Image# 12972444686 PAGE 1 / 26

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

					Office Use Only
1. NAME OF COMMITTEE (in full)	YPE OR PRINT ▼	Example: If typover the lines.	ping, type	12FE4M5	
Right to Life/Oregon PA	С				1
ADDRESS (number and street)	4335 River Road N				
Check if different					
than previously reported. (ACC)	Salem			OR	97303
2. FEC IDENTIFICATION NUM	IBER ▼	CITY	;	STATE A	ZIP CODE ▲
C C00141572	3.	IS THIS REPORT	NEW (N) OR	× AN (A)	IENDED
4. TYPE OF REPORT (Choose One)	Report	Feb 20 (M2)	May 20 (M5)	Aug	20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:		Mar 20 (M3)	Jun 20 (M6)	-	20 (M9) Dec 20 (M12) (Non-Election Year Only)
April 15		pr 20 (M4)	Jul 20 (M7)	Oct	20 (M10) Jan 31 (YE)
Quarterly Report (Q1) X July 15 Quarterly Report (Q2)	(C) 12-Day	Primary (12	2P)	General	(12G) Runoff (12R)
October 15	Report for the	Convention	(12C)	Special (12S)
Quarterly Report (Q3) January 31 Year-End Report (YE)		ction on	/ D D /	Y Y Y Y Y	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election		DG)	Runoff (3	Special (30S)
Termination Report (TER)	Report for the:	ction on	/ D D /	Y = Y = Y = Y	in the State of
5. Covering Period 04	01 2012	through	M M	30	2012
I certify that I have examined this	-	of my knowledge and	belief it is tru	e, correct and	d complete.
Type or Print Name of Treasurer	Mrs. Gayle Atteberry				
Signature of Treasurer Mrs. Ga	yle Atteberry	[Electronica	lly Filed]	Date 09	/ 25 / Y Y Y Y Y Y Y Z 2012
NOTE: Submission of false, erroneou	us, or incomplete informa	tion may subject the pe	erson signing th	nis Report to the	ne penalties of 2 U.S.C. §437g.
Office Use Only					FEC FORM 3X Rev. 12/2004

FEC Form 3X (Rev. 02/2003)	SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS	Page 2
Write or Type Committee Name		
Right to Life/Oregon PAC		
Report Covering the Period: From:	4 01 2012 T	To: 06 30 2012
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2012		282879.64
(b) Cash on Hand at Beginning of Reporting Period	222682.15	
(c) Total Receipts (from Line 19)	0.00	2095.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	222682.15	284974.64
7. Total Disbursements (from Line 31)	33944.02	96236.51
3. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	188738.13	188738.13
Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
X This committee has qualified as a multical	andidate committee. (see FEC FORM 1M)	

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Right to Life/Oregon PAC

		COLUMN B
I. Receipts	I. Receipts COLUMN A Total This Period	
Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	0.00	200.00
(i) Itemized (use Schedule A)	0.00	200.00
		4005.00
(ii) Unitemized	, 0.00	1895.00
(iii) TOTAL (add	0.00	2095.00
Lines 11(a)(i) and (ii)▶	0.00	2033.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		7
(such as PACs)	0.00	0.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)	0.00	2095.00
. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
		
. All Loans Received	0.00	0.00
_		
. Loan Repayments Received	0.00	0.00
. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
. Refunds of Contributions Made	, , , , , , , , , , , , , , , , , , , ,	
to Federal Candidates and Other		
Political Committees	0.00	0.00
Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	0.00
Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account	0.00	0.00
(from Schedule H3)	0.00	0.00
	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	0.00	2095.00
, . ,		
. Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	0.00	2095.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
۱.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		outonaur rour to buto		
	(i) Federal Share	0.00	0.00		
		0.00	0.00		
	(ii) Non-Federal Share	0.00	0.00		
	(b) Other Federal Operating Expenditures	33235.17	85226.32		
	(c) Total Operating Expenditures				
	(add 21(a)(i), (a)(ii), and (b))▶	33235.17	85226.32		
	Transfers to Affiliated/Other Party	0.00	0.00		
	Contributions to	0.00	0.00		
	Federal Candidates/Committees and Other Political Committees	0.00	0.00		
	Independent Expenditures	708.85	11010.19		
	(use Schedule E)	7			
	(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00		
	Loan Repayments Made	0.00	0.00		
	Loans MadeRefunds of Contributions To:	0.00	0.00		
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00		
	That I dilical committees				
	(b) Political Party Committees	0.00	0.00		
	(c) Other Political Committees	0.00	0.00		
	(such as PACs)	0.00	0.00		
	(d) Total Contribution Refunds				
	(add Lines 28(a), (b), and (c))▶	0.00	0.00		
	Other Disbursements	0.00	0.00		
	Federal Election Activity (2 U.S.C. §431(20))				
	(a) Allocated Federal Election Activity (from Schedule H6)				
	(i) Federal Share	0.00	0.00		
	.,				
	(ii) "Levin" Share	0.00	0.00		
	(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00		
	(c) Total Federal Election Activity (add				
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00		
	Total Disbursements (add Lines 21(c), 22,				
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	33944.02	96236.51		
	(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	33944.02	96236.51		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	2095.00
I. Total Contribution Refunds (from Line 28(d))	0.00	0.00
6. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	2095.00
. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	33235.17	85226.32
Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
. Net Operating Expenditures (subtract Line 37 from Line 36)	33235.17	85226.32

PAGE 6 OF 2
23 24 25 28c 29
purpose of soliciting contributions tributions from such committee.
indutions from such committee.
Disharanana
Disbursement
17 2012
action ID : SB21B.9189
of Each Disbursement this Period
75.00
70.00
Disbursement
08 2012
action ID : SB21B.9175
of Each Disbursement this Period
936.30
Disbursement
13 2012
action ID : SB21B.9175.0
of Each Disbursement this Period 936.30
ITEM]

1mage# 12972444692 PAGE 7 / 26

: 97 'A = G7 9 @ G B9 C I G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: SB21B Transaction ID: SB21B.9189

reimburse lois anderson for use of cell phone/monthly steipend

Form/Schedule: Transaction ID:

SC	HEDULE B (FEC Form 3X)			FOR LINE NUMBER:				PAGE	8	OF	26	
ITE	MIZED DISBURSEMENTS		te schedule(s) tegory of the	(check or	nly one)	_	1 _					_
			mmary Page	X 21b	22 28a		23 28b		24 28c	25 29		26 30b
An۱	/ information copied from such Reports and Stater	I ments mav not	be sold or us								utions	
	for commercial purposes, other than using the nan											
\ \	NAME OF COMMITTEE (In Full)											
/	Right to Life/Oregon PAC											
	Full Name (Last, First, Middle Initial)											
Α.	Bank of America				Date	of Dis	sburse	ment				
i	Mailing Address PO Box 15026				06	_	04			2012	Y	
(City	State 2	Zip Code		Tues	4	ID	· CD				
	Wilmington	DE	19850-5026		Irai	isacti	ion iD	: 584	21B.91	83		
	Purpose of Disbursement internet			004	Amou	nt of	Each	Disbu	ırseme	nt this	Perio	od
Ī	Candidate Name			Category/		_	-	_				\neg
-	0/6 0			Type	_	-	7	-	7	1	9.98	
(Office Sought: House Disburser Senate	ment For: Primary	General									
	President	Other (specify										
;	State: District:	(-)	· •									
	Full Name (Last, First, Middle Initial)											
В.	Shawn Carney				Date	of Dis	sburse	ment				
					M	_	D			Y Y	- Y	
ı	Mailing Address 8 Rodeo Court				04		2	1	-	2012	-	
(City	State 2	Zip Code		Trai	nsact	ion ID	· SB:	21B.91	67		
	Fredericksburg	VA	22407			13401		. 00	-10.51	01		
,	Purpose of Disbursement conference speaker fee			001	Amou	nt of	Each	Disbu	ırseme	nt this	Perio	od
(Candidate Name			Category/								
				Type			7		7	240	00.00	
(ment For:										
	Senate President	Primary	General									
(State: District:	Other (specify	() \									
	Full Name (Last, First, Middle Initial)											
C.	Comcast				Date	of Dis	sburse	ment				
	Mailian Address 2005 CMAN: 1				M	_	2	_		Y ■ Y	Y	
	Mailing Address 9605 SW Nimbus Ave				05		2	1		2012	-	
(City		Zip Code		Trai	neact	ion ID	· SR	21B.91	77		
	Beaverton	OR !	97008-7198			ISact	טוו ווטו	. 302	210.31	• •		
	Purpose of Disbursement telephone			001	A			D'-l-			Dest	
ī	Candidate Name				Amou	nt of	∟acn	DISDL	ırseme	nt this	Perio	oa
				Category/ Type			A		W	8	37.07	
Ō		ment For:										
	Senate	Primary	General									
	President State: District:	Other (specify	() ▼									
`	State. District.											_
SI	JBTOTAL of Disbursements This Page (optional)			k						250	7.05	
<u> </u>					- 1	÷		÷	,	\Rightarrow		=
тс	OTAL This Period (last page this line number only))					m -		(B) -			

S ľ

S	CHEDULE B (FEC Form 3X) FOR		FOR LINE NUMBER: PAGE 9 OF 26					OF 26	
IT	EMIZED DISBURSEMENTS	Use separate sched for each category of		(check only	one)				
		Detailed Summary		X 21b	22 28a	23 28b	24 28c	25	26 30b
_									
	ny information copied from such Reports and Statem for commercial purposes, other than using the name								
\setminus	NAME OF COMMITTEE (In Full)								
	Right to Life/Oregon PAC								
_	Full Name (Last, First, Middle Initial)								
Α.	Common Ground				Date of	Disburse		YYYY	V
	Mailing Address PO Box 8170				05	14		2012	
	•	State Zip Code	Э		Trans	action ID	. CD24D	0176	
		OR 97303			ITAIIS	action ib	. 36216	.9170	
	Purpose of Disbursement enewsletter		I	004	Amount	of Each	Disburse	ment this	Period
	Candidate Name		Π.	Category/ Type				34	15.00
	Office Sought: House Disbursen	nent For:		туре		7	,		
			neral						
	President	Other (specify)							
	State: District:								
_	Full Name (Last, First, Middle Initial)								
В.	Gateway Communications, Inc				Date of	Disburse	ment		
	Mailing Address 16805 NE Mason Court				06	/ D 1		2012	Y
	,	State Zip Code OR 97230	Э		Trans	action ID	: SB21B	.9186	
	Purpose of Disbursement printing			001	Amount	of Each	Disburse	ment this	Period
	Candidate Name								
				Category/ Type				23	39.00
	Office Sought: House Disbursen	nent For:							
		,	neral						
		Other (specify) ▼							
_	State: District:								
C.	Full Name (Last, First, Middle Initial) Oregon Right to Life				Date of	Disburse	ment		
•	Oregon Right to Life				M M	/ D		Y Y Y	Y
	Mailing Address 4335 River Road N				04	02		2012	
		State Zip Code	Э		Trans	action ID	: SB21B	.9164	
	Purpose of Disbursement	OR 97303							
	supplies			001	Amount	of Each	Disburse	ment this	Period
	Candidate Name			Category/ Type				16	6.66
	Office Sought: House Disbursen	nent For:		76.			,		
		,	neral						
	President	Other (specify) ▼							
_	State: District:								
8	SUBTOTAL of Disbursements This Page (optional)			······		-,-		75	0.66
Т	OTAL This Period (last page this line number only)			·····					

SCHEDULE B (FEC Form 3X)	Llea caparate ashadula/a\	FOR LINE N		PAGE 10 OF 2
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 23 28a 28b	24 25 2 28c 29 3
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full) Right to Life/Oregon PAC	e and address of any politica	Committee to	SOURTE CONTRIBUTIONS IFC	in such commutee.
Full Name (Last, First, Middle Initial)				
^{A.} Oregon Right to Life			Date of Disburseme	nt
Mailing Address 4335 River Road N			04 30	2012
,	tate Zip Code		Transaction ID : S	B21B.9171
Salem Purpose of Disbursement	OR 97303		Transaction 12 To	22.2.0
salary		001	Amount of Each Dis	bursement this Period
Candidate Name		Category/		12114.00
000		Туре	7	12114.00
	nent For: Primary			
State: District:				
Full Name (Last, First, Middle Initial)			5	
B. Ms Lois Anderson			Date of Disburseme	
Mailing Address 1220 Jays Dr N			04 30	2012
,	State Zip Code OR 97303		Transaction ID : S	B21B.9171.0
Purpose of Disbursement	OK 9/303			
salary		001	Amount of Each Dis	bursement this Period
Candidate Name		Category/ Type		2845.48
	nent For: Primary General Other (specify)		[MEMO ITEM]	
Full Name (Last, First, Middle Initial) C. Ms Mary Groff			Date of Disburseme	
Mailing Address 4576 Janice Ave NE			04 / 30	2012
Salem	State Zip Code OR 97305		Transaction ID : S	B21B.9171.1
Purpose of Disbursement salary		001		
Candidate Name		001 Category/ Type		bursement this Period 2467.81
	nent For: Primary General Other (specify)	Туро	[MEMO ITEM]	
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only).				12114.00

SCHEDULE B (FEC Form 3X)		FOR LINE	NE NUMBER: PAGE 11 OF 26				
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only	NOMBER:				
TILMILLO DIODONOLIVILINIO	for each category of the Detailed Summary Page	`X 21b	22 23 24 25 26				
	Dotailed Guillinary Fage	27	28a 28b 28c 29 30b				
Any information copied from such Reports and State							
or for commercial purposes, other than using the na	me and address of any politication	al committee to	solicit contributions from such committee.				
NAME OF COMMITTEE (In Full)							
Right to Life/Oregon PAC							
Full Name (Last, First, Middle Initial)							
A. Chelsey A. Taylor			Date of Disbursement				
			M M / D D / Y Y Y Y				
Mailing Address 5011 Elizabeth St N			04 30 2012				
City	State Zip Code						
Keizer	OR 97303		Transaction ID : SB21B.9171.2				
Purpose of Disbursement							
salary		001	Amount of Each Disbursement this Period				
Candidate Name		Category/	2039.31				
Office Sought: House Disburse	ment For:	Type	7				
Senate	Primary General		[MEMO ITEM]				
President	Other (specify)						
State: District:	1						
Full Name (Last, First, Middle Initial)							
B. Ms Theresa Vandecoevering			Date of Disbursement				
Mailing Address 2007 1 2007			M M / D D / Y Y Y Y				
Mailing Address 2160 Trade St SE			04 30 2012				
City	State Zip Code		Transaction ID : SB21B.9171.3				
Salem	OR 97301		Transaction ID : SB21B.9171.3				
Purpose of Disbursement salary		001	Amount of Fook Dickursoment this Deviced				
Candidate Name		001	Amount of Each Disbursement this Period				
		Category/ Type	1333.72				
Office Sought: House Disburse	ment For:	. , , , ,	[MEMO ITEM]				
Senate	Primary General		[
President	Other (specify) ▼						
State: District:							
Full Name (Last, First, Middle Initial) C. Mr. Colm Willis			Date of Disbursement				
o. IVII. COIIII VVIIIIS			M M / D D / Y Y Y Y				
Mailing Address 619 SW Arboretum Circle			04 30 2012				
City Portland	State Zip Code OR 97221		Transaction ID : SB21B.9171.4				
Purpose of Disbursement	572Z1						
salary		001	Amount of Each Disbursement this Period				
Candidate Name		Category/	2427.69				
		Type	3427.68				
	ment For:		[MEMO ITEM]				
Senate President	Primary General Other (specify) ▼						
State: District:	Caron (opoonly)						
SUBTOTAL of Disbursements This Page (optional).			0.00				
		<u> </u>					
TOTAL This Period (last page this line number only	')						

SCHEDULE B (FEC Form 3X)	Hoo concrete established	\ I	FOR LINE NUMBER: PAC		
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the Detailed Summary Page	(check only X 21b 27	one) 22 23 28a 28b	24 25 26 28c 29 30	
Any information copied from such Reports and Statem		sed by any perso	on for the purpose of	soliciting contributions	
or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) Right to Life/Oregon PAC	e and address of any polit	ical committee to	SOICIT CONTIDUTIONS	from such committee.	
Full Name (Last, First, Middle Initial)					
A. Oregon Right to Life			Date of Disbursen		
Mailing Address 4335 River Road N			06 04		
•	State Zip Code		Transaction ID :	SR21R 9181	
Salem Purpose of Disbursement	OR 97303		Transaction ib .	05215.3101	
supplies		001	Amount of Each D	Disbursement this Period	
Candidate Name		Category/		166.66	
000		Type	7	100.00	
	nent For: Primary General Other (specify) ▼				
State: District:					
Full Name (Last, First, Middle Initial) B. Oregon Right to Life			Date of Disbursen	nent	
			M = M / D = D		
Mailing Address 4335 River Road N			06 30	2012	
,	State Zip Code		Transaction ID :	SB21B.9188	
Salem Purpose of Disbursement	OR 97303				
salary		001	Amount of Each D	Disbursement this Period	
Candidate Name		Category/ Type	7	12898.37	
	nent For: Primary General Other (specify)				
Full Name (Last, First, Middle Initial) C. Ms Lois Anderson			Date of Disbursen		
Mailing Address 1220 Jays Dr N			06 30		
Keizer	State Zip Code OR 97303		Transaction ID :	SB21B.9188.0	
Purpose of Disbursement salary		204			
Candidate Name		Category/	Amount of Each D	Disbursement this Period 2845.35	
	nent For: Primary General Other (specify)	Туре	[MEMO ITEM]		
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only).				13065.03	

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	\ I	FOR LINE NUMBER:		
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only X 21b 27	one) 22 23 28a 28		
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam					
NAME OF COMMITTEE (In Full) Right to Life/Oregon PAC	io and address of any polli	cai committee to	SOHOL COLILIDATIO	one nom such confinitee.	
Full Name (Last, First, Middle Initial)			D		
Ms Jane Groff			Date of Disbu	rsement	
Mailing Address 6399 Crampton Dr N			06	30 2012	
,	State Zip Code		Transaction	ID : SB21B.9188.1	
Keizer Purpose of Disbursement	OR 97303				
salary		001	Amount of Ea	ch Disbursement this Period	
Candidate Name		Category/		2464.63	
Office Sought: House Disbursem	nent For:	Туре			
Senate	Primary General Other (specify) ▼		[MEMO ITEM]		
State: District:					
Full Name (Last, First, Middle Initial)			Dota of Dist	roomont	
Mrs. Mary C. Parsons			Date of Disbu		
Mailing Address 1675 Ewald Ave SE			06	30 / 2012	
,	State Zip Code OR 97302		Transaction	ID : SB21B.9188.2	
Purpose of Disbursement salary		001	Amount of Fa	ch Disbursement this Period	
Candidate Name		Category/ Type		1448.63	
	nent For: Primary General Other (specify)		[MEMO ITEM]	I	
Full Name (Last, First, Middle Initial) Mark Toffler			Date of Disbu	rsement	
Mailing Address 1010 Sw Cheltenham st			06	30 / 2012	
portland	State Zip Code OK 97289		Transaction	ID : SB21B.9188.3	
Purpose of Disbursement salary		001			
Candidate Name		Category/ Type		ch Disbursement this Period 348.29	
	nent For: Primary General Other (specify)	975	[MEMO ITEM]		
State: District: SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only).		<u> </u>	,	0.00	

SCHEDULE B (FEC Form 3X)				PAGE 14 OF 2
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	one) 22 28a	23 24 25 28b 28c 29
Any information copied from such Reports and Statem		sed by any perso	on for the purp	pose of soliciting contributions
or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) Right to Life/Oregon PAC	ie and address of any politi	cai committee to	SOUCH CONTIDI	unons iioin such committee.
Full Name (Last, First, Middle Initial)				
4. Ms Theresa Vandecoevering			Date of Dis	
Mailing Address 2160 Trade St SE			06 /	30 / 2012
,	State Zip Code		Transaction	on ID : SB21B.9188.4
Salem Purpose of Disbursement	OR 97301			
salary		001	Amount of I	Each Disbursement this Period
Candidate Name		Category/		1299.42
Office Squaht:	aont For	Type		, , , , , , , , , , , , , , , , , , , ,
	nent For: Primary General Other (specify)		[MEMO ITE	EM]
State: District:				
Full Name (Last, First, Middle Initial)			Data - (D)	hurnoment
3- Linda vollman			Date of Dis	
Mailing Address 236 Sw Water St			06	30 / 2012
•	State Zip Code		Transacti	on ID : SB21B.9188.5
sheridan Purpose of Disbursement	OR 97378			
salary		001	Amount of I	Each Disbursement this Period
Candidate Name		Category/ Type		1065.20
	nent For: Primary General Other (specify)		[MEMO ITE	EM]
Full Name (Last, First, Middle Initial) Mr. Colm Willis			Date of Dis	bursement
Mailing Address 619 SW Arboretum Circle			06 /	30 / 2012
Portland	State Zip Code OR 97221		Transacti	on ID : SB21B.9188.6
Purpose of Disbursement salary		201		
Candidate Name		001 Category/ Type		Each Disbursement this Period 3426.85
	nent For: Primary General Other (specify)	туре	[MEMO ITE	7
State: District: SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only).		<u> </u>		0.00

SCHEDULE B (FEC Form 3X)	PAGE 15 OF 26			
ITEMIZED DISBURSEMENTS	Use separate schedule(for each category of the) (official offing	one) 22 23 7	24 25 26
	Detailed Summary Page	27	28a 28b	28c 29 30
Any information copied from such Reports and State				
or for commercial purposes, other than using the nar	me and address of any pol	itical committee to	solicit contributions fr	om such committee.
NAME OF COMMITTEE (In Full) Right to Life/Oregon PAC				
Full Name (Last, First, Middle Initial)			Date of Disburseme	ant
A. Oregon Right to Life Ed. Foundation	on		Date of Disbursering	ent
Mailing Address 4335 River Road N			04 02	2012
City	State Zip Code		Transaction ID : \$	SR21R 0163
Salem Purpose of Disbursement	OR 97303		Transaction ib . (55215.3103
rent		001	Amount of Each Di	sbursement this Period
Candidate Name		Category/		202.27
0(5		Type		366.67
Office Sought: House Disburse Senate	ment For: Primary General			
President	Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial)				
B. Oregon Right to Life Ed. Foundation	on		Date of Disburseme	ent
Mailing Address 4335 River Road N			06 04	2012
walling Address 4335 Kiver Road N			00 04	2012
•	State Zip Code		Transaction ID :	SB21B.9182
Salem Purpose of Disbursement	OR 97303			
rent		001	Amount of Each Di	sbursement this Period
Candidate Name		Category/		200.07
		Type	,	366.67
	ment For:			
Senate President	Primary General Other (specify) ▼			
State: District:	Canon (openiny)			
Full Name (Last, First, Middle Initial)				
C. Regence Bluecross Blueshield of Control	Oregon		Date of Disburseme	_
Mailing Address PO Box 91128			04 23	2012
			23	2012
,	State Zip Code		Transaction ID : 3	SB21B.9170
Seattle Purpose of Disbursement	WA 98111			-
medical insurance		001	Amount of Each Di	sbursement this Period
Candidate Name		Category/	, and an each bi	
		Type		882.80
	ment For:			
Senate President	Primary General Other (specify)			
State: District:	Cirici (opcony)			
SUBTOTAL of Disbursements This Page (optional)				1616.14
TOTAL This Period (last page this line number only)			

TEMIZED DISBURSEMENTS		a/a\	NUMBER: PAGE 16 O	F 26
	Use separate schedule for each category of the Detailed Summary Page	he Concor only	7 one) 22 23 24 25 28a 28b 28c 29	20
Any information copied from such Reports and State or for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full) Right to Life/Oregon PAC	me and address of ally p	omicai committee ti	o sonor contributions from such committee	.G.
Full Name (Last, First, Middle Initial)			Data of Diskumsus	
A. Regence Bluecross Blueshield of	Oregon		Date of Disbursement	V
Mailing Address PO Box 91128			06 25 2012	
City	State Zip Code WA 98111		Transaction ID : SB21B.9187	
Seattle Purpose of Disbursement	WA 98111			
medical insurance		001	Amount of Each Disbursement this P	eriod
Candidate Name		Category/	455.	40
Senate President	ement For: Primary	Type al		
State: District:				
Full Name (Last, First, Middle Initial) 3. Us Airways Card Services			Date of Disbursement	
Mailing Address 4000 E. Sky Harbor BLVD			06 05 2012	Y
City Phoenix	State Zip Code AZ 85034		Transaction ID : SB21B.9184	
Purpose of Disbursement travel		002	Amount of Each Disbursement this P	eriod
Candidate Name		Category/ Type	602.	_
Office Sought: House Disburse Senate President State: District:	ement For: Primary	-1		
Full Name (Last, First, Middle Initial) C. United Airlines			Date of Disbursement	_
Mailing Address P.O. Box 66100	Mailing Address P.O. Box 66100			Y
City Chicago Purpose of Disbursement	State Zip Code IL 60666		Transaction ID : SB21B.9184.1	
travel		002	Amount of Each Disbursement this P	erind
Candidate Name		Category/ Type	591.	
Office Sought: House Disburse Senate	ement For: Primary General Other (specify)	al	[MEMO ITEM]	
State: President District:				

1mage# 12972444702 PAGE 17 / 26

: 97 'A = G7 9 @ G5 B9 CI G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: SB21B Transaction ID: SB21B.9184

this was a reimbursement to credit card for gayle attteberry

Form/Schedule: Transaction ID:

SCHEDULE B (FEC Form 3X)			FOR LIN	THE HOMBER.				18	18 OF 26	
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check only one)							
		Summary Page	X 21		a	23 28b		24 28c	25 29	30
Any information copied from such Reports and Staten										
or for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full)	ie and add	ress of any politic	cai committee	to solicit	COTILITIE	Julions	irom	Such	COMMIN	uee.
Right to Life/Oregon PAC										
Full Name (Last, First, Middle Initial)				_						
A. Verizon Wireless						sburse				
Mailing Address P.O. Box 25505				0:	_	2			2012	Y
City	State	Zip Code		Tra	neact	ion ID	. CD1	21B.917	70	
LeHigh Valley	PA	18002-5505			IISaci	טו ווטו.	. 302	.10.91	19	
Purpose of Disbursement telephone			001	Amo	unt of	Each	Disbu	ırsemei	nt this	Period
Candidate Name			Category/ Type	ΊГ.					11	3.39
Office Sought: House Disbursen	nent For:		Турс			, ,		,		
	Primary	General								
State: District:	Other (spe	icily) 🔻								
Full Name (Last, First, Middle Initial)										
B. WISCONSIN RIGHT TO LIFE POLIT	ICAL AC	CTION COM	MITTEE	Date	of Di	sburse	ment			
				M	M /	D	D /	Υ	Y Y	Y
Mailing Address 10625 W NORTH AVE				0	5	3	1		2012	
•	State	Zip Code		Tra	nsact	ion ID	: SB2	21B.91	80	
MILWAUKEE Purpose of Disbursement	WI	53226		_						
contribution			012	Amo	unt of	Each	Disbu	ırsemei	nt this	Period
Candidate Name			Category/ Type	ΊC.		45 - 1		40-1	100	00.00
Office Sought: House Disbursen	nent For:		.,,,,	_						
Senate	Primary	General								
	Other (spe	cify) 🔻								
State: District:										
Full Name (Last, First, Middle Initial) C.				Date	of Di	sburse	ment			
				M	M /	D	D /	Υ	YY	Y
Mailing Address						L.		L.		
City	State	Zip Code								
Purpose of Disbursement				_						
				Amo	unt of	Each	Disbu	ırseme	nt this	Period
Candidate Name			Category/	1 [_	•	_		_	
Office Sought: House Disbursen	nent For:		Туре		_	7	_	7		
	Primary	General								
President	Other (spe	cify) 🔻								
State: District:					_		_	_		
							_		111:	3 39
SUBTOTAL of Disbursements This Page (optional)			······ >		_	7	_	7		3.00
TOTAL This Period (last page this line number only)				.]		- · ·		(F)	3323	5.17

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE 19 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ Right to Life/Oregon PAC C00141572 Check if 24-hour report 48-hour report Amends report filed on New report Full Name (Last, First, Middle Initial) of Payee Date Eagle Web Press 05 07 2012 Mailing Address PO Box 12009 Amount City State Zip Code 5.32 Salem OR 97309 Transaction ID: SE.9202 State: Purpose of Expenditure Office Sought: House OR Category/ printing of voters guide 004 Type Senate District: President Name of Federal Candidate Supported or Opposed by Expenditure: Check One: **NEWT GINGRICH** Support Oppose | Primary Disbursement For: General Calendar Year-To-Date Per Election 692.89 2012 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date Eagle Web Press 05 2012 Mailing Address PO Box 12009 Amount Zip Code City State 5.32 OR Salem 97309 Transaction ID: SE.9203 State: Office Sought: House Purpose of Expenditure OR Category/ printing of voters guide 004 Type Senate District: President Name of Federal Candidate Supported or Opposed by Expenditure: Check One: Oppose Support **RON PAUL** Disbursement For: General Primary Calendar Year-To-Date Per Election 698.21 2012 for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 10.64 (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Mrs. Gayle Atteberry [Electronically Filed] 09 Date 25 2012 Signature

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full) Right to Life/Oregon PAC	FEC IDENTIFICATION NUMBER ▼ C C00141572
Check if 24-hour report 48-hour report New report Amends report filed on	** M / D ** D / Y ** Y ** Y ** Y
Full Name (Last, First, Middle Initial) of Payee Eagle Web Press	05 07 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 12009 Amount	
City State Zip Code Salem OR 97309 Transa	5.32 ction ID : SE.9204
Purpose of Expenditure printing of voters guide Category/ Type Office Sough	Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY Check One:	X President Support Oppose
5 32 2012	nt For: Primary General
Full Name (Last, First, Middle Initial) of Payee Eagle Web Press	05 07 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 12009 Amou	
	5.32 action ID : SE.9205
Purpose of Expenditure printing of voters guide Category/ Type Office Sough	ht: House State: OR Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure: RICHARD J. SANTORUM Check One:	
703 53 2012	nt For: Primary General
(a) SUBTOTAL of Itemized Independent Expenditures	10.64
(b) SUBTOTAL of Unitemized Independent Expenditures	7 1 7 1 7
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if party committee) any political party committee or its agent.	
Mrs. Gayle Atteberry [Electronically Filed] Date 09	25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

PAGE

20

OF

S

Mrs. Gayle Atteberry

Signature

	CHEDULE E (FEC Form 3X)	
ΓE	EMIZED INDEPENDENT EXPENDITURES	PAGE 21 OF 26 FOR LINE 24 OF FORM 3X
V/	AME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
	Right to Life/Oregon PAC	C C00141572
Cł	neck if 24-hour report 48-hour report New report Amends report	ort filed on
	Full Name (Last, First, Middle Initial) of Payee Gateway Communications	Date 05 04 2012
	Mailing Address 14107 NE Airport Way	Amount
	City State Zip Code Portland OR 97230	153.10 Transaction ID : SE.9195
	Purpose of Expenditure printing and postage of voter guide Category/ Type 004	Office Sought: House State: OR Senate District: President
	Name of Federal Candidate Supported or Opposed by Expenditure: NEWT GINGRICH	Check One: Support Oppose
	Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)
	Full Name (Last, First, Middle Initial) of Payee Gateway Communications, Inc Mailing Address 16805 NE Mason Court	Date 05 / 04 / 2012
	City State Zip Code	Amount 153.09
	Portland OR 97230	Transaction ID : SE.9196
	Purpose of Expenditure printing and postage for voters guide Category/ Type 004	Office Sought: House State: OR Senate District: X President
	Name of Federal Candidate Supported or Opposed by Expenditure: RON PAUL	Check One: Support Oppose
	Calendar Year-To-Date Per Election for Office Sought 381.39	Disbursement For: Primary General Other (specify)
	(a) SUBTOTAL of Itemized Independent Expenditures	306.19
	(b) SUBTOTAL of Unitemized Independent Expenditures	. •
	(c) TOTAL Independent Expenditures	
	Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent committee) any political party committee or its agent.	

[Electronically Filed]

09

Date

25

S IT

CHEDULE E (FEC Form 3X)		
EMIZED INDEPENDENT EXPENDITUI	RES	PAGE 22 OF 26 FOR LINE 24 OF FORM 3X
AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Right to Life/Oregon PAC		C C00141572
heck if 24-hour report 48-hour report	t New report Amends repo	ort filed on
Full Name (Last, First, Middle Initial) of Payee Gateway Communications, Inc		Date
***************************************		05 04 2012
Mailing Address 16805 NE Mason Court		Amount
City	State Zip Code	153.09
Portland	OR 97230	Transaction ID : SE.9198
Purpose of Expenditure printing and postage for voters guide	Category/ Type 004	Office Sought: House State: OR Senate District:
Name of Federal Candidate Supported or Opp	posed by Expenditure:	> President
MITT ROMNEY	noded by Exponence.	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	534.48	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee Gateway Communications, Inc		Date
Mailing Address 16805 NE Mason Court		05 04 2012 Amount
City	State Zip Code	Allivari
Portland	OR 97230	153.09
	0.200	Transaction ID : SE.9200 Office Sought: House State: OP
Purpose of Expenditure printing and postage of voters guide	Category/ Type 004	Office Sought: House State: OR Senate District: X President
Name of Federal Candidate Supported or Opp	posed by Expenditure:	
RICHARD J. SANTORUM		Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	687.57	Disbursement For: Primary General 2012 Other (specify)
(a) SUBTOTAL of Itemized Independent Expen	nditures	> 306.18
(a) SUBTOTAL of Itemized Independent Expen (b) SUBTOTAL of Unitemized Independent Exp		
	penditures	

with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mrs. Gayle Atteberry	[Electronically Filed]	Date	M = M 09	/	25	/	2012
Signature	<u> </u>						

17

Mrs. Gayle Atteberry

Signature

	CHEDULE E (FEC Form 3X)	
	EMIZED INDEPENDENT EXPENDITURES	PAGE 23 OF 26 FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
R	Right to Life/Oregon PAC	C C00141572
Ch	heck if 24-hour report 48-hour report New report Amends report	filed on / /
	Full Name (Last, First, Middle Initial) of Payee New Media NW	Date
	Mailing Address PO Box 17727	Mount 19 2012
	City State Zip Code	- 1000
	Salem OR 97305	10.00 Transaction ID : SE.9206
	design of voters guide Category Type 004	Office Sought: House State: OR Senate District: President
	Name of Federal Candidate Supported or Opposed by Expenditure: NEWT GINGRICH	Check One: Support Oppose
	Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)
	Full Name (Last, First, Middle Initial) of Payee New Media NW	Date 04 19 2012
	Mailing Address PO Box 17727	Amount
	City State Zip Code Salem OR 97305	10.00 Transaction ID : SE.9207
	Purpose of Expenditure design of voters guide Category/ Type Out Out Out Out Type Out Out Out Out Out Out Out Ou	Office Sought: House State: OR Senate District:
	Name of Federal Candidate Supported or Opposed by Expenditure: RON PAUL	Check One: Support Oppose
	Calendar Year-To-Date Per Election for Office Sought 55.20	Disbursement For: Primary General Other (specify)
	(a) SUBTOTAL of Itemized Independent Expenditures	20.00
	(b) SUBTOTAL of Unitemized Independent Expenditures	·
	(c) TOTAL Independent Expenditures	·
	Under penalty of perjury I certify that the independent expenditures reported herein were no with, or at the request or suggestion of, any candidate or authorized committee or agent of e party committee) any political party committee or its agent.	·

[Electronically Filed]

2012

25

09

Date

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

	PAGE FOR L		OF OF FO	26 DRM 3X	
- 1					
D	ENTIFI	CATIO	N NUM	BER ▼	

	TOTT LINE 24 OF TOTAL 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Right to Life/Oregon PAC	C C00141572
Check if 24-hour report 48-hour report New report Amends report	ort filed on
Full Name (Last, First, Middle Initial) of Payee	Date
New Media NW	04 19 2012
Mailing Address PO Box 17727	Amount
City State Zip Code	
Salem OR 97305	10.00
Purpose of Expenditure	Transaction ID : SE.9208 Office Sought: House State: OR
design of voters guide Category/ Type O04	Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	Y President
MITT ROMNEY	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought 65.20	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
New Media NW	04 19 2012
Mailing Address PO Box 17727	Amount
City State Zip Code	
Salem OR 97305	10.00
Purpose of Expenditure Category/	Transaction ID : SE.9209 Office Sought:
Purpose of Expenditure design of voters guide Category/ Type 004	Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———
RICHARD J. SANTORUM	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought 75.20	Disbursement For: Primary General 2012 Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	> 20.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	
Mrs. Gayle Atteberry [Electronically Filed] Date	e 09 25 2012
Signature	

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TEI	MIZED INDEPENDENT EXPENDITURES			PAGE 25 FOR LINE 2	OF 26 24 OF FORM 3X
	ME OF COMMITTEE (In Full)		FEC ID	ENTIFICATION	ON NUMBER ▼
Ri	ght to Life/Oregon PAC		C	C00141572	
Che	ck if 24-hour report 48-hour report New report Amends repo		- M /	D	Y W Y W Y
	Full Name (Last, First, Middle Initial) of Payee Postmaster Mailing Address 1050 Sunnyview Rd	Date	04 /	17 J	2012
	City State Zip Code Salem OR 97301 Purpose of Expenditure		ction ID	: SE.9210 House	8.80 State: OR
	Purpose of Experioritarie postage for voters guide Category/ Type O04 Name of Federal Candidate Supported or Opposed by Expenditure: NEWT GINGRICH	Check One:	X	Senate President Support	District:
ŀ	Calendar Year-To-Date Per Election for Office Sought	Disbursemer 2012 Ot	nt For: [> Primary	General
	Full Name (Last, First, Middle Initial) of Payee Postmaster Mailing Address, 1979 6	Date	04 /	17	2012
	Mailing Address 1050 Sunnyview Rd	Amou	nt		
	City State Zip Code salem OR 97301) : SE.9211	8.80 State: OR
	Purpose of Expenditure postage for voters guide Category/ Type 004	Office Sough	TI.:	House Senate President	District:
	Name of Federal Candidate Supported or Opposed by Expenditure: RON PAUL	Check One:	X	Support	Oppose
	Calendar Year-To-Date Per Election for Office Sought	Disbursemer 2012 Ot	nt For: [her (spe		General
(6	a) SUBTOTAL of Itemized Independent Expenditures				17.60
(1	SUBTOTAL of Unitemized Independent Expenditures	· [1 1 7	1 1 1
(c) TOTAL Independent Expenditures	•	7	1 1 7	
W	nder penalty of perjury I certify that the independent expenditures reported herein were ith, or at the request or suggestion of, any candidate or authorized committee or agent o arty committee) any political party committee or its agent.				
	Mrs. Gayle Atteberry [Electronically Filed] Date	09	25	/ Y Y 201	2
	Signature				

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TEMIZED INDEPENDENT EXPENDITURES			PAGE 26 OF 26 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FFC I	DENTIFICATION NUMBER ▼
Right to Life/Oregon PAC		C	C00141572
Check if 24-hour report 48-hour report N	lew report Amends repo	ort filed on	/ D D / Y D Y D Y
Full Name (Last, First, Middle Initial) of Payee Postmaster Mailing Address 1050 Sunnyview Rd		Date 04	/ 17 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State	Zip Code	Amount	
salem OR	97301	Transaction II	
Purpose of Expenditure postage for voters guide	Category/ Type 004	Office Sought:	House State: OR Senate District: President
Name of Federal Candidate Supported or Opposed by Expe	enalture:	Check One:	Support Oppose
Calendar Year-To-Date Per Election for Office Sought	26.40	Disbursement For: 2012 Other (sp	
Full Name (Last, First, Middle Initial) of Payee Postmaster		Date 04	/ DDD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1050 Sunnyview Rd		Amount	التتا لتا
City State salem OR	Zip Code 97301	Transaction I	
Purpose of Expenditure postage for voters guide	Category/ Type 004	Office Sought:	House State: OR Senate District:
Name of Federal Candidate Supported or Opposed by Expe	enalture:	Check One:	Support Oppose
Calendar Year-To-Date Per Election for Office Sought	35.20	Disbursement For: 2012 Other (sp	
(a) SUBTOTAL of Itemized Independent Expenditures		•	17.60
(b) SUBTOTAL of Unitemized Independent Expenditures		•	7
(c) TOTAL Independent Expenditures		•	708.85
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
	Electronically Filed] Date	9 09 25	2012
Signature			