement Key	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2040.30
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 104			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. Oregon Square		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2014
Mailing Address P.O. Box 843534		Amount of Each Disbursement this Period 538.44 Transaction ID : D445545
City Los Angeles	State CA	
Zip Code 90084	Purpose of Disbursement Office Rent	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Oregon Square		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2014
Mailing Address P.O. Box 843534		Amount of Each Disbursement this Period 985.57 Transaction ID : D442003
City Los Angeles	State CA	
Zip Code 90084	Purpose of Disbursement Office Rent	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Peter Corvallis Productions		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2014
Mailing Address 2204 North Clark Ave.		Amount of Each Disbursement this Period 3.75 Transaction ID : D442000
City Portland	State OR	
Zip Code 97227	Purpose of Disbursement Event Rentals	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1527.76
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 104			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. Planned Parenthood Of The Columbia/Willamette		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2014
Mailing Address P.O. Box 12267		Amount of Each Disbursement this Period 1000.00 Transaction ID : D445817
City Portland	State OR	
Zip Code 97212	Purpose of Disbursement Event Tickets	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Arran Robertson		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 3548 NE 6th Ave		Amount of Each Disbursement this Period 399.28 Transaction ID : D445527
City Portland	State OR	
Zip Code 97212	Purpose of Disbursement Payroll	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Arran Robertson		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 3548 NE 6th Ave		Amount of Each Disbursement this Period 399.28 Transaction ID : D449505
City Portland	State OR	
Zip Code 97212	Purpose of Disbursement Payroll	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1798.56
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 104			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. Arran Robertson		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 3548 NE 6th Ave		Amount of Each Disbursement this Period 399.28 Transaction ID : D450394
City Portland	State OR	
Zip Code 97212	Purpose of Disbursement Payroll	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. William D. Smith		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 206 NE 29th Ave		Amount of Each Disbursement this Period 1821.00 Transaction ID : D450395
City Portland	State OR	
Zip Code 97232-3204	Purpose of Disbursement Payroll	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. William D. Smith		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 206 NE 29th Ave		Amount of Each Disbursement this Period 1821.00 Transaction ID : D449506
City Portland	State OR	
Zip Code 97232-3204	Purpose of Disbursement Payroll	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4041.28
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 104			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. William D. Smith		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 206 NE 29th Ave		Amount of Each Disbursement this Period 1821.00 Transaction ID : D445528
City Portland	State OR	
Zip Code 97232-3204	Purpose of Disbursement Payroll	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. SunTrust Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address PO Box 6600		Amount of Each Disbursement this Period 66.90 Transaction ID : D445540
City Hagerstown	State MD	
Zip Code 21741-6600	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. SunTrust Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address PO Box 6600		Amount of Each Disbursement this Period 147.44 Transaction ID : D445541
City Hagerstown	State MD	
Zip Code 21741-6600	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2035.34
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 104			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. SunTrust Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2014
Mailing Address PO Box 6600		Amount of Each Disbursement this Period 21.20
City Hagerstown	State MD	
Zip Code 21741-6600	Purpose of Disbursement Credit Card Processing Fee	Transaction ID : D445818
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. SunTrust Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2014
Mailing Address PO Box 6600		Amount of Each Disbursement this Period 2.50
City Hagerstown	State MD	
Zip Code 21741-6600	Purpose of Disbursement Credit Card Processing Fee	Transaction ID : D445819
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. SunTrust Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2014
Mailing Address PO Box 6600		Amount of Each Disbursement this Period 39.24
City Hagerstown	State MD	
Zip Code 21741-6600	Purpose of Disbursement Credit Card Processing Fee	Transaction ID : D445820
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	62.94
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 104			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. SunTrust Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2014
Mailing Address PO Box 6600		Amount of Each Disbursement this Period 49.30 Transaction ID : D449510
City Hagerstown	State MD	
Zip Code 21741-6600	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. SunTrust Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2014
Mailing Address PO Box 6600		Amount of Each Disbursement this Period 36.02 Transaction ID : D449511
City Hagerstown	State MD	
Zip Code 21741-6600	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. SunTrust Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2014
Mailing Address PO Box 6600		Amount of Each Disbursement this Period 506.49 Transaction ID : D449512
City Hagerstown	State MD	
Zip Code 21741-6600	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	591.81
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 104			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. SunTrust Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address PO Box 6600		Amount of Each Disbursement this Period 16.66 Transaction ID : D445825
City Hagerstown	State MD	
Zip Code 21741-6600	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Katherine A. Eastman Tell		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 3311 NE Tillamook Street		Amount of Each Disbursement this Period 831.91 Transaction ID : D445907
City Portland	State OR	
Zip Code 97212	Purpose of Disbursement Payroll	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Katherine A. Eastman Tell		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 3311 NE Tillamook Street		Amount of Each Disbursement this Period 692.90 Transaction ID : D445529
City Portland	State OR	
Zip Code 97212	Purpose of Disbursement Payroll	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1541.47
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 104			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. Katherine A. Eastman Tell		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 3311 NE Tillamook Street		Amount of Each Disbursement this Period 940.18 Transaction ID : D450396
City Portland	State OR	
Zip Code 97212	Purpose of Disbursement Payroll	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. The Benson Hotel		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2014
Mailing Address 309 SW Broadway		Amount of Each Disbursement this Period 4812.00 Transaction ID : D445542
City Portland	State OR	
Zip Code 97205	Purpose of Disbursement Catering and Room Rental	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. the Nines		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2014
Mailing Address 525 SW Morrison Street		Amount of Each Disbursement this Period 4000.00 Transaction ID : D445657
City Portland	State OR	
Zip Code 97204	Purpose of Disbursement Catering and Room Rental	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	9752.18
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 104			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. the Nines		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 525 SW Morrison Street		Amount of Each Disbursement this Period 5300.00 Transaction ID : D449516
City Portland	State OR	
Purpose of Disbursement Catering and Room Rental		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. U-Store Self Storage East		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2014
Mailing Address 1130 NE 28th Ave.		Amount of Each Disbursement this Period 75.00 Transaction ID : D449553
City Portland	State OR	
Purpose of Disbursement Storage		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. U-Store Self Storage East		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2014
Mailing Address 1130 NE 28th Ave.		Amount of Each Disbursement this Period 75.00 Transaction ID : D449554
City Portland	State OR	
Purpose of Disbursement Storage		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional)	5450.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 104			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. U-Store Self Storage East		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2014
Mailing Address 1130 NE 28th Ave.		Amount of Each Disbursement this Period 75.00 Transaction ID : D445534
City Portland	State OR	
Zip Code 97232	Purpose of Disbursement Storage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2014
Mailing Address 815 NE Schuyler Street		Amount of Each Disbursement this Period 12.56 Transaction ID : D449513
City Portland	State OR	
Zip Code 97212	Purpose of Disbursement Postage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. UPS		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address 316 Pennsylvania Ave., SE Suite 300		Amount of Each Disbursement this Period 200.00 Transaction ID : D446299
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Room Rental	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	287.56
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 104			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2014
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period 243.87 Transaction ID : D446392
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Telephone	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2014
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period 241.86 Transaction ID : D445535
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Telephone	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2014
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period 241.71 Transaction ID : D441278
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Telephone	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	727.44
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 104		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. Corine Weiler		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 1022 G Street NE		Amount of Each Disbursement this Period 879.25 Transaction ID : D445530
City Washington State DC Zip Code 20002	Purpose of Disbursement Payroll 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)	

Full Name (Last, First, Middle Initial) B. Corine Weiler		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 1022 G Street NE		Amount of Each Disbursement this Period 879.25 Transaction ID : D445508
City Washington State DC Zip Code 20002	Purpose of Disbursement Payroll 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)	

Full Name (Last, First, Middle Initial) c. Corine Weiler		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 1022 G Street NE		Amount of Each Disbursement this Period 879.25 Transaction ID : D450397
City Washington State DC Zip Code 20002	Purpose of Disbursement Payroll 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)	

SUBTOTAL of Disbursements This Page (optional).....	2637.75
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 104		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. Whitney Wyatt Burns		Date of Disbursement MM / DD / YYYY 02 / 24 / 2014
Mailing Address P.O. Box 1174		Amount of Each Disbursement this Period 1375.00 Transaction ID : D446319
City Springfield	State VA	
Zip Code 22151	Purpose of Disbursement FEC Compliance	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Elizabeth Wilson		Date of Disbursement MM / DD / YYYY 02 / 28 / 2014
Mailing Address 1536 SE 31st Ave.		Amount of Each Disbursement this Period 4804.50 Transaction ID : D449509
City Portland	State OR	
Zip Code 97214	Purpose of Disbursement Payroll	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Elizabeth Wilson		Date of Disbursement MM / DD / YYYY 01 / 31 / 2014
Mailing Address 1536 SE 31st Ave.		Amount of Each Disbursement this Period 4804.50 Transaction ID : D445531
City Portland	State OR	
Zip Code 97214	Purpose of Disbursement Payroll	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	10984.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 104			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. Elizabeth Wilson		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 1536 SE 31st Ave.		Amount of Each Disbursement this Period 4804.50 Transaction ID : D450398
City Portland	State OR	
Zip Code 97214	Purpose of Disbursement Payroll	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Katherine A. Eastman Tell		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2014
Mailing Address 3311 NE Tillamook Street		Amount of Each Disbursement this Period 151.98 Transaction ID : D442002
City Portland	State OR	
Zip Code 97212	Purpose of Disbursement Telephone	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. AT&T Wireless Services		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2014
Mailing Address PO Box 8229		Amount of Each Disbursement this Period 151.98 Transaction ID : D452965 [MEMO ITEM]
City Aurora	State IL	
Zip Code 60572-8229	Purpose of Disbursement Telephone	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4956.48
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 104			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. Bank Of America (Visa)		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2014
Mailing Address PO Box 15796		Amount of Each Disbursement this Period 2206.76
City Wilmington	State DE	
Zip Code 19886	Purpose of Disbursement Credit Card Payment	Transaction ID : D443061
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. AT&T Wireless Services		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2014
Mailing Address PO Box 8229		Amount of Each Disbursement this Period 75.85
City Aurora	State IL	
Zip Code 60572-8229	Purpose of Disbursement Telephone	Transaction ID : D445643
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Bank Of America (Visa)		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2014
Mailing Address PO Box 15796		Amount of Each Disbursement this Period 35.00
City Wilmington	State DE	
Zip Code 19886	Purpose of Disbursement Annual Membership Fee	Transaction ID : D445642
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2206.76
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 104			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. FedEx Office		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2014
Mailing Address 1605 NE 7th Ave		Amount of Each Disbursement this Period 127.98
City Portland	State OR	
Zip Code 97232	Purpose of Disbursement Office Supplies	Transaction ID : D445649
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Great Wine Buys		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2014
Mailing Address 1515 NE Broadway St		Amount of Each Disbursement this Period 998.00
City Portland	State OR	
Zip Code 97232	Purpose of Disbursement Refreshments	Transaction ID : D445652
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. Postal Annex		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2014
Mailing Address 1631 NE Broadway		Amount of Each Disbursement this Period 5.85
City Portland	State OR	
Zip Code 97232	Purpose of Disbursement Shipping	Transaction ID : D445650
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 92 OF 104	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2014
Mailing Address 815 NE Schuyler Street		Amount of Each Disbursement this Period 355.80
City Portland	State OR	
Zip Code 97212	Purpose of Disbursement Shipping	Transaction ID : D445651
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2014
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period 238.53
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Telephone	Transaction ID : D445644
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. Elizabeth Wilson		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2014
Mailing Address 1536 SE 31st Ave.		Amount of Each Disbursement this Period 275.00
City Portland	State OR	
Zip Code 97214	Purpose of Disbursement Health Insurance, Telephone	Transaction ID : D445543
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	275.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 104			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2014
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period 60.00
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Telephone	Transaction ID : D445544
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Bank Of America (Visa)		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address PO Box 15796		Amount of Each Disbursement this Period 5577.46
City Wilmington	State DE	
Zip Code 19886	Purpose of Disbursement Credit Card Payment	Transaction ID : D446393
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Alaska Airlines		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address P.O. Box 24948		Amount of Each Disbursement this Period 380.00
City Seattle	State WA	
Zip Code 98124-0948	Purpose of Disbursement Travel	Transaction ID : D446403
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5577.46
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 104			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. Art Design Portland (ADX)		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 425 SE 11th Ave.		Amount of Each Disbursement this Period 472.50
City Portland	State OR	
Zip Code 97214	Purpose of Disbursement Room Rental	Transaction ID : D446410 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. AT&T Wireless Services		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address PO Box 8229		Amount of Each Disbursement this Period 76.05
City Aurora	State IL	
Zip Code 60572-8229	Purpose of Disbursement Telephone	Transaction ID : D446396 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Bank Of America (Visa)		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address PO Box 15796		Amount of Each Disbursement this Period 70.00
City Wilmington	State DE	
Zip Code 19886	Purpose of Disbursement Annual Membership Fee	Transaction ID : D446395 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

**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 95 OF 104			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. City Club Of Portland		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 317 SW Alder St Ste 1050		Amount of Each Disbursement this Period 365.00
City Portland	State OR	Zip Code 97204
Purpose of Disbursement Event Tickets	Category/ Type	
Candidate Name	Transaction ID : D446407	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) B. Facebook		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 156 University Ave.		Amount of Each Disbursement this Period 329.20
City Palo Alto	State CA	Zip Code 94301
Purpose of Disbursement Advertising	Category/ Type	
Candidate Name	Transaction ID : D446405	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) c. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 323 SE M L King Blvd		Amount of Each Disbursement this Period 238.88
City Portland	State OR	Zip Code 97214
Purpose of Disbursement Office Supplies	Category/ Type	
Candidate Name	Transaction ID : D446402	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM]	

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 104			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial)
A. Oregon Liquor Store

Mailing Address 1621 NE 9th Ave

City Portland State OR Zip Code 97232

Purpose of Disbursement Refreshments

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 24 / 2014

Amount of Each Disbursement this Period: 28.95

Transaction ID : D446400

[MEMO ITEM]

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

Mailing Address 1631 NE Broadway

City Portland State OR Zip Code 97232

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 24 / 2014

Amount of Each Disbursement this Period: 55.00

Transaction ID : D446401

[MEMO ITEM]

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

Mailing Address P.O. Box 6611

City Portland State OR Zip Code 97228

Purpose of Disbursement Parade Entry Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 24 / 2014

Amount of Each Disbursement this Period: 250.00

Transaction ID : D446406

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) 0.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 104			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. the Nines		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 525 SW Morrison Street		Amount of Each Disbursement this Period 3000.00
City Portland	State OR	
Zip Code 97204	Purpose of Disbursement Catering and Room Rental	Transaction ID : D446404 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period 233.78
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Parking	Transaction ID : D446398 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Elizabeth Wilson		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 1536 SE 31st Ave.		Amount of Each Disbursement this Period 275.00
City Portland	State OR	
Zip Code 97214	Purpose of Disbursement Health Insurance, Telephone	Transaction ID : D449514
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	275.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 104			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period 60.00
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Telephone	Transaction ID : D449515
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Bank Of America (Visa)		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address PO Box 15796		Amount of Each Disbursement this Period 2798.56
City Wilmington	State DE	
Zip Code 19886	Purpose of Disbursement Credit Card Payment	Transaction ID : D450391
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. AT&T Wireless Services		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address PO Box 8229		Amount of Each Disbursement this Period 76.05
City Aurora	State IL	
Zip Code 60572-8229	Purpose of Disbursement Telephone	Transaction ID : D450414
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2798.56
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 104			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. Facebook		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address 156 University Ave.		Amount of Each Disbursement this Period 170.80
City Palo Alto	State CA	
Zip Code 94301	Purpose of Disbursement Advertising	Transaction ID : D450423
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. FedEx Office		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address 1605 NE 7th Ave		Amount of Each Disbursement this Period 335.64
City Portland	State OR	
Zip Code 97232	Purpose of Disbursement Printing and Reproduction	Transaction ID : D450417
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. Firehook Bakery		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address 215 Pennsylvania Ave., SE		Amount of Each Disbursement this Period 404.80
City Washington	State DC	
Zip Code 20004	Purpose of Disbursement Catering	Transaction ID : D450430
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 104			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. Fred Meyer Stores		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address PO Box 42121		Amount of Each Disbursement this Period 228.62
City Portland	State OR	
Zip Code 97242	Purpose of Disbursement Catering	Transaction ID : D450425 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Fred Meyer Stores		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address PO Box 42121		Amount of Each Disbursement this Period 49.27
City Portland	State OR	
Zip Code 97242	Purpose of Disbursement Food and Beverage	Transaction ID : D450426 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Fred Meyer Stores		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address PO Box 42121		Amount of Each Disbursement this Period 79.36
City Portland	State OR	
Zip Code 97242	Purpose of Disbursement Food and Beverage	Transaction ID : D450416 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

**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 102 OF 104			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. The Portland MAC Store			Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address 700 NE Multnomah			Amount of Each Disbursement this Period 29.95
City Portland	State OR	Zip Code 97232	
Purpose of Disbursement Computer Hardware		Category/ Type	Transaction ID : D450418 [MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. United States Postal Service			Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address 815 NE Schuyler Street			Amount of Each Disbursement this Period 188.75
City Portland	State OR	Zip Code 97212	
Purpose of Disbursement Postage		Category/ Type	Transaction ID : D450420 [MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) C. Verizon Wireless			Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address P.O. Box 660108			Amount of Each Disbursement this Period 233.70
City Dallas	State TX	Zip Code 75266	
Purpose of Disbursement Telephone		Category/ Type	Transaction ID : D450415 [MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 104			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Blumenauer for Congress

Full Name (Last, First, Middle Initial) A. Elizabeth Wilson		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 1536 SE 31st Ave.		Amount of Each Disbursement this Period 290.00 Transaction ID : D450399
City Portland	State OR	
Zip Code 97214	Purpose of Disbursement Health Insurance, Telephone, Food and Beverage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period 60.00 Transaction ID : D450401 [MEMO ITEM]
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Telephone	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Earl Blumenauer		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 830 NE Holladay, #105		Amount of Each Disbursement this Period 98.10 Transaction ID : D450406
City Portland	State OR	
Zip Code 97232	Purpose of Disbursement Food and Beverage, Photocopies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	388.10
TOTAL This Period (last page this line number only).....	124508.98