

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Dave Wu for US Congress

ADDRESS (number and street) 818 SW Third Ave. #1182
 Check if different than previously reported. (ACC)
Portland OR 97204

2. **FEC IDENTIFICATION NUMBER** C00329292
CITY STATE ZIP CODE STATE DISTRICT
3. IS THIS REPORT NEW (N) OR AMENDED (A) OR 01

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on [] [] [] in the State of []
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on [] [] [] in the State of []

5. Covering Period 07 01 2006 through 09 30 2006

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 Jay Castle

Signature of Treasurer Electronically Filed by Jay Castle Date 10 25 2006

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

Dave Wu for US Congress

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 7 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

 To:

| | |
|---|---|
| M | M |
| 0 | 9 |

| | |
|---|---|
| D | D |
| 3 | 0 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

| | 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))..... | 146934.17 | 1294436.51 |
| (b) Total Contribution Refunds (from Line 20(d))..... | 0.00 | -17550.00 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))..... | 146934.17 | 1311986.51 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17)..... | 185812.45 | 1025498.96 |
| (b) Total Offsets to Operating Expenditures (from Line 14)..... | 0.00 | 3761.65 |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))..... | 185812.45 | 1021737.31 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 561825.04 | |
| 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)..... | 45374.23 | |

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 02/2003)

Write or Type Committee Name
 Dave Wu for US Congress

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 7 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

 To:

| | |
|---|---|
| M | M |
| 0 | 9 |

| | |
|---|---|
| D | D |
| 3 | 0 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

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).....

65653.97

827645.91

(ii) Unitemized.....

23679.50

134079.50

(iii) TOTAL of contributions

89333.47

961725.41

from individuals..... ▶

90.70

801.10

(b) Political Party Committees.....

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

57510.00

331910.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS
 (other than loans)

146934.17

1294436.51

(add Lines 11(a)(iii), (b), (c), and (d))

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

0.00

0.00

(add Lines 13(a) and (b)).....

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

0.00

3761.65

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

5446.77

6273.64

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

152380.94

1304471.80

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

| | | |
|--|-----------|------------|
| 17. OPERATING EXPENDITURES..... | 185812.45 | 1025498.96 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES..... | 0.00 | 0.00 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate..... | 0.00 | 0.00 |
| (b) Of all Other Loans..... | 0.00 | 0.00 |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... | 0.00 | 0.00 |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees..... | 0.00 | -17550.00 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... | 0.00 | -17550.00 |
| 21. OTHER DISBURSEMENTS..... | 0.00 | 18200.00 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶ | 185812.45 | 1026148.96 |

III. CASH SUMMARY

| | |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 595256.55 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3)..... | 152380.94 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 747637.49 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 185812.45 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 561825.04 |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 5 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 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)
Dave Wu for US Congress

A. Full Name (Last, First, Middle Initial)
Carol Adler

Mailing Address 2861 SW Champlain

City State Zip Code
Portland OR 97205

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

Name of Employer N/A Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
07 / 18 / 2006

Transaction ID: C26638

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
David E. Alman

Mailing Address PO Box 1072

City State Zip Code
Albany OR 97321

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

Name of Employer Albany Research Center Occupation Materials Research Engineer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
08 / 21 / 2006

Transaction ID: C26850

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 4115 NE 19th Ave

City State Zip Code
Portland OR 97211

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

Name of Employer Nature's Northwest Occupation President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
08 / 02 / 2006

Transaction ID: C26691

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1200.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 6 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

A. Full Name (Last, First, Middle Initial)
Terrence Bean

Mailing Address 1882 SW Hawthorne Ter

City State Zip Code
Portland OR 97201

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

Name of Employer Occupation
Bean Realty Developer

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

1962.97

Date of Receipt
MM / DD / YYYY
07 / 30 / 2006

Transaction ID: C27570

Amount of Each Receipt this Period
1962.97

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* In-Kind: catering and event supplies

B. Full Name (Last, First, Middle Initial)
Jon Borenstein

Mailing Address 350 Shirley Road

City State Zip Code
Birmingham MI 48009

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

Name of Employer Occupation
Honigman Miller Schwartz & Cohn LL information requested

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

1000.00

Date of Receipt
MM / DD / YYYY
08 / 26 / 2006

Transaction ID: C26900

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

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
Nova Radiology PC Physician

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

400.00

Date of Receipt
MM / DD / YYYY
09 / 28 / 2006

Transaction ID: C27133

Amount of Each Receipt this Period
200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 3162.97 |
| TOTAL This Period (last page this line number only) | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 7 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

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

Mailing Address 3947 SW Greenleaf Dr

City Portland State OR Zip Code 97221

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

Name of Employer Towers Perrin Occupation Consultant

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 26 / 2006

Transaction ID: C27055

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Scott F. Burns

Mailing Address 23700 SW Stafford Rd

City Tualatin State OR Zip Code 97062

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

Name of Employer Portland State University Occupation Professor

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 05 / 2006

Transaction ID: C26950

Amount of Each Receipt this Period
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 4460 Golden Lane

City Lake Oswego State OR Zip Code 97035

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

Name of Employer Steve Caplan's Inconceivable Ent. Occupation Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 26 / 2006

Transaction ID: C27043

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1550.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 8 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

A. Full Name (Last, First, Middle Initial)
Mr. Barry Chang

Mailing Address P.O. Box 2523

City State Zip Code
Cupertino CA 95015-2523

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

Name of Employer Occupation
Better Home & Loan Real Estate Sales

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
750.00

Date of Receipt
MM / DD / YYYY
09 / 18 / 2006

Transaction ID: C27009

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Carol Chang

Mailing Address 3422 Stoney Mist Dr.

City State Zip Code
Sugar Land TX 77479

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

Name of Employer Occupation
Polar Ray Sunglass Manager

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
750.00

Date of Receipt
MM / DD / YYYY
07 / 20 / 2006

Transaction ID: C26651

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 28 N 1st St. Suite 900

City State Zip Code
San Jose CA 95113

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

Name of Employer Occupation
Self CPA

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 05 / 2006

Transaction ID: C26975

Amount of Each Receipt this Period
150.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional) | 650.00 |
| TOTAL This Period (last page this line number only) | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 9 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

A. Full Name (Last, First, Middle Initial)
Jackson Chang

Mailing Address 11111 Wickwood Dr

City State Zip Code
Houston TX 77024

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

Name of Employer Occupation
Pan Jackson Company, Inc. President

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

300.00

Date of Receipt
MM / DD / YYYY
07 / 20 / 2006

Transaction ID: C26664

Amount of Each Receipt this Period
300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Sue Chang

Mailing Address P. O. Box 2523

City State Zip Code
Cupertino CA 95015-2523

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

Name of Employer Occupation
INFOLOAN Loan Agent

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

Date of Receipt
MM / DD / YYYY
09 / 18 / 2006

Transaction ID: C27008

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 3630 NW Thurman

City State Zip Code
Portland OR 97210

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

Name of Employer Occupation
OVP Venture Capital

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

1050.00

Date of Receipt
MM / DD / YYYY
08 / 24 / 2006

Transaction ID: C26911

Amount of Each Receipt this Period
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional) | 600.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 10 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

A. Full Name (Last, First, Middle Initial)
Dr. Jong L. Chen

Mailing Address 3941 J Street, Suite 250

City Sacramento State CA Zip Code 95864

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

Name of Employer self Occupation M.D. Urology

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 05 / 2006

Transaction ID: C26969

Amount of Each Receipt this Period
 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 2049 Ojibwa Ct.

City Fremont State CA Zip Code 94539

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

Name of Employer Tonix Corporation Occupation Business

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1100.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 05 / 2006

Transaction ID: C26965

Amount of Each Receipt this Period
 600.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 7175 Sharon Dr

City San Jose State CA Zip Code 95129

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

Name of Employer 888 Auto Corp. Occupation President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 30 / 2006

Transaction ID: C27234

Amount of Each Receipt this Period
 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 1600.00 |
| TOTAL This Period (last page this line number only) | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 11 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

A. Full Name (Last, First, Middle Initial)
Mei-Fen Chen

Mailing Address 950 Ivy Parkway

City State Zip Code
Houston TX 77077

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

Name of Employer Occupation
Northline Motel Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
07 / 20 / 2006

Transaction ID: C26666

Amount of Each Receipt this Period
200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Sen-Heng Chen

Mailing Address 4202 Lakewood Dr.

City State Zip Code
Missouri City TX 77459

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

Name of Employer Occupation
Morrison Enterprises, Inc. Business

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
450.00

Date of Receipt
MM / DD / YYYY
07 / 20 / 2006

Transaction ID: C26647

Amount of Each Receipt this Period
450.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 43 Meadowood Lane

City State Zip Code
Farmingdale NY 11735

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

Name of Employer Occupation
Met Life Insurance Agent

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2006

Transaction ID: C27202

Amount of Each Receipt this Period
200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional) | 850.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 12 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

A. Full Name (Last, First, Middle Initial)
Johnny Choo

Mailing Address 5120 Sky Lake Dr.

City State Zip Code
Plano TX 75093

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

Name of Employer N/A Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 08 / 2006

Transaction ID: C26771

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Ming-Hsueh Chou

Mailing Address 12323 Braesridge

City State Zip Code
Houston TX 77071

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

Name of Employer MetLife Occupation Sales

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 20 / 2006

Transaction ID: C26674

Amount of Each Receipt this Period
200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1230 Miramonte Ave.

City State Zip Code
Los Altos CA 94024

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

Name of Employer Silicon Valley Machine Occupation President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 13 / 2006

Transaction ID: C26791

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **800.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 13 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | | |
|---|--|---|--|
| A. Full Name (Last, First, Middle Initial) Frank C. Chung | | Date of Receipt M M / D D / Y Y Y Y 08 / 08 / 2006 | |
| Mailing Address 14891 SE 50th St. | | Transaction ID: C26780 | |
| City State Zip Code Bellevue WA 98006 | | Amount of Each Receipt this Period 250.00 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Occupation Gray & Osborne Civil Engineer | | | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 750.00 | |

| | | | |
|---|--|---|--|
| B. Full Name (Last, First, Middle Initial) James Chung | | Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2006 | |
| Mailing Address 270 Purdue Ct. | | Transaction ID: C27163 | |
| City State Zip Code Paramus NJ 07652 | | Amount of Each Receipt this Period 250.00 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Occupation Bowne & Co. Database Technology Advisor | | | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 250.00 | |

| | | | |
|---|--|---|--|
| C. Full Name (Last, First, Middle Initial) Roger A Cooke | | Date of Receipt M M / D D / Y Y Y Y 09 / 26 / 2006 | |
| Mailing Address 1910 SW Myrtle Street | | Transaction ID: C27034 | |
| City State Zip Code Portland OR 97201 | | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Occupation Precision Castparts Corporation Executive | | | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 1000.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) | 1500.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 14 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | | |
|---|---|---|--|
| Full Name (Last, First, Middle Initial) A. Charlotte C. Corkran | | Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 4 / 2 0 0 6 | |
| Mailing Address 130 NW 114th Ave | | Transaction ID: C26893 | |
| City State Zip Code Portland OR 97229 | Amount of Each Receipt this Period 50.00 | | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Self Occupation Wildlife Consultant | Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| Election Cycle-to-Date ▼ 250.00 | | | |

| | | | |
|--|---|---|--|
| Full Name (Last, First, Middle Initial) B. Elizabeth Craig | | Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 9 / 2 0 0 6 | |
| Mailing Address 413 S. Bristol Ave. | | Transaction ID: C26946 | |
| City State Zip Code Los Angeles CA 90049 | Amount of Each Receipt this Period 2100.00 | | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer CA Graduate Institute Occupation Psychologist | Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| Election Cycle-to-Date ▼ 2100.00 | | | |

| | | | |
|---|---|---|--|
| Full Name (Last, First, Middle Initial) C. Gregory Craig | | Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 9 / 2 0 0 6 | |
| Mailing Address 413 S Bristol Ave | | Transaction ID: C26945 | |
| City State Zip Code Los Angeles CA 90049-3820 | Amount of Each Receipt this Period 2100.00 | | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Cook Inlet Energy Supply Occupation President | Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| Election Cycle-to-Date ▼ 4200.00 | | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 4250.00 |
| TOTAL This Period (last page this line number only) ▶ | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 15 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) A. Craig A. Crispin | | Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2006 |
| Mailing Address 6000 SW Salmon St | | Transaction ID: C27170 |
| City State Zip Code Portland OR 97223 | Amount of Each Receipt this Period 500.00 | |
| FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Crispin Employment Lawyers | Occupation Attorney | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) B. Gun Denhart | | Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2006 |
| Mailing Address 420 NW 11th, #1205 | | Transaction ID: C27162 |
| City State Zip Code Portland OR 97209 | Amount of Each Receipt this Period 500.00 | |
| FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer OBA Board of Directors | Occupation Executive | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) C. Harriet Denison | | Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006 |
| Mailing Address 3406 NW Thurman | | Transaction ID: C27207 |
| City State Zip Code Portland OR 97210-1229 | Amount of Each Receipt this Period 500.00 | |
| FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer n/a | Occupation retired | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1275.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 1500.00 |
| TOTAL This Period (last page this line number only) ▶ | _____ |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 16 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

A. Full Name (Last, First, Middle Initial)
Vern Arthur Deyarmie

Mailing Address 6017 Hwy 39

City State Zip Code
Klamath Falls OR 97603

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

Name of Employer n/a Occupation retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 2 2 / 2 0 0 6

Transaction ID: C26883

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 6225 Chabot Road

City State Zip Code
Oakland CA 94618

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

Name of Employer Self Occupation information requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 2 6 / 2 0 0 6

Transaction ID: C26898

Amount of Each Receipt this Period
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 2446 NW Overton

City State Zip Code
Portland OR 97210

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

Name of Employer Self Occupation Designer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 6

Transaction ID: C27201

Amount of Each Receipt this Period
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **2150.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 17 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

A. Full Name (Last, First, Middle Initial)
Ben Feder

Mailing Address 650 5th Ave
Fl 1

City State Zip Code
New York NY 10019

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

Name of Employer Occupation
Zelnick Media Group information requested

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

1000.00

Date of Receipt
MM / DD / YYYY
08 / 26 / 2006

Transaction ID: C26904

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
James Duane Fuiten

Mailing Address P.O. Box 1635

City State Zip Code
Hillsboro OR 97123

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

Name of Employer Occupation
Metro West General Manager

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

4200.00

Date of Receipt
MM / DD / YYYY
09 / 26 / 2006

Transaction ID: C27044

Amount of Each Receipt this Period
2100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 2420 NW Marshall St, Apt. 215

City State Zip Code
Portland OR 97210-2975

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

Name of Employer Occupation
N/A Retired

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

225.00

Date of Receipt
MM / DD / YYYY
08 / 18 / 2006

Transaction ID: C26804

Amount of Each Receipt this Period
25.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 3125.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 18 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

A. Full Name (Last, First, Middle Initial)
Mr. David Wayne Gifford

Mailing Address 1262 NW Summit Ave

City State Zip Code
Portland OR 97210-2822

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

Name of Employer
Bean Investment Real Estate

Occupation
Investor

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 02 / 2006

Transaction ID: C26692

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Arlo Giles

Mailing Address 2220 Hawkins Lane

City State Zip Code
Eugene OR 97405

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

Name of Employer
n/a

Occupation
Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 21 / 2006

Transaction ID: C26852

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1-3rd St.

City State Zip Code
Astoria OR 97103

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

Name of Employer
n/a

Occupation
retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2006

Transaction ID: C27132

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional) | 850.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 19 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

A. Full Name (Last, First, Middle Initial)
Rita M. Hamann

Mailing Address 1860 SE 3rd St

City Astoria State OR Zip Code 97103-5441

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

Name of Employer Lutheran Community Services Occupation Office Manager

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 1 4 / 2 0 0 6

Transaction ID: C26906

Amount of Each Receipt this Period
25.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Erika S. Heider

Mailing Address 725 NW 10th #605

City Portland State OR Zip Code 97209

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

Name of Employer Dean Occupation PCC

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 1 8 / 2 0 0 6

Transaction ID: C26808

Amount of Each Receipt this Period
25.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Lorane C. Hill-Sanders

Mailing Address 13143 SW Katherine St.

City Tigard State OR Zip Code 97223

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

Name of Employer n/a Occupation homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 1 3 / 2 0 0 6

Transaction ID: C26781

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional) | 300.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 20 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|---|
| A. Full Name (Last, First, Middle Initial) Nancy L Horng Mailing Address PO Box 20054 City San Jose State CA Zip Code 95160 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 0 9 / 0 5 / 2 0 0 6 Transaction ID: C26966 Amount of Each Receipt this Period 300.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer Northern California Formosan Feder Occupation President Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 600.00 | | |

| | | |
|---|--|---|
| B. Full Name (Last, First, Middle Initial) David A. Hornig Mailing Address 701 Washington Ave. City Oakmont State PA Zip Code 15139-1722 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 0 6 Transaction ID: C27006 Amount of Each Receipt this Period 100.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer Touchtown Occupation Computer Programmer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 450.00 | | |

| | | |
|---|--|---|
| C. Full Name (Last, First, Middle Initial) Dr. Daniel C. Hsu Mailing Address 7923 Garden Grove Blvd. City Garden Grove State CA Zip Code 92841 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6 Transaction ID: C27161 Amount of Each Receipt this Period 100.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer Self Occupation Dentist Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 400.00 | | |

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 21 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. Jane Huang Hsu | | Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006 |
| Mailing Address 2312 Hemlock Lane | | Transaction ID: C27238 |
| City Vestal State NY Zip Code 13850 | Amount of Each Receipt this Period 500.00 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer n/a Occupation homemaker | Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Election Cycle-to-Date ▼ 500.00 | | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Ho-Yi Huang | | Date of Receipt M M / D D / Y Y Y Y 08 / 21 / 2006 |
| Mailing Address 5903 Stratford Gardens Dr. | | Transaction ID: C26853 |
| City Sugar Land State TX Zip Code 77479 | Amount of Each Receipt this Period 200.00 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer N/A Occupation Retired engineer | Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Election Cycle-to-Date ▼ 350.00 | | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Ron Fu Huang | | Date of Receipt M M / D D / Y Y Y Y 07 / 20 / 2006 |
| Mailing Address 8223 Falling Water Ct. | | Transaction ID: C26641 |
| City Sugar Land State TX Zip Code 77478 | Amount of Each Receipt this Period 100.00 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer Nanco, Inc. Occupation Business | Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Election Cycle-to-Date ▼ 250.00 | | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional) | 800.00 |
| TOTAL This Period (last page this line number only) | _____ |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 22 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

A. Full Name (Last, First, Middle Initial)
Ron Fu Huang

Mailing Address 8223 Falling Water Ct.

City State Zip Code
Sugar Land TX 77478

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

Name of Employer Occupation
Nanco, Inc. Business

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 20 / 2006

Transaction ID: C26646

Amount of Each Receipt this Period
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Chuan-Chen Hung

Mailing Address 13707 NW 47th Ave.

City State Zip Code
Vancouver WA 98685

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

Name of Employer Occupation
Grand Gates, Inc. President

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 08 / 2006

Transaction ID: C26769

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Jau-Huey Chen Hwu

Mailing Address 426 Alicia Way

City State Zip Code
Los Altos CA 94022

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

Name of Employer Occupation
n/a homemaker

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 05 / 2006

Transaction ID: C26967

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 23 / 139 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b |
| <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

A. Full Name (Last, First, Middle Initial)
James W. Jandacek

Mailing Address 10065 SW 141st Ave

City State Zip Code
Beaverton OR 97008-9725

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

Name of Employer Self Occupation Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 345.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 02 / 2006

Transaction ID: C26700

Amount of Each Receipt this Period
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 8265 SW Ernst Rd

City State Zip Code
Portland OR 97225

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 26 / 2006

Transaction ID: C27038

Amount of Each Receipt this Period
200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Douglas D. Kahle

Mailing Address 1434 NW Benfield Dr.

City State Zip Code
Cedar Mill OR 97229-8439

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

Name of Employer n/a Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 05 / 2006

Transaction ID: C26955

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 24 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. Ms. Patricia Smith Keerins | | Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 2 / 2 0 0 6 |
| Mailing Address 12195 SW 121st Ave | | Transaction ID: C26704 |
| City Tigard State OR Zip Code 97223-3124 | Amount of Each Receipt this Period 20.00 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer N/A Occupation Retired Deputy US Marshal | Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Election Cycle-to-Date ▼ 470.00 | | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Ms. Patricia Smith Keerins | | Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 1 / 2 0 0 6 |
| Mailing Address 12195 SW 121st Ave | | Transaction ID: C26854 |
| City Tigard State OR Zip Code 97223-3124 | Amount of Each Receipt this Period 100.00 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer N/A Occupation Retired Deputy US Marshal | Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Election Cycle-to-Date ▼ 470.00 | | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Thomas S. Kim | | Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 3 0 / 2 0 0 6 |
| Mailing Address 1660 L Street, NW Suite504 | | Transaction ID: C27252 |
| City Washington State DC Zip Code 20036 | Amount of Each Receipt this Period 250.00 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer Scribe Strategies & Advisors Occupation Sr. VP | Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Election Cycle-to-Date ▼ 250.00 | | |

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional) | 370.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 25 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

A. Full Name (Last, First, Middle Initial)
Sung-Tao Ko

Mailing Address 42 Baybrook Ln

City State Zip Code
Oak Brook IL 60521

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

Name of Employer Ko Surgical Associate, P.-C.
Occupation Physician

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 18 / 2006

Transaction ID: C27012

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Dr. Blaine Kozak

Mailing Address 4522 SW Greenhills Way

City State Zip Code
Portland OR 97221

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

Name of Employer Radiology Consultants
Occupation Physician

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 26 / 2006

Transaction ID: C27037

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 624 Hedwig St.

City State Zip Code
Houston TX 77024

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

Name of Employer IPSI
Occupation Engineer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
450.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 20 / 2006

Transaction ID: C26655

Amount of Each Receipt this Period
150.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1650.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 26 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

A. Full Name (Last, First, Middle Initial)
J.C. Kuo

Mailing Address 624 Hedwig St.

City State Zip Code
Houston TX 77024

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

Name of Employer IPSI Occupation Engineer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 20 / 2006

Transaction ID: C26659

Amount of Each Receipt this Period
200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Yoshio Kurosaki

Mailing Address 2034 SW Edgewood Rd.

City State Zip Code
Portland OR 97201

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

Name of Employer Summit Properties Occupation Executive/Pres.

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 26 / 2006

Transaction ID: C27033

Amount of Each Receipt this Period
750.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 396 Washington St.
Box 307

City State Zip Code
Wellesley MA 02481

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

Name of Employer Romel Enterprises, LLC Occupation information requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 26 / 2006

Transaction ID: C26903

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1950.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 27 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

A. Full Name (Last, First, Middle Initial)
Marcus Lampros

Mailing Address 1740 SW Elizabeth St.

City Portland State OR Zip Code 97201

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

Name of Employer Lampros Steel Occupation Vice President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 390.00

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

Transaction ID: C27076

Amount of Each Receipt this Period
 150.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Allan H. Larsen

Mailing Address P.O. Box 637

City McMinnville State OR Zip Code 97128

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

Name of Employer Larsen Motors/self Occupation owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 8 / 1 9 / 2 0 0 6

Transaction ID: C26824

Amount of Each Receipt this Period
 25.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Lily Chen Lee

Mailing Address 826 Merrick

City Sugar Land State TX Zip Code 77478

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 7 / 2 0 / 2 0 0 6

Transaction ID: C26672

Amount of Each Receipt this Period
 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional) | 675.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 28 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) A. Yamei Lee | | Date of Receipt M M / D D / Y Y Y Y 09 / 05 / 2006 | |
| Mailing Address 132 Isabella Ave. | | Transaction ID: C26971 | |
| City State Zip Code Atherton CA 94027 | | Amount of Each Receipt this Period 200.00 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Occupation Coldwell Banker Real Estate Agent | | | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 800.00 | |

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) B. Michael Leland | | Date of Receipt M M / D D / Y Y Y Y 08 / 16 / 2006 | |
| Mailing Address 12250 SW Garden Pl. | | Transaction ID: C26922 | |
| City State Zip Code Portland OR 97223 | | Amount of Each Receipt this Period 200.00 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Occupation Northwest Occupational Medicine Psychologist | | | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 400.00 | |

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) C. Kenneth Li | | Date of Receipt M M / D D / Y Y Y Y 07 / 20 / 2006 | |
| Mailing Address 6918 Corporate #A-5 | | Transaction ID: C26671 | |
| City State Zip Code Houston TX 77036 | | Amount of Each Receipt this Period 500.00 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Occupation Century 21 Southwest Broker | | | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 1000.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional) | 900.00 |
| TOTAL This Period (last page this line number only) | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 29 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | | |
|---|-------------------------------------|---|--|
| A. Full Name (Last, First, Middle Initial) Louis Lien | | Date of Receipt M M / D D / Y Y Y Y 07 / 20 / 2006 | |
| Mailing Address 133 Whipple Dr. | | Transaction ID: C26673 | |
| City Bellaire | State TX | Amount of Each Receipt this Period 1000.00 | |
| Zip Code 77401-5338 | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer USA Sports, Inc. | Occupation President/Owner | | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 3000.00 | | |

| | | | |
|---|-------------------------------------|---|--|
| B. Full Name (Last, First, Middle Initial) Dr. Jiin T. Lin | | Date of Receipt M M / D D / Y Y Y Y 07 / 17 / 2006 | |
| Mailing Address 39271 Mission Blvd., Ste 205 | | Transaction ID: C26613 | |
| City Fremont | State CA | Amount of Each Receipt this Period 500.00 | |
| Zip Code 94539 | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Self | Occupation Physician | | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1700.00 | | |

| | | | |
|---|------------------------------------|---|--|
| C. Full Name (Last, First, Middle Initial) Nan-jae Lin | | Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2006 | |
| Mailing Address 6 Shea Circle | | Transaction ID: C27098 | |
| City Burlington | State MA | Amount of Each Receipt this Period 100.00 | |
| Zip Code 01803 | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer n/a | Occupation retired | | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 350.00 | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) | 1600.00 |
| TOTAL This Period (last page this line number only) | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 30 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

A. Full Name (Last, First, Middle Initial)
Ching Tsan Lo

Mailing Address 14006 Barnhart Blvd.

City State Zip Code
Houston TX 77077-1920

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 20 / 2006

Transaction ID: C26660

Amount of Each Receipt this Period
200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Ming-Chung Lo

Mailing Address 5318 Sunbright Ct.

City State Zip Code
Houston TX 77041

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

Name of Employer Houston Import and Export, Inc. Occupation Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 20 / 2006

Transaction ID: C26662

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mei Yun Chen Luang

Mailing Address 16711 Southern Oaks Dr.

City State Zip Code
Houston TX 77068

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 20 / 2006

Transaction ID: C26661

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1200.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 31 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|---|
| A. Full Name (Last, First, Middle Initial) David Lum Mailing Address 284 W Irving Ave City Astoria State OR Zip Code 97103 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 1 / 2 0 0 6 Transaction ID: C26862 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer Lum's Auto Center Occupation Owner Receipt For: 2006 Election Cycle-to-Date <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00 | | |

| | | |
|--|--|---|
| B. Full Name (Last, First, Middle Initial) Anthony Ma Mailing Address 2042 Oro Dr City Fremont State CA Zip Code 94539 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6 Transaction ID: C26745 Amount of Each Receipt this Period 300.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer Lockheed Martin Occupation Software Engineer Receipt For: 2006 Election Cycle-to-Date <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 300.00 | | |

| | | |
|--|--|---|
| C. Full Name (Last, First, Middle Initial) David W. MacFarlane Mailing Address 2545 SW Terwilliger Blvd, #1010 City Portland State OR Zip Code 97201-6311 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 6 Transaction ID: C27045 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer n/a Occupation Retired Receipt For: 2006 Election Cycle-to-Date <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1575.00 | | |

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 1050.00 |
| TOTAL This Period (last page this line number only) | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 32 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

A. Full Name (Last, First, Middle Initial)
L. Douglas Marsh

Mailing Address 3905 SW Sweetbriar Drive

City State Zip Code
Portland OR 97221

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

Name of Employer self-employed Occupation physician

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 26 / 2006

Transaction ID: C27051

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Scott A. McCorkle

Mailing Address PO Box 270

City State Zip Code
Astoria OR 97103

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

Name of Employer n/a Occupation volunteer

Receipt For: 1998
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 28 / 2006

Transaction ID: C27101

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Hon. Winthrop L. McCormack

Mailing Address 11878 SW Riverwood Rd

City State Zip Code
Portland OR 97219-8454

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

Name of Employer McCormack Communications Occupation Publisher

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 02 / 2006

Transaction ID: C26688

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1350.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 33 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

A. Full Name (Last, First, Middle Initial)
Jon A McWilliams

Mailing Address 1620 SW Huntington Ave.

City State Zip Code
Portland OR 97225

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

Name of Employer n/a Occupation retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 08 / 2006

Transaction ID: C26779

Amount of Each Receipt this Period
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Eric Merk

Mailing Address 1801 NW Pentland St.

City State Zip Code
Portland OR 97229

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

Name of Employer InSport International Inc. Occupation CEO and President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1850.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: C27225

Amount of Each Receipt this Period
750.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 31 West 76th St

City State Zip Code
New York NY 10023

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

Name of Employer Simpson Thatcher Bartlett Occupation Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 05 / 2006

Transaction ID: C26977

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1050.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 34 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|---|--|--|
| A. Full Name (Last, First, Middle Initial) Ivon Miller Mailing Address PO Box 355 City State Zip Code Dundee OR 97115 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 4 / 2 0 0 6 Transaction ID: C26890 Amount of Each Receipt this Period 50.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer Occupation City of Dundee City Councilor Receipt For: 2006 Election Cycle-to-Date <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00 | | |

| | | |
|--|--|---|
| B. Full Name (Last, First, Middle Initial) John T. Montague Mailing Address 2951 NW Quimby City State Zip Code Portland OR 97210 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6 Transaction ID: C26917 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer Occupation N/A Retired Receipt For: 2006 Election Cycle-to-Date <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2600.00 | | |

| | | |
|--|--|---|
| C. Full Name (Last, First, Middle Initial) Gregory R. Mowe Mailing Address 7435 SE 19th Ave City State Zip Code Portland OR 97202 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6 Transaction ID: C27091 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer Occupation Steel Rives LLP Attorney Receipt For: 2006 Election Cycle-to-Date <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 750.00 | | |

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional) | 800.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 35 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

A. Full Name (Last, First, Middle Initial)
Deborah Murdock

Mailing Address 2328 NE Weidler

City State Zip Code
Portland OR 97232

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

Name of Employer Occupation
Portland State University Administrator

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt
MM / DD / YYYY
08 / 18 / 2006

Transaction ID: C26816

Amount of Each Receipt this Period
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
William Neuhauser

Mailing Address 19075 NE Woodland Loop Rd

City State Zip Code
Yamhill OR 97148

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

Name of Employer Occupation
FBR CoMotion Venture Capital Managing Partner

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 446.00

Date of Receipt
MM / DD / YYYY
09 / 28 / 2006

Transaction ID: C27131

Amount of Each Receipt this Period
96.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 50 SW Condolea Ct.

City State Zip Code
Lake Oswego OR 97035

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

Name of Employer Occupation
n/a retired

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
MM / DD / YYYY
09 / 28 / 2006

Transaction ID: C27108

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional) | 246.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 36 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

A. Full Name (Last, First, Middle Initial)
Michael C. Olsen

Mailing Address 2060 Valhalla St

City Eugene State OR Zip Code 97401

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

Name of Employer NA Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 2 9 / 2 0 0 6

Transaction ID: C26931

Amount of Each Receipt this Period
 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Stephen J. Packer

Mailing Address 21355 SW Hillsboro Hwy

City Newberg State OR Zip Code 97132-9413

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

Name of Employer N/A Occupation Retired from Intel

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1750.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 1 8 / 2 0 0 6

Transaction ID: C26802

Amount of Each Receipt this Period
 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 4125 SW Westdale Dr.

City Portland State OR Zip Code 97221

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

Name of Employer Beaverton Lodge Retirement Residen Occupation Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

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

Transaction ID: C27049

Amount of Each Receipt this Period
 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional) | 750.00 |
| TOTAL This Period (last page this line number only) | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 37 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

A. Full Name (Last, First, Middle Initial)
Michael Paul

Mailing Address 2900 NE BRAZEE CT

City State Zip Code
Portland OR 97212

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

Name of Employer Occupation
Centennial Bankcorp Executive Vice President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 02 / 2006

Transaction ID: C26684

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Roger Peng

Mailing Address 10740 Orline Ct

City State Zip Code
Cupertino CA 95014

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

Name of Employer Occupation
Fujitsu Engineer/Manager

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 18 / 2006

Transaction ID: C27010

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Benjamin Henry Pubols, Jr

Mailing Address 8934 NW Rockwell Ln

City State Zip Code
Portland OR 97229

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2006

Transaction ID: C27109

Amount of Each Receipt this Period
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **800.00**

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

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 38 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

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

Mailing Address 31 Skyline Ave

City Astoria State OR Zip Code 97103

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

Name of Employer Tongue Point Job Corps Occupation Director

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 21 / 2006

Transaction ID: C26870

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Judy Doone Quackenbush

Mailing Address 16195 NE Leander Dr.

City Sherwood State OR Zip Code 97140

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

Name of Employer Quackenbush and Doone Occupation Client Services

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 18 / 2006

Transaction ID: C26810

Amount of Each Receipt this Period
75.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Merrit L. Quarum

Mailing Address 3533 NE Klickitat St

City Portland State OR Zip Code 97212

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

Name of Employer Qmedtrix Occupation CEO

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2006

Transaction ID: C27090

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1175.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 39 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

A. Full Name (Last, First, Middle Initial)
David Judson Randall

Mailing Address 1647 NW Midlake Lane

City State Zip Code
Beaverton OR 97006

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

Name of Employer PSU Occupation Professor--Student Publications

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1750.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: C27164

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
George C. Reinmiller

Mailing Address 521 SW Clay, Ste 200

City State Zip Code
Portland OR 97201

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

Name of Employer Reinmiller Properties Occupation Property Mgr.

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1300.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 02 / 2006

Transaction ID: C26698

Amount of Each Receipt this Period
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 225 Evergreen Dr.

City State Zip Code
Kentfield CA 94904

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

Name of Employer CEO Occupation Transportation Agent Grid

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 26 / 2006

Transaction ID: C26905

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1550.00

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

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 40 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

A. Full Name (Last, First, Middle Initial)
George D. Rives

Mailing Address 2545 SW Terwilliger #721

City Portland State OR Zip Code 97201

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

Name of Employer N/A Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 2 4 / 2 0 0 6

Transaction ID: C26912

Amount of Each Receipt this Period
 100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Steven B. Rupp

Mailing Address 1301 NE Hwy 99W,

City McMinnville State OR Zip Code 97128

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

Name of Employer n/a Occupation retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1550.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 0 3 / 2 0 0 6

Transaction ID: C26747

Amount of Each Receipt this Period
 50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Aubrey Allan Russell

Mailing Address 2741 SW Old Orchard Rd.

City Portland State OR Zip Code 97201

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

Name of Employer self Occupation attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 9 / 3 0 / 2 0 0 6

Transaction ID: C27246

Amount of Each Receipt this Period
 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional) | 650.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 41 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

A. Full Name (Last, First, Middle Initial)
A. Cap Saheki

Mailing Address 421 SW 6th Ave., Suite 1308

City State Zip Code
Portland OR 97204-1612

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

Name of Employer Occupation
Fibrex Corp President

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1950.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: C27241

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 4006 SW Downsview Ct

City State Zip Code
Portland OR 97221

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

Name of Employer Occupation
Bateman Seidel Miner Blomgren Chel Attorney

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 550.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2006

Transaction ID: C27096

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Scott D Sanders

Mailing Address 13143 SW Katherine St

City State Zip Code
Tigard OR 97223

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

Name of Employer Occupation
Manage Inc. IS Programmer/Analyst

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 13 / 2006

Transaction ID: C26782

Amount of Each Receipt this Period
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional) | 650.00 |
| TOTAL This Period (last page this line number only) | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 42 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

A. Full Name (Last, First, Middle Initial)
Grace Shieh

Mailing Address 7726 Moondance

City State Zip Code
Houston TX 77071

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

Name of Employer Self Occupation CPA

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2350.00

Date of Receipt
MM / DD / YYYY
07 / 20 / 2006

Transaction ID: C26676

Amount of Each Receipt this Period
150.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Stephen Silberstein

Mailing Address 29 Eucalyptus Rd

City State Zip Code
Belvedere CA 94920

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

Name of Employer n/a Occupation retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2600.00

Date of Receipt
MM / DD / YYYY
09 / 05 / 2006

Transaction ID: C26956

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1996 8th St

City State Zip Code
Springfield OR 97477

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

Name of Employer n/a Occupation retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
08 / 22 / 2006

Transaction ID: C26884

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional) | 750.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 43 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

A. Full Name (Last, First, Middle Initial)
Craig Slayen

Mailing Address PO Box 221

City State Zip Code
Ross CA 94957

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

Name of Employer Occupation
Winship Park Asset Management information requested

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

1000.00

Date of Receipt
MM / DD / YYYY
08 / 26 / 2006

Transaction ID: C26902

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Bruce D. Stark

Mailing Address 3770 Onyx St

City State Zip Code
Eugene OR 97405

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

Name of Employer Occupation
n/a retired

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

400.00

Date of Receipt
MM / DD / YYYY
08 / 19 / 2006

Transaction ID: C26846

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 2545 SW Terwilliger Blvd, #902

City State Zip Code
Portland OR 97201-5154

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

Name of Employer Occupation
N/A Retired

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

850.00

Date of Receipt
MM / DD / YYYY
09 / 28 / 2006

Transaction ID: C27160

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 1350.00 |
| TOTAL This Period (last page this line number only) | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 44 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) A. Patricia Straub | | Date of Receipt M M / D D / Y Y Y Y 09 / 05 / 2006 | |
| Mailing Address 1552 C St | | Transaction ID: C26951 | |
| City State Zip Code Springfield OR 97477-4970 | | Amount of Each Receipt this Period 100.00 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer N/A Occupation Retired | | | |
| Receipt For: 1998 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 300.00 | |

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) B. Mark Sugarman | | Date of Receipt M M / D D / Y Y Y Y 08 / 26 / 2006 | |
| Mailing Address 2201 Pacific Avenue #503 | | Transaction ID: C26901 | |
| City State Zip Code San Francisco CA 94115 | | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Self Occupation information requested | | | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 1000.00 | |

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) C. Ms. Minly Sung | | Date of Receipt M M / D D / Y Y Y Y 07 / 20 / 2006 | |
| Mailing Address 61 Inverrary Ln. | | Transaction ID: C26669 | |
| City State Zip Code Sugar Land TX 77479 | | Amount of Each Receipt this Period 500.00 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Polo-Ray Sunglass Occupation Wholesaler | | | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 1000.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) | 1600.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 45 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

A. Full Name (Last, First, Middle Initial)
Nancy Shun--Shan Ko Tai

Mailing Address 14 Robinwood

City State Zip Code
Houston TX 77024

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 20 / 2006

Transaction ID: C26668

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Rochelle Tarlow

Mailing Address 215 W 90th Street Apt. 7E

City State Zip Code
New York NY 10024

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

Name of Employer Cendant Corp Occupation information requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 26 / 2006

Transaction ID: C26899

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Charles S. Tauman

Mailing Address 10708 SW 11th Drive

City State Zip Code
Portland OR 97219

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

Name of Employer Self-employed Occupation Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 16 / 2006

Transaction ID: C26927

Amount of Each Receipt this Period
25.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1525.00**

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

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 46 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

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

Mailing Address 10708 SW 11th Drive

City State Zip Code
Portland OR 97219

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

Name of Employer Self-employed Occupation Attorney

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
MM / DD / YYYY
08 / 16 / 2006

Transaction ID: C26928

Amount of Each Receipt this Period
25.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Nina Teng

Mailing Address 13286 Glasgow Ct.

City State Zip Code
Saratoga CA 95070

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

Name of Employer n/a Occupation homemaker

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
MM / DD / YYYY
09 / 05 / 2006

Transaction ID: C26976

Amount of Each Receipt this Period
300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Chun Yuen Wu Tung

Mailing Address 13200 Del Monte Dr. #23E

City State Zip Code
Seal Beach CA 90740

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2006

Transaction ID: C27235

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **425.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 47 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

A. Full Name (Last, First, Middle Initial)
Cow Creek Band of Umpua Tr of Indians

Mailing Address 2371 NE Stephens Street, Suite 100

City Roseburg State OR Zip Code 97470

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

Name of Employer n/a Occupation n/a

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 30 / 2006

Transaction ID: C27221

Amount of Each Receipt this Period
 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
David Wagonfeld

Mailing Address 500 Pullman Road

City Hillsborough State CA Zip Code 94010

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

Name of Employer Standard Pacific Occupation information requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 26 / 2006

Transaction ID: C26897

Amount of Each Receipt this Period
 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Stephen S. Walters

Mailing Address 7035 NW Penridge Rd

City Portland State OR Zip Code 97229

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

Name of Employer Stoel Rives Occupation Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 26 / 2006

Transaction ID: C27036

Amount of Each Receipt this Period
 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 2500.00 |
| TOTAL This Period (last page this line number only) | |

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

| | | |
|--|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 48 / 139 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b |
| <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

A. Full Name (Last, First, Middle Initial)
Ms. Catherine Wang

Mailing Address 1545 N. Edgewood St.

City State Zip Code
Arlington VA 22201

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

Name of Employer Swidler Berlin Occupation Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: C27243

Amount of Each Receipt this Period
400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Don J. Wang

Mailing Address 9600 Bellaire Blvd.

City State Zip Code
Houston TX 77036

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

Name of Employer Metro Bank Occupation Chairman

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 20 / 2006

Transaction ID: C26665

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1000 SW Vista Ave, #1224

City State Zip Code
Portland OR 97205-1142

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

Name of Employer N/A Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

2450.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2006

Transaction ID: C27092

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1900.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 49 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | | |
|---|---|--|--|
| Full Name (Last, First, Middle Initial) A. Charles Weitzel | | Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006 | |
| Mailing Address 10264 Edgewood Drive | | Transaction ID: C26997 | |
| City State Zip Code Portland OR 97229 | Amount of Each Receipt this Period 1000.00 | | |
| FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | | |
| Name of Employer Information Requested Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Information Requested Election Cycle-to-Date ▼ 1000.00 | | |

| | | | |
|---|---|--|--|
| Full Name (Last, First, Middle Initial) B. David C. S. Weng | | Date of Receipt M M / D D / Y Y Y Y 09 / 05 / 2006 | |
| Mailing Address 1101 Di Napoli Dr. | | Transaction ID: C26968 | |
| City State Zip Code San Jose CA 95129-4014 | Amount of Each Receipt this Period 500.00 | | |
| FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | | |
| Name of Employer Innovest Capital Inv. Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation VC Election Cycle-to-Date ▼ 2000.00 | | |

| | | | |
|---|---|--|--|
| Full Name (Last, First, Middle Initial) C. Patricia Wheeler | | Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2006 | |
| Mailing Address 2944 SW Hamilton | | Transaction ID: C27126 | |
| City State Zip Code Portland OR 97201 | Amount of Each Receipt this Period 200.00 | | |
| FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | | |
| Name of Employer n/a Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Housewife Election Cycle-to-Date ▼ 300.00 | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 1700.00 |
| TOTAL This Period (last page this line number only) ▶ | _____ |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 50 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

A. Full Name (Last, First, Middle Initial)
Jeffrey B. Wihtol

Mailing Address 3501 SW Council Crest Drive

City State Zip Code
Portland OR 97201

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

Name of Employer Self Occupation
Attorney

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 26 / 2006

Transaction ID: C27035

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Butch Williams

Mailing Address 2700 NW Beuhla Vista Terrace

City State Zip Code
Portland OR 97210

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

Name of Employer self Occupation
information requested

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 03 / 2006

Transaction ID: C26750

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Ms. Margaret W. Wong

Mailing Address 3150 Chester Ave, #200

City State Zip Code
Cleveland OH 44114-4617

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

Name of Employer Wong and Associates Co LPA Occupation
Attorney

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2100.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 18 / 2006

Transaction ID: C27005

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional) | 850.00 |
| TOTAL This Period (last page this line number only) | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 51 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

A. Full Name (Last, First, Middle Initial)
Alice Wu

Mailing Address P.O. Box 11168

City State Zip Code
Oakland CA 94611

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

Name of Employer Ron Herman Landscape Architect, Inc. Occupation Landscape Architect

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2600.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2006

Transaction ID: C27095

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Chyong Shyan Wu

Mailing Address 57-08 Parsons Blvd.

City State Zip Code
Flushing NY 11365

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

Name of Employer NNT Trading Inc. Occupation Importer

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2006

Transaction ID: C27105

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 7001 Corporate Dr. #100A

City State Zip Code
Houston TX 77036

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

Name of Employer Park 8 Grand Occupation Developer

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 20 / 2006

Transaction ID: C26670

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

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

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 52 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) A. Pem Li Wu | | Date of Receipt M M / D D / Y Y Y Y 07 / 20 / 2006 |
| Mailing Address 2915 W Autumn Run Cir. | | Transaction ID: C26648 |
| City State Zip Code Sugar Land TX 77479 | Amount of Each Receipt this Period 500.00 | |
| FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Occupation Howard Johnson. Hotel Manager | Election Cycle-to-Date 1500.00 | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) B. Mr. Sheng Chyi Wu | | Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006 |
| Mailing Address 1331 Knoll Dr. | | Transaction ID: C27220 |
| City State Zip Code Oceanside CA 92054 | Amount of Each Receipt this Period 1100.00 | |
| FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Occupation Great Real Estate Co., Inc. Broker | Election Cycle-to-Date 3100.00 | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) C. Wen-Shing Wu | | Date of Receipt M M / D D / Y Y Y Y 07 / 20 / 2006 |
| Mailing Address 4802 Braeburn Dr. | | Transaction ID: C26677 |
| City State Zip Code Bellaire TX 77401 | Amount of Each Receipt this Period 500.00 | |
| FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Occupation K and J Imports Management | Election Cycle-to-Date 2500.00 | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) | 2100.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 53 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

A. Full Name (Last, First, Middle Initial)
Chao-Yuh Yang

Mailing Address 4102 Levonshire

City State Zip Code
Houston TX 77025

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

Name of Employer Occupation
Baylor College of Medicine Professor

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

300.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 20 / 2006

Transaction ID: C26650

Amount of Each Receipt this Period
200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
George C. Yang

Mailing Address 1111 Herman Dr, #17B

City State Zip Code
Houston TX 77004

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

Name of Employer Occupation
Asia Chemical Group CEO

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

3000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 17 / 2006

Transaction ID: C26618

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
L. George Yap

Mailing Address 2450 NW 76th St

City State Zip Code
Miami FL 33186

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

Name of Employer Occupation
Leasa Industries Co., Inc CEO/President

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 08 / 2006

Transaction ID: C26777

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1700.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 54 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

A. Full Name (Last, First, Middle Initial)
Patricia Yeager

Mailing Address 1105 SW Davenport St.

City Portland State OR Zip Code 97201

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

Name of Employer n/a Occupation homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 30 / 2006

Transaction ID: C27222

Amount of Each Receipt this Period
 200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Al Yee

Mailing Address 2020 N Central Ave, Room 670

City Phoenix State AZ Zip Code 85004

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

Name of Employer SAMCO Financial Services, Inc. Occupation President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 05 / 2006

Transaction ID: C26592

Amount of Each Receipt this Period
 50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 4708 Braeburn

City Bellaire State TX Zip Code 77401

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 20 / 2006

Transaction ID: C26667

Amount of Each Receipt this Period
 300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | | |
|--|---|--------|
| 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) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 55 / 139 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

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

Mailing Address 7596 Oak Shore

City State Zip Code
Portage MI 49024

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

Name of Employer Zhang & Assoc / American Express
Occupation Financial Advisor

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3100.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 26 / 2006

Transaction ID: C27031

Amount of Each Receipt this Period
1100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Lynn Zhang

Mailing Address 7595 Oak Shore

City State Zip Code
Portage MI 49024

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

Name of Employer Zhang and Assoc.
Occupation Business

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 26 / 2006

Transaction ID: C27032

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 10720 NW 66th St. #411

City State Zip Code
Doral FL 33178

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

Name of Employer Information Requested
Occupation Information Requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 19 / 2006

Transaction ID: C26837

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | |
|--|-----------------|
| SUBTOTAL of Receipts This Page (optional) | 2600.00 |
| TOTAL This Period (last page this line number only) | 65653.97 |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 56 / 139 |
| | (check only one) | |
| <input type="checkbox"/> 11a | <input checked="" type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 11d | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| <input type="checkbox"/> 13b | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) A. Democratic Congressional Campaign Committee | | Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2006 |
| Mailing Address 430 South Capitol, SE 2nd Floor | | Transaction ID: C27306 |
| City State Zip Code Washington DC 20003 | Amount of Each Receipt this Period 26.72 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) * In-Kind: fundraising services |
| Name of Employer | Occupation | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 801.10 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Democratic Congressional Campaign Committee | | Date of Receipt M M / D D / Y Y Y Y Y 08 / 31 / 2006 |
| Mailing Address 430 South Capitol, SE 2nd Floor | | Transaction ID: C27307 |
| City State Zip Code Washington DC 20003 | Amount of Each Receipt this Period 8.30 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) * In-Kind: fundraising services |
| Name of Employer | Occupation | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 801.10 | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) C. Democratic Congressional Campaign Committee | | Date of Receipt M M / D D / Y Y Y Y Y 09 / 30 / 2006 |
| Mailing Address 430 South Capitol, SE 2nd Floor | | Transaction ID: C27308 |
| City State Zip Code Washington DC 20003 | Amount of Each Receipt this Period 55.68 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) * In-Kind: fundraising services |
| Name of Employer | Occupation | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 801.10 | |

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional) | 90.70 |
| TOTAL This Period (last page this line number only) | 90.70 |

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

| | | |
|--|------------------------------|---|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 57 / 139 |
| | (check only one) | |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b |
| | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

A. Amalgamated Transit Union COPE

Full Name (Last, First, Middle Initial)
Mailing Address 5025 Wisconsin Ave, NW

City State Zip Code
Washington DC 20016-4139

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
6000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 26 / 2006

Transaction ID: C27066

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. American Bankers Association PAC

Full Name (Last, First, Middle Initial)
Mailing Address 120 Connecticut Ave, N.W.

City State Zip Code
Washington DC 20063

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 02 / 2006

Transaction ID: C26685

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. American Benefits Council PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1212 New York Ave., NW, #1250

City State Zip Code
Washington DC 20005

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: C27253

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | |
|--|----------------|
| 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)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 139
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

A. American Dental PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1111 14th Street, NW Ste. 1100
 City State Zip Code
 Washington DC 20005
 FEC ID number of contributing federal political committee. **C** C00000729
 Name of Employer Occupation
 Receipt For: 2006
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 30 / 2006
Transaction ID: C27240
 Amount of Each Receipt this Period
 2500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. American Sugar Cane League
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Drawer 938
 City State Zip Code
 Thibodaux LA 70302
 FEC ID number of contributing federal political committee. **C** C00081414
 Name of Employer Occupation
 Receipt For: 2006
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 21 / 2006
Transaction ID: C26871
 Amount of Each Receipt this Period
 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. ATLA PAC (Association of Trial Lawyers of America)
 Full Name (Last, First, Middle Initial)
 Mailing Address 1050 31st Street, NW
 City State Zip Code
 Washington DC 20007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2006
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 30 / 2006
Transaction ID: C27260
 Amount of Each Receipt this Period
 3000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **6000.00**
TOTAL This Period (last page this line number only) ►

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

| | | |
|--|------------------------------|---|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 59 / 139 |
| | (check only one) | |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b |
| | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

A. Full Name (Last, First, Middle Initial)
Blank Rome LLP PAC

Mailing Address 1 Logan Square

City Philadelphia State PA Zip Code 19103

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2006

Transaction ID: C27199

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 805 Fifteenth Street, NW

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4000.00

Date of Receipt
MM / DD / YYYY
08 / 08 / 2006

Transaction ID: C26756

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 805 Fifteenth Street, NW

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4000.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2006

Transaction ID: C27195

Amount of Each Receipt this Period
2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 4000.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|---------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 60 / 139 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d | |
| | <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

A. Full Name (Last, First, Middle Initial)
DamilerChrysler Corp. PAC

Mailing Address 1401 H St. NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00043687

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2006

Transaction ID: C27197

Amount of Each Receipt this Period
 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Dean Foods Company PAC

Mailing Address 2515 McKinney Ave. #1200

City Dallas State TX Zip Code 75201

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2006

Transaction ID: C27296

Amount of Each Receipt this Period
 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Employees of Northrop Grumman Corporation PAC

Mailing Address 1840 Century Park East

City Los Angeles State CA Zip Code 90067

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 21 / 2006

Transaction ID: C26875

Amount of Each Receipt this Period
 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | | |
|--|---|---------|
| 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) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 61 / 139 |
| | (check only one) | |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b |
| | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

A. Full Name (Last, First, Middle Initial)
FMR Corp. PAC

Mailing Address 82 Devonshire Street

City State Zip Code
Boston MA 02109

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 18 / 2006

Transaction ID: C27007

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Foley & Lardner Political Fund, Inc.

Mailing Address 3000 K Street NW
Ste 500

City State Zip Code
Washington DC 20007

FEC ID number of contributing federal political committee. **C** C00105338

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: C27255

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Friends NAPUS PAC For Postmasters

Mailing Address 8 Herbert Street

City State Zip Code
Alexandria VA 22305-2600

FEC ID number of contributing federal political committee. **C** C00100404

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: C27239

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 62 / 139 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d | |
| | <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

A. Full Name (Last, First, Middle Initial)
General Motors PAC

Mailing Address 300 Renaissance Center
PO Box 300

City State Zip Code
Detroit MI 48265

FEC ID number of contributing federal political committee. **C** C00076810

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 28 / 2006

Transaction ID: C27093

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Genesee & Wyoming Inc. PAC

Mailing Address 204 N. George St, Ste 230

City State Zip Code
York PA 17401

FEC ID number of contributing federal political committee. **C** C00289058

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2006

Transaction ID: C27251

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Hemcon Inc. Political Action Committee

Mailing Address 10575 SW Cascade Ave. #130

City State Zip Code
Portland OR 97223

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4500.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 17 / 2006

Transaction ID: C26630

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | | |
|--|---|---------|
| 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) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 63 / 139 (check only one) <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15 |
|--|--|

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | | | | | | | | | | | | | | | | | | | | | | |
|---|---|---|---------|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|--|---------|
| A. Full Name (Last, First, Middle Initial) Hemcon Inc. Political Action Committee Mailing Address 10575 SW Cascade Ave. #130 City State Zip Code Portland OR 97223 FEC ID number of contributing federal political committee. C | Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: C26815 Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td>1500.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 8 | | 1 | 8 | | 2 | 0 | 0 | 6 | | 1500.00 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | |
| 0 | 8 | | 1 | 8 | | 2 | 0 | 0 | 6 | | | | | | | | | | | | | | |
| | 1500.00 | | | | | | | | | | | | | | | | | | | | | | |
| Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td>4500.00</td> </tr> </table> | | 4500.00 | | | | | | | | | | | | | | | | | | | | |
| | 4500.00 | | | | | | | | | | | | | | | | | | | | | | |

| | | | | | | | | | | | | | | | | | | | | | | | |
|--|---|---|---------|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|--|---------|
| B. Full Name (Last, First, Middle Initial) International Brotherhood of Painters & Allied Trd Mailing Address 2706 Black Lake Place City State Zip Code Philadelphia PA 19154 FEC ID number of contributing federal political committee. C | Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: C26959 Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td>1500.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 9 | | 0 | 5 | | 2 | 0 | 0 | 6 | | 1500.00 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | |
| 0 | 9 | | 0 | 5 | | 2 | 0 | 0 | 6 | | | | | | | | | | | | | | |
| | 1500.00 | | | | | | | | | | | | | | | | | | | | | | |
| Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td>1500.00</td> </tr> </table> | | 1500.00 | | | | | | | | | | | | | | | | | | | | |
| | 1500.00 | | | | | | | | | | | | | | | | | | | | | | |

| | | | | | | | | | | | | | | | | | | | | | | | |
|--|---|---|---------|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|--|---------|
| C. Full Name (Last, First, Middle Initial) Investment Company Institute PAC Mailing Address 1401 H St. NW 12th Floor City State Zip Code Washington DC 20005 FEC ID number of contributing federal political committee. C | Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: C27256 Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td>1000.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 9 | | 3 | 0 | | 2 | 0 | 0 | 6 | | 1000.00 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | |
| 0 | 9 | | 3 | 0 | | 2 | 0 | 0 | 6 | | | | | | | | | | | | | | |
| | 1000.00 | | | | | | | | | | | | | | | | | | | | | | |
| Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td>6500.00</td> </tr> </table> | | 6500.00 | | | | | | | | | | | | | | | | | | | | |
| | 6500.00 | | | | | | | | | | | | | | | | | | | | | | |

| | | | |
|--|---|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | <table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td>4000.00</td> </tr> </table> | | 4000.00 |
| | 4000.00 | | |
| TOTAL This Period (last page this line number only) ▶ | <table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td></td> </tr> </table> | | |
| | | | |

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

| | | |
|--|---|---------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 64 / 139 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d | |
| | <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|---|---|---|
| A. Full Name (Last, First, Middle Initial) Lincoln Natl Corp Mailing Address P.O. Box 1110 City Fort Wayne State IN Zip Code 46801 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006 Transaction ID: C27198 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Election Cycle-to-Date ▼ 2000.00 | |

| | | |
|--|--|--|
| B. Full Name (Last, First, Middle Initial) Mass Mutual Life Insurance Mailing Address 801 Penn. Ave. NW Suite 250 City Washington State DC Zip Code 20004 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006 Transaction ID: C27261 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Election Cycle-to-Date ▼ 500.00 | |

| | | |
|--|---|---|
| C. Full Name (Last, First, Middle Initial) National Air Traffic Controllers Association PAC Mailing Address 1325 Massachusetts Ave., NW City Washington State DC Zip Code 92005 FEC ID number of contributing federal political committee. C C00238725 | | Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006 Transaction ID: C27258 Amount of Each Receipt this Period 2500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Election Cycle-to-Date ▼ 6000.00 | |

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 4000.00 |
| TOTAL This Period (last page this line number only) | |

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

| | | |
|--|------------------------------|---|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 65 / 139 |
| | (check only one) | |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b |
| | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

A. Full Name (Last, First, Middle Initial)
National Asian American Political Empowerment Fund

Mailing Address 800 7th St., NW, Suite 305

City Washington State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 | | 3 | 0 | | 2 | 0 | 0 | 6 |

Transaction ID: C27293

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
National Weather Service Employees PAC

Mailing Address 5335 Wisconsin Ave NW Suite 440

City Washington State DC Zip Code 20015

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 | | 3 | 0 | | 2 | 0 | 0 | 6 |

Transaction ID: C27259

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Nat'l Community Pharmacists Assn

Mailing Address 205 Daingerfield Rd.

City Alexandria State VA Zip Code 22314

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 | | 3 | 0 | | 2 | 0 | 0 | 6 |

Transaction ID: C27254

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 2500.00 |
| TOTAL This Period (last page this line number only) | |

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

| | | |
|--|---|---------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 66 / 139 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d | |
| | <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. NCEC-National Committee for an Effective Congress | | Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 6 / 2 0 0 6 |
| Mailing Address 122 C Street, NW, Suite 650 | | Transaction ID: C27567 |
| City Washington State DC Zip Code 20001 | FEC ID number of contributing federal political committee. C C00003558 | Amount of Each Receipt this Period 2500.00 |
| Name of Employer Occupation | Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Election Cycle-to-Date ▼ 3000.00 | * In-Kind: electoral targeting | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) B. NCEC-National Committee for an Effective Congress | | Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 6 / 2 0 0 6 |
| Mailing Address 122 C Street, NW, Suite 650 | | Transaction ID: C27568 |
| City Washington State DC Zip Code 20001 | FEC ID number of contributing federal political committee. C C00003558 | Amount of Each Receipt this Period 500.00 |
| Name of Employer Occupation | Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Election Cycle-to-Date ▼ 3000.00 | * In-Kind: electoral targeting | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) C. Oppenheimer Funds, Inc. PAC | | Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 3 0 / 2 0 0 6 |
| Mailing Address 498 7th Ave, 10th Floor | | Transaction ID: C27257 |
| City New York State NY Zip Code 10018 | FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 2000.00 |
| Name of Employer Occupation | Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Election Cycle-to-Date ▼ 4000.00 | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) | 5000.00 |
| TOTAL This Period (last page this line number only) | |

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

| | | |
|--|------------------------------|---|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 67 / 139 |
| | (check only one) | |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b |
| | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Pacific Marketing Group PAC | | Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 0 6 |
| Mailing Address 920 SW 6th Ste 1250 | | Transaction ID: C26682 |
| City State Zip Code Portland OR 97204 | Amount of Each Receipt this Period 250.00 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer | Occupation | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Pacific Marketing Group PAC | | Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 1 / 2 0 0 6 |
| Mailing Address 920 SW 6th Ste 1250 | | Transaction ID: C26872 |
| City State Zip Code Portland OR 97204 | Amount of Each Receipt this Period 250.00 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer | Occupation | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. PROFESSIONAL AIRWAYS SYSTEMS SPECIALISTS (AFL-CIO) DBA PASS PAC | | Date of Receipt M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 6 |
| Mailing Address 1150 17TH STREET NW SUITE 702 | | Transaction ID: C27196 |
| City State Zip Code WASHINGTON DC 20036 | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C C00286807 | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer | Occupation | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 1500.00 |
| TOTAL This Period (last page this line number only) ▶ | _____ |

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

| | | |
|--|---|---------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 68 / 139 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d | |
| | <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | | | | | | | | | | | | | | | | | | | | | | |
|--|---|--|---|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|---------|
| A. Full Name (Last, First, Middle Initial) Realtors PAC Mailing Address 430 North Michigan Ave. City Chicago State IL Zip Code 60611 FEC ID number of contributing federal political committee. C | | Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: C27064 Amount of Each Receipt this Period <table border="1"> <tr> <td>5000.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 9 | | 2 | 6 | | 2 | 0 | 0 | 6 | 5000.00 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | |
| 0 | 9 | | 2 | 6 | | 2 | 0 | 0 | 6 | | | | | | | | | | | | | | |
| 5000.00 | | | | | | | | | | | | | | | | | | | | | | | |
| Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <table border="1"> <tr> <td>10000.00</td> </tr> </table> | | 10000.00 | | | | | | | | | | | | | | | | | | | | | |
| 10000.00 | | | | | | | | | | | | | | | | | | | | | | | |

| | | | | | | | | | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|--------|
| B. Full Name (Last, First, Middle Initial) Regence BluePAC Mailing Address P.O. Box 1271 City Portland State OR Zip Code 97207 FEC ID number of contributing federal political committee. C | | Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: C26938 Amount of Each Receipt this Period <table border="1"> <tr> <td>500.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 8 | | 2 | 9 | | 2 | 0 | 0 | 6 | 500.00 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | |
| 0 | 8 | | 2 | 9 | | 2 | 0 | 0 | 6 | | | | | | | | | | | | | | |
| 500.00 | | | | | | | | | | | | | | | | | | | | | | | |
| Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <table border="1"> <tr> <td>1500.00</td> </tr> </table> | | 1500.00 | | | | | | | | | | | | | | | | | | | | | |
| 1500.00 | | | | | | | | | | | | | | | | | | | | | | | |

| | | | | | | | | | | | | | | | | | | | | | | | |
|---|---|--|---|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|---------|
| C. Full Name (Last, First, Middle Initial) SEIU-COPE US Division Mailing Address 1313 L Street, NW City Washington State DC Zip Code 20005 FEC ID number of contributing federal political committee. C C00004036 | | Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: C26679 Amount of Each Receipt this Period <table border="1"> <tr> <td>1500.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 8 | | 0 | 1 | | 2 | 0 | 0 | 6 | 1500.00 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | |
| 0 | 8 | | 0 | 1 | | 2 | 0 | 0 | 6 | | | | | | | | | | | | | | |
| 1500.00 | | | | | | | | | | | | | | | | | | | | | | | |
| Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <table border="1"> <tr> <td>3500.00</td> </tr> </table> | | 3500.00 | | | | | | | | | | | | | | | | | | | | | |
| 3500.00 | | | | | | | | | | | | | | | | | | | | | | | |

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 7000.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|---------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 69 / 139 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d | |
| | <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

A. Full Name (Last, First, Middle Initial)
SEIU-COPE US Division

Mailing Address 1313 L Street, NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00004036

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 30 / 2006

Transaction ID: C27294

Amount of Each Receipt this Period
 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Sierra Club Political Committee

Mailing Address 408 C St. NE

City Washington State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C** C00135368

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 10.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 10 / 2006

Transaction ID: C27569

Amount of Each Receipt this Period
 10.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* In-Kind: website listing

C. Full Name (Last, First, Middle Initial)
The NEA Fund for Children & Public Education

Mailing Address National Education Association
1201 16th Street, NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00003251

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 17 / 2006

Transaction ID: C26617

Amount of Each Receipt this Period
 5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 6010.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
|--|------------------------------|---|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 70 / 139 |
| | (check only one) | |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b |
| | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

A. Full Name (Last, First, Middle Initial)
U.S. Bancorp PAC

Mailing Address 111 SW Fifth, Suite 400

City State Zip Code
Portland OR 97204

FEC ID number of contributing federal political committee. **C** C00018036

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 02 / 2006

Transaction ID: C26683

Amount of Each Receipt this Period
1500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
UAW V CAP

Mailing Address 8000 E. Jefferson Ave.

City State Zip Code
Detroit MI 48214-3963

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
6000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 21 / 2006

Transaction ID: C26873

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
UnitedHealth Group Inc, PAC

Mailing Address 1225 New York Ave., NW #475

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00274431

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 02 / 2006

Transaction ID: C26680

Amount of Each Receipt this Period
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | | |
|--|---|---------|
| 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)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 71 / 139

(check only one)

11a 11b 11c 11d

12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

A. Full Name (Last, First, Middle Initial)
Wells Fargo Employee PAC

Mailing Address Sixth and Marquette

City State Zip Code
Minneapolis MN 55479

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
08 / 21 / 2006

Transaction ID: C26874

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | |
|--|--|
| SUBTOTAL of Receipts This Page (optional) | 1000.00 |
| TOTAL This Period (last page this line number only) | 57510.00 |

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

| | | |
|--|--|---------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 72 / 139 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d | |
| | <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input checked="" type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Bank of America Mailing Address 1001 SW 5th Ave City State Zip Code Portland OR 97205 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2006 Transaction ID: C27297 Amount of Each Receipt this Period 291.39 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) * interest |
| Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1256.00 | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Bank of America Mailing Address 1001 SW 5th Ave City State Zip Code Portland OR 97205 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 08 / 31 / 2006 Transaction ID: C27298 Amount of Each Receipt this Period 294.99 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) * interest |
| Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1256.00 | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Bank of America Mailing Address 1001 SW 5th Ave City State Zip Code Portland OR 97205 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006 Transaction ID: C27299 Amount of Each Receipt this Period 285.48 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) * interest |
| Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1256.00 | | |

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional) | 871.86 |
| TOTAL This Period (last page this line number only) | |

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

| | |
|--|---|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 73 / 139 |
| | (check only one) |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | <input checked="" type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Bank of Astoria | | Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 1 / 2 0 0 6 |
| Mailing Address PO Box 28 | | Transaction ID: C27302 |
| City Astoria State OR Zip Code 97103 | Amount of Each Receipt this Period 932.60 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) * interest |
| Name of Employer | Occupation | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 932.60 | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Capital Pacific Bank | | Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 3 1 / 2 0 0 6 |
| Mailing Address 805 SW Broadway, Ste. 780 | | Transaction ID: C27303 |
| City Portland State OR Zip Code 97205 | Amount of Each Receipt this Period 321.09 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) * interest |
| Name of Employer | Occupation | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1428.52 | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Capital Pacific Bank | | Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 3 1 / 2 0 0 6 |
| Mailing Address 805 SW Broadway, Ste. 780 | | Transaction ID: C27304 |
| City Portland State OR Zip Code 97205 | Amount of Each Receipt this Period 342.88 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) * interest |
| Name of Employer | Occupation | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1428.52 | |

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|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 1596.57 |
| TOTAL This Period (last page this line number only) ▶ | _____ |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|---------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 74 / 139 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input checked="" type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) A. Capital Pacific Bank | | Date of Receipt M M / D D / Y Y Y Y Y 09 / 29 / 2006 | |
| Mailing Address 805 SW Broadway, Ste. 780 | | Transaction ID: C27305 | |
| City State Zip Code Portland OR 97205 | | Amount of Each Receipt this Period 321.82 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Occupation | | * interest | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 1428.52 | |

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) B. Columbia Community Bank | | Date of Receipt M M / D D / Y Y Y Y Y 08 / 17 / 2006 | |
| Mailing Address 314 E. main St. | | Transaction ID: C27300 | |
| City State Zip Code Hillsboro OR 97123 | | Amount of Each Receipt this Period 1260.27 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Occupation | | * interest | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 1260.27 | |

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) C. First Federal Savings | | Date of Receipt M M / D D / Y Y Y Y Y 09 / 30 / 2006 | |
| Mailing Address 118 NE Third | | Transaction ID: C27301 | |
| City State Zip Code McMinnville OR 97128 | | Amount of Each Receipt this Period 1396.25 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Occupation | | * interest | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 1396.25 | |

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 2978.34 |
| TOTAL This Period (last page this line number only) ▶ | 5446.77 |

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)

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|---|
| A. ADP Tax Full Name (Last, First, Middle Initial) Mailing Address 4099 SE International Way City Milwaukie State OR Zip Code 97222 Purpose of Disbursement payroll tax Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4521 Date of Disbursement 07 / 21 / 2006 Amount of Each Disbursement this Period 48.60 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|--|--|---|

| | | |
|--|--|---|
| B. ADP Tax Full Name (Last, First, Middle Initial) Mailing Address 4099 SE International Way City Milwaukie State OR Zip Code 97222 Purpose of Disbursement payroll tax Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4520 Date of Disbursement 07 / 31 / 2006 Amount of Each Disbursement this Period 4660.11 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|--|--|---|

| | | |
|--|--|---|
| C. ADP Tax Full Name (Last, First, Middle Initial) Mailing Address 4099 SE International Way City Milwaukie State OR Zip Code 97222 Purpose of Disbursement payroll tax Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4616 Date of Disbursement 08 / 31 / 2006 Amount of Each Disbursement this Period 4654.16 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|--|--|---|

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|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 9362.87 |
| 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)

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|--|
| A. ADP Tax Full Name (Last, First, Middle Initial) Mailing Address 4099 SE International Way City Milwaukie State OR Zip Code 97222 Purpose of Disbursement payroll tax Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4718 Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2006 Amount of Each Disbursement this Period 4691.78 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|--|--|--|

| | | |
|--|--|--|
| B. ADP Full Name (Last, First, Middle Initial) Mailing Address 4099 SE International Way City Milwaukie State OR Zip Code 97222 Purpose of Disbursement payroll service fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4518 Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2006 Amount of Each Disbursement this Period 99.17 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|--|--|--|

| | | |
|--|--|---|
| C. ADP Full Name (Last, First, Middle Initial) Mailing Address 4099 SE International Way City Milwaukie State OR Zip Code 97222 Purpose of Disbursement payroll service fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4519 Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2006 Amount of Each Disbursement this Period 6.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|--|--|---|

| | |
|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 4796.95 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

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)

| | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17 | <input type="checkbox"/> | 18 | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/> | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|---|
| A. ADP Full Name (Last, First, Middle Initial) Mailing Address 4099 SE International Way City Milwaukie State OR Zip Code 97222 Purpose of Disbursement payroll service fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4614 Date of Disbursement 08 / 01 / 2006 Amount of Each Disbursement this Period 89.77 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|--|--|---|

| | | |
|--|--|---|
| B. ADP Full Name (Last, First, Middle Initial) Mailing Address 4099 SE International Way City Milwaukie State OR Zip Code 97222 Purpose of Disbursement payroll service fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4613 Date of Disbursement 08 / 02 / 2006 Amount of Each Disbursement this Period 89.77 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|--|--|---|

| | | |
|--|--|--|
| C. ADP Full Name (Last, First, Middle Initial) Mailing Address 4099 SE International Way City Milwaukie State OR Zip Code 97222 Purpose of Disbursement payroll service fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4615 Date of Disbursement 08 / 09 / 2006 Amount of Each Disbursement this Period 6.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|--|--|--|

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|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 185.54 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

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)

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|---|
| A. ADP Full Name (Last, First, Middle Initial) Mailing Address 4099 SE International Way City Milwaukee State OR Zip Code 97222 Purpose of Disbursement payroll service fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4717 Date of Disbursement 09 / 07 / 2006 Amount of Each Disbursement this Period 86.21 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|--|--|---|

| | | |
|--|--|--|
| B. ADP Full Name (Last, First, Middle Initial) Mailing Address 4099 SE International Way City Milwaukee State OR Zip Code 97222 Purpose of Disbursement payroll service fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4716 Date of Disbursement 09 / 13 / 2006 Amount of Each Disbursement this Period 6.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|--|--|--|

| | | |
|--|--|---|
| C. American Express Full Name (Last, First, Middle Initial) Mailing Address PO Box 53852 City Phoenix State AZ Zip Code 85072-3852 Purpose of Disbursement merchant service fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4524 Date of Disbursement 07 / 10 / 2006 Amount of Each Disbursement this Period 28.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|--|--|---|

| | |
|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 120.71 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

**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)

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. American Express | | Transaction ID: D4523 Date of Disbursement 07 / 17 / 2006 |
| Mailing Address PO Box 53852 | | Amount of Each Disbursement this Period 4.50 |
| City Phoenix State AZ Zip Code 85072-3852 | Purpose of Disbursement merchant service fee Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. American Express | | Transaction ID: D4522 Date of Disbursement 07 / 24 / 2006 |
| Mailing Address PO Box 53852 | | Amount of Each Disbursement this Period 2.85 |
| City Phoenix State AZ Zip Code 85072-3852 | Purpose of Disbursement merchant service fee Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. American Express | | Transaction ID: D4617 Date of Disbursement 08 / 07 / 2006 |
| Mailing Address PO Box 53852 | | Amount of Each Disbursement this Period 7.13 |
| City Phoenix State AZ Zip Code 85072-3852 | Purpose of Disbursement merchant service fee Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |

| | |
|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 14.48 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

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)

| | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17 | <input type="checkbox"/> | 18 | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/> | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. American Express | | Transaction ID: D4619 Date of Disbursement 08 / 14 / 2006 |
| Mailing Address PO Box 53852 | | Amount of Each Disbursement this Period 2.14 |
| City Phoenix State AZ Zip Code 85072-3852 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement merchant service fee Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. American Express | | Transaction ID: D4618 Date of Disbursement 08 / 15 / 2006 |
| Mailing Address PO Box 53852 | | Amount of Each Disbursement this Period 4.50 |
| City Phoenix State AZ Zip Code 85072-3852 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement merchant service fee Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. American Express | | Transaction ID: D4620 Date of Disbursement 08 / 28 / 2006 |
| Mailing Address PO Box 53852 | | Amount of Each Disbursement this Period 34.20 |
| City Phoenix State AZ Zip Code 85072-3852 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement merchant service fee Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 40.84 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

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)

| | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17 | <input type="checkbox"/> | 18 | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/> | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. American Express | | Transaction ID: D4720 Date of Disbursement 09 / 05 / 2006 |
| Mailing Address PO Box 53852 | | Amount of Each Disbursement this Period 7.13 |
| City Phoenix State AZ Zip Code 85072-3852 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement merchant service fee Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. American Express | | Transaction ID: D4719 Date of Disbursement 09 / 12 / 2006 |
| Mailing Address PO Box 53852 | | Amount of Each Disbursement this Period 4.50 |
| City Phoenix State AZ Zip Code 85072-3852 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement merchant service fee Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. American Express | | Transaction ID: D4721 Date of Disbursement 09 / 15 / 2006 |
| Mailing Address PO Box 53852 | | Amount of Each Disbursement this Period 4.50 |
| City Phoenix State AZ Zip Code 85072-3852 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement merchant service fee Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 16.13 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

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)

| | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17 | <input type="checkbox"/> | 18 | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/> | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) A. American Express | | Transaction ID: D4723 Date of Disbursement 09 / 25 / 2006 | |
| Mailing Address PO Box 53852 | | Amount of Each Disbursement this Period 15.68 | |
| City Phoenix State AZ Zip Code 85072-3852 | Purpose of Disbursement merchant service fee Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) B. American Express | | Transaction ID: D4722 Date of Disbursement 09 / 25 / 2006 | |
| Mailing Address PO Box 53852 | | Amount of Each Disbursement this Period 28.50 | |
| City Phoenix State AZ Zip Code 85072-3852 | Purpose of Disbursement merchant service fee Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) C. Annijke D.E. Wade | | Transaction ID: D4525 Date of Disbursement 07 / 01 / 2006 | |
| Mailing Address 0615 SW Palatine Hill Rd. | | Amount of Each Disbursement this Period 198.46 | |
| City Portland State OR Zip Code 97219 | Purpose of Disbursement salary Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 242.64 |
| 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)

| | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17 | <input type="checkbox"/> | 18 | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/> | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|---|--|---|
| <p>A. Annijke D.E. Wade</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 0615 SW Palatine Hill Rd.</p> <p>City Portland State OR Zip Code 97219</p> <p>Purpose of Disbursement salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> | | <p>Transaction ID: D4621</p> <p>Date of Disbursement</p> <p><input type="text" value="08"/> / <input type="text" value="01"/> / <input type="text" value="2006"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="224.05"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>Disbursement For: 2006</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p> | | |

| | | |
|---|--|---|
| <p>B. Bank of America</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 25118</p> <p>City Tampa State FL Zip Code 33622</p> <p>Purpose of Disbursement bank fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> | | <p>Transaction ID: D4526</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2006"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3.25"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>Disbursement For: 2006</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p> | | |

| | | |
|---|--|---|
| <p>C. Bank of America</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 25118</p> <p>City Tampa State FL Zip Code 33622</p> <p>Purpose of Disbursement bank fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> | | <p>Transaction ID: D4624</p> <p>Date of Disbursement</p> <p><input type="text" value="08"/> / <input type="text" value="10"/> / <input type="text" value="2006"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>Disbursement For: 2006</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p> | | |

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| <p>SUBTOTAL of Disbursements This Page (optional)</p> | <p><input type="text" value="231.30"/></p> |
| <p>TOTAL This Period (last page this line number only)</p> | <p><input type="text"/></p> |

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)

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|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Bank of America | | Transaction ID: D4623 Date of Disbursement 08 / 31 / 2006 |
| Mailing Address PO Box 25118 | | Amount of Each Disbursement this Period 22.25 |
| City Tampa State FL Zip Code 33622 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement bank fee Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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|--|--|--|
| Full Name (Last, First, Middle Initial) B. Bank of America | | Transaction ID: D4724 Date of Disbursement 09 / 19 / 2006 |
| Mailing Address PO Box 25118 | | Amount of Each Disbursement this Period 10.00 |
| City Tampa State FL Zip Code 33622 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement bank fee Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Bank of America | | Transaction ID: D4725 Date of Disbursement 09 / 29 / 2006 |
| Mailing Address PO Box 25118 | | Amount of Each Disbursement this Period 20.25 |
| City Tampa State FL Zip Code 33622 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement bank fee Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 52.50 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

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)

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Terrence Bean | | Transaction ID: D4847 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 0 / 2 0 0 6 |
| Mailing Address 1882 SW Hawthorne Ter | | Amount of Each Disbursement this Period 1962.97 |
| City Portland State OR Zip Code 97201 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement catering and event supplies Candidate Name | | * in-kind received |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Brad Miller for Congress | | Transaction ID: D4726 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6 |
| Mailing Address PO Box 10322 | | Amount of Each Disbursement this Period 1000.00 |
| City Raleigh State NC Zip Code 27605 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement contribution Candidate Name | | * in-kind received |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Bridgeport Brewing | | Transaction ID: D4626 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 8 / 2 0 0 6 |
| Mailing Address 1313 NW Marshall Ptland, | | Amount of Each Disbursement this Period 273.00 |
| City Portland State OR Zip Code 97209 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement catering Candidate Name | | * in-kind received |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 3235.97 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

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)

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|---|--|---|
| A. Myles Bugbee Full Name (Last, First, Middle Initial) Mailing Address 9393 SW 171st Ave. City Beaverton State OR Zip Code 97007 Purpose of Disbursement salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4563 Date of Disbursement 07 / 01 / 2006 Amount of Each Disbursement this Period 48.48 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|---|--|---|

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|---|--|--|
| B. Myles Bugbee Full Name (Last, First, Middle Initial) Mailing Address 9393 SW 171st Ave. City Beaverton State OR Zip Code 97007 Purpose of Disbursement salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4677 Date of Disbursement 08 / 01 / 2006 Amount of Each Disbursement this Period 238.98 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
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| C. Myles Bugbee Full Name (Last, First, Middle Initial) Mailing Address 9393 SW 171st Ave. City Beaverton State OR Zip Code 97007 Purpose of Disbursement salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4750 Date of Disbursement 09 / 01 / 2006 Amount of Each Disbursement this Period 319.19 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
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| SUBTOTAL of Disbursements This Page (optional) ▶ | 606.65 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

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)

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|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17 | <input type="checkbox"/> | 18 | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/> | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|---|
| A. Carney for Congress Full Name (Last, First, Middle Initial) Mailing Address PO Box 38 City Dimock State PA Zip Code 18816 Purpose of Disbursement contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4727 Date of Disbursement 09 / 14 / 2006 Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
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| B. Cato Full Name (Last, First, Middle Initial) Mailing Address B222 Longworth City Washington State DC Zip Code 20515 Purpose of Disbursement travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4529 Date of Disbursement 07 / 24 / 2006 Amount of Each Disbursement this Period 789.60 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
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| C. Cato Full Name (Last, First, Middle Initial) Mailing Address B222 Longworth City Washington State DC Zip Code 20515 Purpose of Disbursement travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4632 Date of Disbursement 08 / 03 / 2006 Amount of Each Disbursement this Period 1779.60 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
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| SUBTOTAL of Disbursements This Page (optional) ▶ | 3569.20 |
| 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)

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|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|--|
| A. Cato Full Name (Last, First, Middle Initial) Mailing Address B222 Longworth City Washington State DC Zip Code 20515 Purpose of Disbursement travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4631 Date of Disbursement 08 / 16 / 2006 Amount of Each Disbursement this Period 453.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|--|--|--|

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| B. Cato Full Name (Last, First, Middle Initial) Mailing Address B222 Longworth City Washington State DC Zip Code 20515 Purpose of Disbursement travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4728 Date of Disbursement 09 / 15 / 2006 Amount of Each Disbursement this Period 302.60 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
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| C. Cato Full Name (Last, First, Middle Initial) Mailing Address B222 Longworth City Washington State DC Zip Code 20515 Purpose of Disbursement travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4729 Date of Disbursement 09 / 27 / 2006 Amount of Each Disbursement this Period 833.60 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
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| SUBTOTAL of Disbursements This Page (optional) ▶ | 1589.20 |
| 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)

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|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|---|--|--|
| A. City Center Parking Full Name (Last, First, Middle Initial) Mailing Address PO Box 8219 City Portland State OR Zip Code 97207 Purpose of Disbursement monthly parking Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4531 Date of Disbursement 07 / 01 / 2006 Amount of Each Disbursement this Period 640.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
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| B. City Center Parking Full Name (Last, First, Middle Initial) Mailing Address PO Box 8219 City Portland State OR Zip Code 97207 Purpose of Disbursement monthly parking Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4636 Date of Disbursement 08 / 01 / 2006 Amount of Each Disbursement this Period 640.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
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| C. City Center Parking Full Name (Last, First, Middle Initial) Mailing Address PO Box 8219 City Portland State OR Zip Code 97207 Purpose of Disbursement monthly parking Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4731 Date of Disbursement 09 / 01 / 2006 Amount of Each Disbursement this Period 640.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
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| SUBTOTAL of Disbursements This Page (optional) ▶ | 1920.00 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

**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)

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|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17 | <input type="checkbox"/> | 18 | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/> | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) A. Congressional Liquor | | Transaction ID: D4532 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 5 / 2 0 0 6 | |
| Mailing Address 404 First St., SE | | Amount of Each Disbursement this Period 260.86 | |
| City Washington State DC Zip Code 20003 | Purpose of Disbursement event expenses | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/ Type | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) B. Danielle Krushnic | | Transaction ID: D4533 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 6 | |
| Mailing Address 0615 SW Palatine Hill Rd. #1156 | | Amount of Each Disbursement this Period 272.39 | |
| City Portland State OR Zip Code 97219 | Purpose of Disbursement salary | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/ Type | |

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|--|--|---|--|
| Full Name (Last, First, Middle Initial) C. Danielle Krushnic | | Transaction ID: D4639 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6 | |
| Mailing Address 0615 SW Palatine Hill Rd. #1156 | | Amount of Each Disbursement this Period 166.21 | |
| City Portland State OR Zip Code 97219 | Purpose of Disbursement salary | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/ Type | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 699.46 |
| 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)

| | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17 | <input type="checkbox"/> | 18 | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/> | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|--|
| A. Danielle Krushnic Full Name (Last, First, Middle Initial) Mailing Address 0615 SW Palatine Hill Rd. #1156 City Portland State OR Zip Code 97219 Purpose of Disbursement salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | | Transaction ID: D4732 Date of Disbursement 09 / 01 / 2006 Amount of Each Disbursement this Period 124.65 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|--|--|--|

| | | |
|--|--|--|
| B. David Houston Full Name (Last, First, Middle Initial) Mailing Address 4137 NE 33rd Ave. City Portland State OR Zip Code 97211 Purpose of Disbursement salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | | Transaction ID: D4534 Date of Disbursement 07 / 01 / 2006 Amount of Each Disbursement this Period 663.56 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|--|--|--|

| | | |
|--|--|--|
| C. David Houston Full Name (Last, First, Middle Initial) Mailing Address 4137 NE 33rd Ave. City Portland State OR Zip Code 97211 Purpose of Disbursement salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | | Transaction ID: D4640 Date of Disbursement 08 / 01 / 2006 Amount of Each Disbursement this Period 685.84 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|--|--|--|

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 1474.05 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

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)

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|--|
| A. David Houston Full Name (Last, First, Middle Initial) Mailing Address 4137 NE 33rd Ave. City Portland State OR Zip Code 97211 Purpose of Disbursement salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | | Transaction ID: D4733 Date of Disbursement 09 / 01 / 2006 Amount of Each Disbursement this Period 830.56 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
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|--|--|---|
| B. David Wu Full Name (Last, First, Middle Initial) Mailing Address 314 North Carolina Ave. SE City Washington State DC Zip Code 20003-2003 Purpose of Disbursement travel and expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | | Transaction ID: D4774 Date of Disbursement 07 / 14 / 2006 Amount of Each Disbursement this Period 1607.76 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|--|--|---|

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|--|--|--|
| C. David Wu Full Name (Last, First, Middle Initial) Mailing Address 314 North Carolina Ave. SE City Washington State DC Zip Code 20003-2003 Purpose of Disbursement travel and expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | | Transaction ID: D4775 Date of Disbursement 08 / 02 / 2006 Amount of Each Disbursement this Period 317.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
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| SUBTOTAL of Disbursements This Page (optional) ▶ | 2755.82 |
| 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)

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|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Democratic Congressional Campaign Committee | | Transaction ID: D4771 Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2006 |
| Mailing Address 430 South Capitol, SE 2nd Floor | | Amount of Each Disbursement this Period 26.72 |
| City Washington State DC Zip Code 20003 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement fundraising services Candidate Name | Category/Type | * in-kind received |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Democratic Congressional Campaign Committee | | Transaction ID: D4772 Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2006 |
| Mailing Address 430 South Capitol, SE 2nd Floor | | Amount of Each Disbursement this Period 8.30 |
| City Washington State DC Zip Code 20003 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement fundraising services Candidate Name | Category/Type | * in-kind received |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Democratic Congressional Campaign Committee | | Transaction ID: D4734 Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2006 |
| Mailing Address 430 South Capitol, SE 2nd Floor | | Amount of Each Disbursement this Period 25000.00 |
| City Washington State DC Zip Code 20003 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement excess campaign funds Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 25035.02 |
| 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)

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|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17 | <input type="checkbox"/> | 18 | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/> | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Democratic Congressional Campaign Committee | | Transaction ID: D4773 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2006 |
| Mailing Address 430 South Capitol, SE 2nd Floor | | Amount of Each Disbursement this Period 55.68 |
| City Washington State DC Zip Code 20003 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement fundraising services Candidate Name | Category/Type | * in-kind received |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. E Campaigns | | Transaction ID: D4537 Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2006 |
| Mailing Address PO Box 292 | | Amount of Each Disbursement this Period 132.50 |
| City Flandreau State SD Zip Code 57028 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement web site maintenance Candidate Name | Category/Type | * in-kind received |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. E Campaigns | | Transaction ID: D4536 Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2006 |
| Mailing Address PO Box 292 | | Amount of Each Disbursement this Period 185.50 |
| City Flandreau State SD Zip Code 57028 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement web site maintenance Candidate Name | Category/Type | * in-kind received |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 373.68 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

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)

| | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17 | <input type="checkbox"/> | 18 | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/> | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|--|
| A. E Campaigns Full Name (Last, First, Middle Initial) Mailing Address PO Box 292 City Flandreau State SD Zip Code 57028 Purpose of Disbursement web site maintenance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4643 Date of Disbursement 08 / 16 / 2006 Amount of Each Disbursement this Period 185.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
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| B. Ecotrust Full Name (Last, First, Middle Initial) Mailing Address 721 NW 9th Avenue City Portland State OR Zip Code 97209 Purpose of Disbursement space rental Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4538 Date of Disbursement 07 / 17 / 2006 Amount of Each Disbursement this Period 250.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|---|--|--|

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|---|--|--|
| C. Ecotrust Full Name (Last, First, Middle Initial) Mailing Address 721 NW 9th Avenue City Portland State OR Zip Code 97209 Purpose of Disbursement space rental Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4644 Date of Disbursement 08 / 08 / 2006 Amount of Each Disbursement this Period 250.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
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| SUBTOTAL of Disbursements This Page (optional) ▶ | 685.50 |
| 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)

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|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17 | <input type="checkbox"/> | 18 | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/> | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|---|--|---|
| <p>A. Elephant's Catering</p> <p>Full Name (Last, First, Middle Initial) Elephant's Catering</p> <p>Mailing Address 1611 SE 7th</p> <p>City Portland State OR Zip Code 97214</p> <p>Purpose of Disbursement catering</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> | | <p>Transaction ID: D4539</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="513.20"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>Disbursement For: 2006</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p> | | <p>Category/Type</p> |

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|--|--|--|
| <p>B. Fred Meyer</p> <p>Full Name (Last, First, Middle Initial) Fred Meyer</p> <p>Mailing Address 3800 SE 22nd</p> <p>City Portland State OR Zip Code 97202</p> <p>Purpose of Disbursement event supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> | | <p>Transaction ID: D4653</p> <p>Date of Disbursement</p> <p><input type="text" value="08"/> <input type="text" value="08"/> / <input type="text" value="20"/> <input type="text" value="06"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="53.74"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>Disbursement For: 2006</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p> | | <p>Category/Type</p> |

| | | |
|--|--|--|
| <p>C. Fred Meyer</p> <p>Full Name (Last, First, Middle Initial) Fred Meyer</p> <p>Mailing Address 3800 SE 22nd</p> <p>City Portland State OR Zip Code 97202</p> <p>Purpose of Disbursement event supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> | | <p>Transaction ID: D4651</p> <p>Date of Disbursement</p> <p><input type="text" value="08"/> <input type="text" value="08"/> / <input type="text" value="20"/> <input type="text" value="06"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="29.80"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>Disbursement For: 2006</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p> | | <p>Category/Type</p> |

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| <p>SUBTOTAL of Disbursements This Page (optional)</p> | <p><input type="text" value="596.74"/></p> |
| <p>TOTAL This Period (last page this line number only)</p> | <p><input type="text"/></p> |

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)

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|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17 | <input type="checkbox"/> | 18 | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/> | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|--|
| A. Fred Meyer Full Name (Last, First, Middle Initial) Mailing Address 3800 SE 22nd City Portland State OR Zip Code 97202 Purpose of Disbursement event supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4652 Date of Disbursement 08 / 08 / 2006 Amount of Each Disbursement this Period 132.51 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
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| B. Gales Creek Insurance Full Name (Last, First, Middle Initial) Mailing Address 800 NW 6th Ste. 335 City Portland State OR Zip Code 97209 Purpose of Disbursement event insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4654 Date of Disbursement 08 / 16 / 2006 Amount of Each Disbursement this Period 299.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
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| C. Grove Insight Full Name (Last, First, Middle Initial) Mailing Address 3835 NE Hancock Street, Suite 102 City Portland State OR Zip Code 97212 Purpose of Disbursement polling Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4542 Date of Disbursement 07 / 01 / 2006 Amount of Each Disbursement this Period 3000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
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| SUBTOTAL of Disbursements This Page (optional) ▶ | 3431.51 |
| 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)

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|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|---|
| A. Grove Insight Full Name (Last, First, Middle Initial) Mailing Address 3835 NE Hancock Street, Suite 102 City Portland State OR Zip Code 97212 Purpose of Disbursement consulting fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4541 Date of Disbursement 07 / 13 / 2006 Amount of Each Disbursement this Period 3000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|--|--|---|

| | | |
|--|--|---|
| B. Grove Insight Full Name (Last, First, Middle Initial) Mailing Address 3835 NE Hancock Street, Suite 102 City Portland State OR Zip Code 97212 Purpose of Disbursement consulting fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4658 Date of Disbursement 08 / 16 / 2006 Amount of Each Disbursement this Period 3000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
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| C. Grove Insight Full Name (Last, First, Middle Initial) Mailing Address 3835 NE Hancock Street, Suite 102 City Portland State OR Zip Code 97212 Purpose of Disbursement consulting fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4736 Date of Disbursement 09 / 01 / 2006 Amount of Each Disbursement this Period 3000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
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| SUBTOTAL of Disbursements This Page (optional) ▶ | 9000.00 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

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)

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|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17 | <input type="checkbox"/> | 18 | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/> | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|---|--|---|
| A. Hirono for Congress Full Name (Last, First, Middle Initial) Mailing Address PO Box 677 City Honolulu State HI Zip Code 96809 Purpose of Disbursement contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4737 Date of Disbursement 09 / 28 / 2006 Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|---|--|---|

| | | |
|---|--|--|
| B. Ms. Margaret Hoffmann Full Name (Last, First, Middle Initial) Mailing Address 3620 SW Kelly Ave, Apt B City Portland State OR Zip Code 97239-4342 Purpose of Disbursement travel and expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4555 Date of Disbursement 07 / 01 / 2006 Amount of Each Disbursement this Period 698.08 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
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| | | |
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| C. Ms. Margaret Hoffmann Full Name (Last, First, Middle Initial) Mailing Address 3620 SW Kelly Ave, Apt B City Portland State OR Zip Code 97239-4342 Purpose of Disbursement travel and expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4560 Date of Disbursement 07 / 24 / 2006 Amount of Each Disbursement this Period 436.68 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
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| SUBTOTAL of Disbursements This Page (optional) ▶ | 2134.76 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

**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 / 139

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Ms. Margaret Hoffmann | | Transaction ID: D4559 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 6 |
| Mailing Address 3620 SW Kelly Ave, Apt B | | Amount of Each Disbursement this Period 3441.43 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Portland State OR Zip Code 97239-4342 | Purpose of Disbursement salary Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Ms. Margaret Hoffmann | | Transaction ID: D4674 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6 |
| Mailing Address 3620 SW Kelly Ave, Apt B | | Amount of Each Disbursement this Period 32.75 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Portland State OR Zip Code 97239-4342 | Purpose of Disbursement travel Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Ms. Margaret Hoffmann | | Transaction ID: D4675 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 3 / 2 0 0 6 |
| Mailing Address 3620 SW Kelly Ave, Apt B | | Amount of Each Disbursement this Period 1166.97 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Portland State OR Zip Code 97239-4342 | Purpose of Disbursement travel and expenses Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 4641.15 |
| 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 101 / 139

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) A. Ms. Margaret Hoffmann | | Transaction ID: D4749 Date of Disbursement 09 / 01 / 2006 | |
| Mailing Address 3620 SW Kelly Ave, Apt B | | Amount of Each Disbursement this Period 3441.44 | |
| City Portland State OR Zip Code 97239-4342 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | | |
| Purpose of Disbursement travel and expenses Candidate Name | Category/Type | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) B. Ms. Margaret Hoffmann | | Transaction ID: D4747 Date of Disbursement 09 / 07 / 2006 | |
| Mailing Address 3620 SW Kelly Ave, Apt B | | Amount of Each Disbursement this Period 498.06 | |
| City Portland State OR Zip Code 97239-4342 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | | |
| Purpose of Disbursement travel and expenses Candidate Name | Category/Type | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) C. Ms. Margaret Hoffmann | | Transaction ID: D4748 Date of Disbursement 09 / 29 / 2006 | |
| Mailing Address 3620 SW Kelly Ave, Apt B | | Amount of Each Disbursement this Period 3441.43 | |
| City Portland State OR Zip Code 97239-4342 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | | |
| Purpose of Disbursement salary Candidate Name | Category/Type | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 7380.93 |
| 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)

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|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17 | <input type="checkbox"/> | 18 | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/> | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|---|--|---|
| A. Hooley for Congress Full Name (Last, First, Middle Initial) Hooley for Congress Mailing Address PO Box 2050 City Salem State OR Zip Code 97308 Purpose of Disbursement contribution Candidate Name Hooley for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 05 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4738 Date of Disbursement 09 / 21 / 2006 Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|---|--|---|

| | | |
|--|--|---|
| B. Hot Lips Pizza Full Name (Last, First, Middle Initial) Hot Lips Pizza Mailing Address 721 NW 9th Ave # 150 Ptland, City Portland State OR Zip Code 97209 Purpose of Disbursement catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4659 Date of Disbursement 08 / 08 / 2006 Amount of Each Disbursement this Period 1351.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|--|--|---|

| | | |
|--|--|---|
| C. Iron Mountain Records Management Full Name (Last, First, Middle Initial) Iron Mountain Records Management Mailing Address PO Box 27128 City New York State NY Zip Code 10087 Purpose of Disbursement records management Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4739 Date of Disbursement 09 / 07 / 2006 Amount of Each Disbursement this Period 50.57 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|--|--|---|

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|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 2402.07 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

**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)

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| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Jim Marshall for Congress | | Transaction ID: D4740 Date of Disbursement 09 / 28 / 2006 |
| Mailing Address PO Box 125 | | Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Macon | State GA | |
| Zip Code 31202 | | |
| Purpose of Disbursement contribution Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. John Barrow for Congress | | Transaction ID: D4741 Date of Disbursement 09 / 28 / 2006 |
| Mailing Address PO Box 8166 | | Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Savannah | State GA | |
| Zip Code 31412 | | |
| Purpose of Disbursement contribution Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. John Spratt for Congress | | Transaction ID: D4742 Date of Disbursement 09 / 28 / 2006 |
| Mailing Address PO Box 10986 | | Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Rock Hill | State SC | |
| Zip Code 29731 | | |
| Purpose of Disbursement contribution Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

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|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 3000.00 |
| 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)

| | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17 | <input type="checkbox"/> | 18 | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/> | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) A. Judge Sakai for 225th District Court | | Transaction ID: D4545 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 9 / 2 0 0 6 | |
| Mailing Address PO Box 15395 | | Amount of Each Disbursement this Period 500.00 | |
| City San Antonio State TX Zip Code 78212 | Purpose of Disbursement contribution | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/ Type | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) B. Kramers Mailing Service | | Transaction ID: D4549 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 6 | |
| Mailing Address 3201 NW Yeon | | Amount of Each Disbursement this Period 510.07 | |
| City Portland State OR Zip Code 97210 | Purpose of Disbursement printing and postage | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/ Type | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) C. Kramers Mailing Service | | Transaction ID: D4551 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 6 | |
| Mailing Address 3201 NW Yeon | | Amount of Each Disbursement this Period 347.49 | |
| City Portland State OR Zip Code 97210 | Purpose of Disbursement printing and postage | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/ Type | |

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|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 1357.56 |
| 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)

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| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Kramers Mailing Service | | Transaction ID: D4550 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 6 |
| Mailing Address 3201 NW Yeon | | Amount of Each Disbursement this Period 1270.04 |
| City Portland State OR Zip Code 97210 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement printing and postage Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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|--|--|--|
| Full Name (Last, First, Middle Initial) B. Kramers Mailing Service | | Transaction ID: D4668 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 8 / 2 0 0 6 |
| Mailing Address 3201 NW Yeon | | Amount of Each Disbursement this Period 1193.79 |
| City Portland State OR Zip Code 97210 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement printing and postage Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Ted Liu | | Transaction ID: D4596 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 7 / 2 0 0 6 |
| Mailing Address 714 South Los Angeles St. #408 | | Amount of Each Disbursement this Period 76.50 |
| City Los Angeles State CA Zip Code 90014 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement mileage Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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|--|----------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 2540.33 |
| 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)

| | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17 | <input type="checkbox"/> | 18 | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/> | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|---|
| A. Lois Murphy for Congress Full Name (Last, First, Middle Initial) Mailing Address PO Box 312 City Narberth State PA Zip Code 19072 Purpose of Disbursement contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4745 Date of Disbursement 09 / 14 / 2006 Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|--|--|---|

| | | |
|---|--|--|
| B. Mainlander Investments Full Name (Last, First, Middle Initial) Mailing Address 15-82nd Dr. #210 City Gladstone State OR Zip Code 97027 Purpose of Disbursement rent Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4553 Date of Disbursement 07 / 01 / 2006 Amount of Each Disbursement this Period 665.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|---|--|--|

| | | |
|---|--|--|
| C. Mainlander Investments Full Name (Last, First, Middle Initial) Mailing Address 15-82nd Dr. #210 City Gladstone State OR Zip Code 97027 Purpose of Disbursement rent Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4672 Date of Disbursement 08 / 01 / 2006 Amount of Each Disbursement this Period 665.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|---|--|--|

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|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 2330.00 |
| 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)

| | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17 | <input type="checkbox"/> | 18 | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/> | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Mainlander Investments | | Transaction ID: D4746 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 6 |
| Mailing Address 15-82nd Dr. #210 | | Amount of Each Disbursement this Period 665.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Gladstone State OR Zip Code 97027 | | |
| Purpose of Disbursement rent Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Manzana | | Transaction ID: D4673 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6 |
| Mailing Address 1203 NW Glisan | | Amount of Each Disbursement this Period 253.20 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Portland State OR Zip Code 97209 | | |
| Purpose of Disbursement catering Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Matsusaka Sushi and Grill | | Transaction ID: D4562 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 6 / 2 0 0 6 |
| Mailing Address 11398-B Westheimer | | Amount of Each Disbursement this Period 681.98 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Houston State TX Zip Code 77077 | | |
| Purpose of Disbursement catering Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 1600.18 |
| 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)

| | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17 | <input type="checkbox"/> | 18 | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/> | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) A. National Democratic Club | | Transaction ID: D4564 Date of Disbursement 07 / 01 / 2006 | |
| Mailing Address 30 Ivy St. SE | | Amount of Each Disbursement this Period 87.82 | |
| City Washington State DC Zip Code 20003-4071 | Purpose of Disbursement catering | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) B. National Democratic Club | | Transaction ID: D4565 Date of Disbursement 07 / 13 / 2006 | |
| Mailing Address 30 Ivy St. SE | | Amount of Each Disbursement this Period 72.00 | |
| City Washington State DC Zip Code 20003-4071 | Purpose of Disbursement catering | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) C. National Democratic Club | | Transaction ID: D4678 Date of Disbursement 08 / 16 / 2006 | |
| Mailing Address 30 Ivy St. SE | | Amount of Each Disbursement this Period 304.38 | |
| City Washington State DC Zip Code 20003-4071 | Purpose of Disbursement catering | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type | |

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| SUBTOTAL of Disbursements This Page (optional) | 464.20 |
| 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 109 / 139

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. NCEC-National Committee for an Effective Congress | | Transaction ID: D4844 Date of Disbursement 09 / 26 / 2006 |
| Mailing Address 122 C Street, NW, Suite 650 | | Amount of Each Disbursement this Period 2500.00 |
| City Washington State DC Zip Code 20001 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement electoral targeting Candidate Name | Category/Type | * in-kind received |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. NCEC-National Committee for an Effective Congress | | Transaction ID: D4845 Date of Disbursement 09 / 26 / 2006 |
| Mailing Address 122 C Street, NW, Suite 650 | | Amount of Each Disbursement this Period 500.00 |
| City Washington State DC Zip Code 20001 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement electoral targeting Candidate Name | Category/Type | * in-kind received |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. NGP Software | | Transaction ID: D4566 Date of Disbursement 07 / 07 / 2006 |
| Mailing Address 5505 Connecticut Ave NW # 202 | | Amount of Each Disbursement this Period 750.00 |
| City Washington State DC Zip Code 20015-2601 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement database software maintenance Candidate Name | Category/Type | * in-kind received |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 3750.00 |
| 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)

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| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. NGP Software | | Transaction ID: D4679 Date of Disbursement 08 / 01 / 2006 |
| Mailing Address 5505 Connecticut Ave NW # 202 | | Amount of Each Disbursement this Period 1750.00 |
| City Washington State DC Zip Code 20015-2601 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement database software Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Northwest Labor Press | | Transaction ID: D4751 Date of Disbursement 09 / 07 / 2006 |
| Mailing Address P.O. Box 13150 | | Amount of Each Disbursement this Period 250.00 |
| City Portland State OR Zip Code 97213 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement print advertisement Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Nu-Way Printing | | Transaction ID: D4567 Date of Disbursement 07 / 01 / 2006 |
| Mailing Address 306 SE 8th | | Amount of Each Disbursement this Period 1014.00 |
| City Portland State OR Zip Code 97214 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement stationery Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 3014.00 |
| 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)

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|---|--|--|
| A. Nu-Way Printing Full Name (Last, First, Middle Initial) Mailing Address 306 SE 8th City Portland State OR Zip Code 97214 Purpose of Disbursement stationery Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4568 Date of Disbursement 07 / 07 / 2006 Amount of Each Disbursement this Period 130.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|---|--|--|

| | | |
|---|--|---|
| B. Nu-Way Printing Full Name (Last, First, Middle Initial) Mailing Address 306 SE 8th City Portland State OR Zip Code 97214 Purpose of Disbursement stationery Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4682 Date of Disbursement 08 / 01 / 2006 Amount of Each Disbursement this Period 1770.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|---|--|---|

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|---|--|--|
| C. Nu-Way Printing Full Name (Last, First, Middle Initial) Mailing Address 306 SE 8th City Portland State OR Zip Code 97214 Purpose of Disbursement stationery Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4680 Date of Disbursement 08 / 01 / 2006 Amount of Each Disbursement this Period 355.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|---|--|--|

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 2255.00 |
| 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)

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|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17 | <input type="checkbox"/> | 18 | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/> | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Nu-Way Printing | | Transaction ID: D4681 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6 |
| Mailing Address 306 SE 8th | | Amount of Each Disbursement this Period 99.00 |
| City Portland State OR Zip Code 97214 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement stationery Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Office Depot | | Transaction ID: D4569 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 9 / 2 0 0 6 |
| Mailing Address 604 SW Washington | | Amount of Each Disbursement this Period 73.98 |
| City Portland State OR Zip Code 97214 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement office supplies Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Office Products Northwest | | Transaction ID: D4571 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 6 |
| Mailing Address 12600 SW 68th Ave | | Amount of Each Disbursement this Period 29.92 |
| City Tigard State OR Zip Code 97223-8338 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement office supplies Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 202.90 |
| 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)

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Office Products Northwest | | Transaction ID: D4570 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 7 / 2 0 0 6 |
| Mailing Address 12600 SW 68th Ave | | Amount of Each Disbursement this Period 29.43 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Tigard State OR Zip Code 97223-8338 | Purpose of Disbursement office supplies Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Office Products Northwest | | Transaction ID: D4683 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6 |
| Mailing Address 12600 SW 68th Ave | | Amount of Each Disbursement this Period 180.84 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Tigard State OR Zip Code 97223-8338 | Purpose of Disbursement office supplies Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Office Products Northwest | | Transaction ID: D4753 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 6 |
| Mailing Address 12600 SW 68th Ave | | Amount of Each Disbursement this Period 44.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Tigard State OR Zip Code 97223-8338 | Purpose of Disbursement office supplies Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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|--|--------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 254.77 |
| 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)

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Office Products Northwest | | Transaction ID: D4752 Date of Disbursement 09 / 07 / 2006 |
| Mailing Address 12600 SW 68th Ave | | Amount of Each Disbursement this Period 82.83 |
| City Tigard State OR Zip Code 97223-8338 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement office supplies Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Party City | | Transaction ID: D4573 Date of Disbursement 07 / 21 / 2006 |
| Mailing Address 5522B Leesburg Pike | | Amount of Each Disbursement this Period 142.40 |
| City Bailey's Crossroad State VA Zip Code 22041 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement event expenses Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Patrick Murphy for Congress | | Transaction ID: D4754 Date of Disbursement 09 / 14 / 2006 |
| Mailing Address PO Box 868 | | Amount of Each Disbursement this Period 1000.00 |
| City Levittown State PA Zip Code 19058 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement contribution Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 1225.23 |
| 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)

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| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Peter Corvallis Productions | | Transaction ID: D4687 Date of Disbursement 08 / 08 / 2006 |
| Mailing Address 237 SW Front | | Amount of Each Disbursement this Period 405.00 |
| City Portland State OR Zip Code 97204 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement event supplies Candidate Name | | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Point In Space | | Transaction ID: D4574 Date of Disbursement 07 / 13 / 2006 |
| Mailing Address 21 Sweeney Road | | Amount of Each Disbursement this Period 76.95 |
| City Keene State NH Zip Code 03431 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement website hosting Candidate Name | | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Political Development Group, Incorporated | | Transaction ID: D4578 Date of Disbursement 07 / 01 / 2006 |
| Mailing Address 499 South Capitol St., SW, #114 | | Amount of Each Disbursement this Period 5676.21 |
| City Washington State DC Zip Code 20003 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement consulting and expenses Candidate Name | | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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|--|----------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 6158.16 |
| 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)

| | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17 | <input type="checkbox"/> | 18 | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/> | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Political Development Group, Incorporated | | Transaction ID: D4688 Date of Disbursement MM / DD / YYYY 08 / 01 / 2006 |
| Mailing Address 499 South Capitol St., SW, #114 | | Amount of Each Disbursement this Period 5656.13 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Washington State DC Zip Code 20003 | Purpose of Disbursement consulting and expenses Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Political Development Group, Incorporated | | Transaction ID: D4755 Date of Disbursement MM / DD / YYYY 09 / 01 / 2006 |
| Mailing Address 499 South Capitol St., SW, #114 | | Amount of Each Disbursement this Period 5582.94 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Washington State DC Zip Code 20003 | Purpose of Disbursement consulting and expenses Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Portland Billing | | Transaction ID: D4579 Date of Disbursement MM / DD / YYYY 07 / 03 / 2006 |
| Mailing Address 3434 SE Powell Blvd. Ptland, | | Amount of Each Disbursement this Period 54.06 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Portland State OR Zip Code 97202 | Purpose of Disbursement merchant fees Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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|--|----------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 11293.13 |
| 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)

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| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Portland Billing | | Transaction ID: D4580 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 3 / 2 0 0 6 |
| Mailing Address 3434 SE Powell Blvd. Ptland, | | Amount of Each Disbursement this Period 479.12 |
| City Portland State OR Zip Code 97202 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement merchant fees Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Portland Billing | | Transaction ID: D4692 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6 |
| Mailing Address 3434 SE Powell Blvd. Ptland, | | Amount of Each Disbursement this Period 88.79 |
| City Portland State OR Zip Code 97202 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement merchant fees Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Portland Billing | | Transaction ID: D4693 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6 |
| Mailing Address 3434 SE Powell Blvd. Ptland, | | Amount of Each Disbursement this Period 278.36 |
| City Portland State OR Zip Code 97202 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement merchant fees Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 846.27 |
| 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)

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Portland Billing | | Transaction ID: D4757 Date of Disbursement 09 / 01 / 2006 |
| Mailing Address 3434 SE Powell Blvd. Ptland, | | Amount of Each Disbursement this Period 68.86 |
| City Portland State OR Zip Code 97202 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement merchant fees Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Portland Billing | | Transaction ID: D4758 Date of Disbursement 09 / 01 / 2006 |
| Mailing Address 3434 SE Powell Blvd. Ptland, | | Amount of Each Disbursement this Period 339.57 |
| City Portland State OR Zip Code 97202 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement merchant fees Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Tom Powers | | Transaction ID: D4604 Date of Disbursement 07 / 01 / 2006 |
| Mailing Address 1813 SE Stark | | Amount of Each Disbursement this Period 28.90 |
| City Portland State OR Zip Code 97214 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement travel and expenses Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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| SUBTOTAL of Disbursements This Page (optional) | 437.33 |
| 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)

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|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17 | <input type="checkbox"/> | 18 | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/> | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|---|--|---|
| A. Tom Powers Full Name (Last, First, Middle Initial) Mailing Address 1813 SE Stark City Portland State OR Zip Code 97214 Purpose of Disbursement salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4600 Date of Disbursement 07 / 01 / 2006 Amount of Each Disbursement this Period 1691.30 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|---|--|---|

| | | |
|--|--|--|
| B. Tom Powers Full Name (Last, First, Middle Initial) Mailing Address 1813 SE Stark City Portland State OR Zip Code 97214 Purpose of Disbursement mileage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4602 Date of Disbursement 07 / 07 / 2006 Amount of Each Disbursement this Period 140.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
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|--|--|--|
| C. Tom Powers Full Name (Last, First, Middle Initial) Mailing Address 1813 SE Stark City Portland State OR Zip Code 97214 Purpose of Disbursement mileage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4603 Date of Disbursement 07 / 24 / 2006 Amount of Each Disbursement this Period 148.61 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|--|--|--|

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|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 1980.41 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

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)

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|---|--|---|
| A. Tom Powers Full Name (Last, First, Middle Initial) Mailing Address 1813 SE Stark City Portland State OR Zip Code 97214 Purpose of Disbursement salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4599 Date of Disbursement 07 / 31 / 2006 Amount of Each Disbursement this Period 1691.30 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|---|--|---|

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|--|--|---|
| B. Tom Powers Full Name (Last, First, Middle Initial) Mailing Address 1813 SE Stark City Portland State OR Zip Code 97214 Purpose of Disbursement mileage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4709 Date of Disbursement 08 / 23 / 2006 Amount of Each Disbursement this Period 91.21 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|--|--|---|

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|---|--|---|
| C. Tom Powers Full Name (Last, First, Middle Initial) Mailing Address 1813 SE Stark City Portland State OR Zip Code 97214 Purpose of Disbursement salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4767 Date of Disbursement 09 / 01 / 2006 Amount of Each Disbursement this Period 1691.30 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|---|--|---|

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 3473.81 |
| 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)

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| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. Tom Powers | | Transaction ID: D4768 Date of Disbursement 09 / 29 / 2006 |
| Mailing Address 1813 SE Stark | | Amount of Each Disbursement this Period 1691.30 |
| City Portland State OR Zip Code 97214 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement salary Candidate Name | | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) B. Qwest | | Transaction ID: D4581 Date of Disbursement 07 / 07 / 2006 |
| Mailing Address PO Box 12480 | | Amount of Each Disbursement this Period 395.83 |
| City Seattle State WA Zip Code 98111-4480 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement phone service Candidate Name | | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) C. Qwest | | Transaction ID: D4695 Date of Disbursement 08 / 01 / 2006 |
| Mailing Address PO Box 12480 | | Amount of Each Disbursement this Period 362.81 |
| City Seattle State WA Zip Code 98111-4480 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement phone service Candidate Name | | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | | |

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|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 2449.94 |
| 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)

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|--|
| A. Qwest Full Name (Last, First, Middle Initial) Mailing Address PO Box 12480 City Seattle State WA Zip Code 98111-4480 Purpose of Disbursement phone service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4759 Date of Disbursement 09 / 01 / 2006 Amount of Each Disbursement this Period 406.98 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|--|--|--|

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|--|--|---|
| B. RBI Strategies Full Name (Last, First, Middle Initial) Mailing Address 1900 Grant St. #1170 City Denver State CO Zip Code 80203 Purpose of Disbursement consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4585 Date of Disbursement 07 / 01 / 2006 Amount of Each Disbursement this Period 3150.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|--|--|---|

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|--|--|---|
| C. RBI Strategies Full Name (Last, First, Middle Initial) Mailing Address 1900 Grant St. #1170 City Denver State CO Zip Code 80203 Purpose of Disbursement consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4584 Date of Disbursement 07 / 07 / 2006 Amount of Each Disbursement this Period 3150.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
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| SUBTOTAL of Disbursements This Page (optional) ▶ | 6706.98 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

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)

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|---|
| A. RBI Strategies Full Name (Last, First, Middle Initial) Mailing Address 1900 Grant St. #1170 City Denver State CO Zip Code 80203 Purpose of Disbursement consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4698 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 8 / 2 0 0 6 Amount of Each Disbursement this Period 3150.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|--|--|---|

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|--|--|--|
| B. RBI Strategies Full Name (Last, First, Middle Initial) Mailing Address 1900 Grant St. #1170 City Denver State CO Zip Code 80203 Purpose of Disbursement travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4761 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 6 Amount of Each Disbursement this Period 928.18 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|--|--|--|

| | | |
|--|--|---|
| C. RBI Strategies Full Name (Last, First, Middle Initial) Mailing Address 1900 Grant St. #1170 City Denver State CO Zip Code 80203 Purpose of Disbursement consulting fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4762 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 7 / 2 0 0 6 Amount of Each Disbursement this Period 3150.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
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| SUBTOTAL of Disbursements This Page (optional) ▶ | 7228.18 |
| TOTAL This Period (last page this line number only) ▶ | (Empty field) |

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)

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| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Regence Blue Cross Blue Shield | | Transaction ID: D4583 Date of Disbursement 07 / 01 / 2006 |
| Mailing Address 100 SW Market St. PO Box 1271 Ptla | | Amount of Each Disbursement this Period 837.10 |
| City Portland State OR Zip Code 97207-1271 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement insurance premium Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Regence Blue Cross Blue Shield | | Transaction ID: D4582 Date of Disbursement 07 / 13 / 2006 |
| Mailing Address 100 SW Market St. PO Box 1271 Ptla | | Amount of Each Disbursement this Period 1023.20 |
| City Portland State OR Zip Code 97207-1271 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement insurance premium Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Regence Blue Cross Blue Shield | | Transaction ID: D4696 Date of Disbursement 08 / 16 / 2006 |
| Mailing Address 100 SW Market St. PO Box 1271 Ptla | | Amount of Each Disbursement this Period 826.80 |
| City Portland State OR Zip Code 97207-1271 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement insurance premium Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 2687.10 |
| 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)

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Regence Blue Cross Blue Shield | | Transaction ID: D4760 Date of Disbursement 09 / 14 / 2006 |
| Mailing Address 100 SW Market St. PO Box 1271 Ptla | | Amount of Each Disbursement this Period 826.80 |
| City Portland State OR Zip Code 97207-1271 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement insurance premium Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Ryan McKinstry | | Transaction ID: D4586 Date of Disbursement 07 / 01 / 2006 |
| Mailing Address 0615 Palatine Hill Rd. MSC 1885 | | Amount of Each Disbursement this Period 131.88 |
| City Portland State OR Zip Code 97219 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement salary Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Sestak for Congress | | Transaction ID: D4763 Date of Disbursement 09 / 14 / 2006 |
| Mailing Address PO Box 16 | | Amount of Each Disbursement this Period 1000.00 |
| City Media State PA Zip Code 19063 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement contribution Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 1958.68 |
| 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)

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| | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17 | <input type="checkbox"/> | 18 | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/> | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|---|
| A. Sierra Club Political Committee Full Name (Last, First, Middle Initial) Mailing Address 408 C St. NE City Washington State DC Zip Code 20002 Purpose of Disbursement website listing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4846 Date of Disbursement 08 / 10 / 2006 Amount of Each Disbursement this Period 10.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 * in-kind received |
|--|--|---|

| | | |
|--|--|---|
| B. Sierra Springs Full Name (Last, First, Middle Initial) Mailing Address 802 NE Davis St. City Portland State OR Zip Code 97232-2998 Purpose of Disbursement water Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4587 Date of Disbursement 07 / 01 / 2006 Amount of Each Disbursement this Period 26.81 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|--|--|---|

| | | |
|--|--|---|
| C. Sierra Springs Full Name (Last, First, Middle Initial) Mailing Address 802 NE Davis St. City Portland State OR Zip Code 97232-2998 Purpose of Disbursement water Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4702 Date of Disbursement 08 / 01 / 2006 Amount of Each Disbursement this Period 26.91 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|--|--|---|

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|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 63.72 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

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)

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|---|
| A. Sierra Springs Full Name (Last, First, Middle Initial) Mailing Address 802 NE Davis St. City Portland State OR Zip Code 97232-2998 Purpose of Disbursement water Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4701 Date of Disbursement 08 / 22 / 2006 Amount of Each Disbursement this Period 26.91 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|--|--|---|

| | | |
|--|--|---|
| B. State of Oregon Full Name (Last, First, Middle Initial) Mailing Address The Capitol City State of State OR Zip Code 97301 Purpose of Disbursement voter pamphlet Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4703 Date of Disbursement 08 / 25 / 2006 Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|--|--|---|

| | | |
|---|--|--|
| C. Sub Station Full Name (Last, First, Middle Initial) Mailing Address 12448 SW Broadway City Beaverton State OR Zip Code 97005 Purpose of Disbursement catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4764 Date of Disbursement 09 / 14 / 2006 Amount of Each Disbursement this Period 300.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|---|--|--|

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 1326.91 |
| 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)

| | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17 | <input type="checkbox"/> | 18 | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/> | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | | |
|--|--|---|---|
| Full Name (Last, First, Middle Initial) A. Swen Graham | | Transaction ID: D4591 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 6 | |
| Mailing Address 2367 NW Glisan #8 | | Amount of Each Disbursement this Period 1691.30 | |
| City Portland | State OR | Zip Code 97232 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| Purpose of Disbursement salary | | Category/ Type | |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: _____ District: _____ | | | |

| | | | |
|--|--|---|---|
| Full Name (Last, First, Middle Initial) B. Swen Graham | | Transaction ID: D4594 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 3 / 2 0 0 6 | |
| Mailing Address 2367 NW Glisan #8 | | Amount of Each Disbursement this Period 759.80 | |
| City Portland | State OR | Zip Code 97232 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| Purpose of Disbursement travel expenses | | Category/ Type | |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: _____ District: _____ | | | |

| | | | |
|--|--|---|---|
| Full Name (Last, First, Middle Initial) C. Swen Graham | | Transaction ID: D4588 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 6 | |
| Mailing Address 2367 NW Glisan #8 | | Amount of Each Disbursement this Period 1691.30 | |
| City Portland | State OR | Zip Code 97232 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| Purpose of Disbursement salary | | Category/ Type | |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: _____ District: _____ | | | |

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|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 4142.40 |
| 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 129 / 139

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|--|
| <p>A. Swen Graham</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 2367 NW Glisan #8</p> <p>City Portland State OR Zip Code 97232</p> <p>Purpose of Disbursement postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> | | <p>Transaction ID: D4705</p> <p>Date of Disbursement</p> <p><input type="text" value="08"/> / <input type="text" value="01"/> / <input type="text" value="2006"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="20.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>Disbursement For: 2006</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p> | | <p>Category/Type</p> |

| | | |
|--|--|---|
| <p>B. Swen Graham</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 2367 NW Glisan #8</p> <p>City Portland State OR Zip Code 97232</p> <p>Purpose of Disbursement travel and expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> | | <p>Transaction ID: D4704</p> <p>Date of Disbursement</p> <p><input type="text" value="08"/> / <input type="text" value="22"/> / <input type="text" value="2006"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="201.83"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>Disbursement For: 2006</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p> | | <p>Category/Type</p> |

| | | |
|---|--|--|
| <p>C. Swen Graham</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 2367 NW Glisan #8</p> <p>City Portland State OR Zip Code 97232</p> <p>Purpose of Disbursement salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> | | <p>Transaction ID: D4765</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2006"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1691.30"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>Disbursement For: 2006</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p> | | <p>Category/Type</p> |

SUBTOTAL of Disbursements This Page (optional) ►

1913.13

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 130 / 139

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) A. Swen Graham | | Transaction ID: D4766 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6 | |
| Mailing Address 2367 NW Glisan #8 | | Amount of Each Disbursement this Period 1691.30 | |
| City Portland State OR Zip Code 97232 | Purpose of Disbursement salary Candidate Name | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) B. Talay Thai Restaurant | | Transaction ID: D4595 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 5 / 2 0 0 6 | |
| Mailing Address 406 1st St. SE | | Amount of Each Disbursement this Period 804.00 | |
| City Washington State DC Zip Code 20003 | Purpose of Disbursement catering Candidate Name | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) C. Terris Barnes Walters | | Transaction ID: D4707 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6 | |
| Mailing Address 400 Montgomery St. #900 | | Amount of Each Disbursement this Period 5840.50 | |
| City San Francisco State CA Zip Code 94104 | Purpose of Disbursement printing Candidate Name | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type | |

| | |
|--|----------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 8335.80 |
| 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)

| | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17 | <input type="checkbox"/> | 18 | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/> | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. The UPS Store | | Transaction ID: D4597 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 6 |
| Mailing Address 818 SW 3rd Ave | | Amount of Each Disbursement this Period 360.72 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Portland State OR Zip Code 97204 | Purpose of Disbursement shipping Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. The UPS Store | | Transaction ID: D4598 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 7 / 2 0 0 6 |
| Mailing Address 818 SW 3rd Ave | | Amount of Each Disbursement this Period 549.66 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Portland State OR Zip Code 97204 | Purpose of Disbursement shipping Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. The UPS Store | | Transaction ID: D4708 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 8 / 2 0 0 6 |
| Mailing Address 818 SW 3rd Ave | | Amount of Each Disbursement this Period 35.31 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Portland State OR Zip Code 97204 | Purpose of Disbursement shipping Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 945.69 |
| 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)

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|--|
| A. UPS Full Name (Last, First, Middle Initial) Mailing Address PO Box 505820 City The Lakes State NV Zip Code 88905-5820 Purpose of Disbursement shipping Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4605 Date of Disbursement 07 / 01 / 2006 Amount of Each Disbursement this Period 132.08 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|--|--|--|

| | | |
|--|--|--|
| B. UPS Full Name (Last, First, Middle Initial) Mailing Address PO Box 505820 City The Lakes State NV Zip Code 88905-5820 Purpose of Disbursement shipping Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4606 Date of Disbursement 07 / 07 / 2006 Amount of Each Disbursement this Period 1.60 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|--|--|--|

| | | |
|---|--|---|
| C. USPS Full Name (Last, First, Middle Initial) Mailing Address Postmaster General City Portland State OR Zip Code 97201 Purpose of Disbursement postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4608 Date of Disbursement 07 / 05 / 2006 Amount of Each Disbursement this Period 10.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|---|--|---|

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 143.68 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

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)

| | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17 | <input type="checkbox"/> | 18 | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/> | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. USPS | | Transaction ID: D4607 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 7 / 2 0 0 6 |
| Mailing Address Postmaster General | | Amount of Each Disbursement this Period 160.00 |
| City Portland State OR Zip Code 97201 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement permit fee Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) B. USPS | | Transaction ID: D4610 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 9 / 2 0 0 6 |
| Mailing Address Postmaster General | | Amount of Each Disbursement this Period 600.00 |
| City Portland State OR Zip Code 97201 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement postage Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) C. USPS | | Transaction ID: D4611 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 6 |
| Mailing Address Postmaster General | | Amount of Each Disbursement this Period 942.72 |
| City Portland State OR Zip Code 97201 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement postage Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

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|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 1702.72 |
| 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)

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. USPS | | Transaction ID: D4609 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 7 / 2 0 0 6 |
| Mailing Address Postmaster General | | Amount of Each Disbursement this Period 347.12 |
| City Portland State OR Zip Code 97201 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement postage Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. USPS | | Transaction ID: D4769 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6 |
| Mailing Address Postmaster General | | Amount of Each Disbursement this Period 1107.79 |
| City Portland State OR Zip Code 97201 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement postage Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Verizon | | Transaction ID: D4612 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 6 |
| Mailing Address 635 SW Morrison St. | | Amount of Each Disbursement this Period 96.30 |
| City Portland State OR Zip Code 97205 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement phone service Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 1551.21 |
| 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 135 / 139

| | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17 | <input type="checkbox"/> | 18 | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/> | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|---|--|---|
| A. Verizon Full Name (Last, First, Middle Initial) Mailing Address 635 SW Morrison St. City Portland State OR Zip Code 97205 Purpose of Disbursement phone service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4710 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6 Amount of Each Disbursement this Period 93.26 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|---|--|---|

| | | |
|---|--|---|
| B. Verizon Full Name (Last, First, Middle Initial) Mailing Address 635 SW Morrison St. City Portland State OR Zip Code 97205 Purpose of Disbursement phone service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4711 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6 Amount of Each Disbursement this Period 98.36 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|---|--|---|

| | | |
|---|--|---|
| C. Lesley B. Williams Full Name (Last, First, Middle Initial) Mailing Address 3477 Walling Way City West Linn State OR Zip Code 97068 Purpose of Disbursement salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4552 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 6 Amount of Each Disbursement this Period 3130.09 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|---|--|---|

| | |
|--|----------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 3321.71 |
| 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 136 / 139

| | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17 | <input type="checkbox"/> | 18 | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/> | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21 |

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NAME OF COMMITTEE (In Full)
Dave Wu for US Congress

| | | |
|--|--|---|
| A. Lesley B. Williams Full Name (Last, First, Middle Initial) Mailing Address 3477 Walling Way City West Linn State OR Zip Code 97068 Purpose of Disbursement salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4744 Date of Disbursement 09 / 01 / 2006 Amount of Each Disbursement this Period 3130.09 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|--|--|---|

| | | |
|--|--|---|
| B. Lesley B. Williams Full Name (Last, First, Middle Initial) Mailing Address 3477 Walling Way City West Linn State OR Zip Code 97068 Purpose of Disbursement salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4743 Date of Disbursement 09 / 29 / 2006 Amount of Each Disbursement this Period 3130.09 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|--|--|---|

| | | |
|--|--|--|
| C. Witham and Dickey Full Name (Last, First, Middle Initial) Mailing Address PO Box 4625 City Portland State OR Zip Code 97208-4625 Purpose of Disbursement printing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D4715 Date of Disbursement 08 / 08 / 2006 Amount of Each Disbursement this Period 298.95 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|--|--|--|

| | |
|--|------------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 6559.13 |
| TOTAL This Period (last page this line number only) ▶ | 183815.93 |

SCHEDULE C (FEC Form 3)

LOANS

| | |
|---|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | PAGE 137 / 139 |
| | FOR LINE NUMBER: (check only one) <input type="checkbox"/> 13a <input checked="" type="checkbox"/> 13b |

NAME OF COMMITTEE (In Full)
 Dave Wu for US Congress

Transaction ID: L2

| | |
|---|--|
| LOAN SOURCE Full Name (Last, First, Middle Initial) Merrill Lynch | Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Mailing Address 1211 SW 5th Ave Suite 2400 | |
| City Portland State OR ZIP Code 97204 | |

| | | |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 20000.00 | 3950.00 | 16050.00 |

TERMS

| | | | |
|----------------------------|----------|---------------|---|
| Date Incurred | Date Due | Interest Rate | Secured: |
| M M 10 D D 30 Y Y Y Y 1998 | 20070924 | 0 % (apr) | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

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

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

| | |
|---|-----------------|
| SUBTOTALS This Period This Page (optional) | 16050.00 |
| TOTALS This Period (last page in this line only) | 16050.00 |

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

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
 Dave Wu for US Congress

| | |
|---|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor David Wu | Nature of Debt (Purpose): interest on bank loan |
| Mailing Address 3810 SW Martins Lane | |
| City State ZIP Code Portland OR 97201 | |

| | | |
|---|------------------------------|---|
| Outstanding Balance Beginning This Period 12724.23 | Transaction ID: D3463 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 12724.23 |

| | |
|--|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gunther Oakey | Nature of Debt (Purpose): salary bonus |
| Mailing Address 61055 Batchelor View Dr. | |
| City State ZIP Code Bend OR 97720 | |

| | | |
|--|------------------------------|--|
| Outstanding Balance Beginning This Period 1600.00 | Transaction ID: D3462 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 1600.00 |

| | |
|--|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Sarah Wiecks Howell | Nature of Debt (Purpose): salary bonus |
| Mailing Address 411 Ridgeway Road | |
| City State ZIP Code Lake Oswego OR 97034 | |

| | | |
|--|------------------------------|--|
| Outstanding Balance Beginning This Period 2000.00 | Transaction ID: D2200 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 2000.00 |

| | |
|--|-----------------|
| 1) SUBTOTALS This Period This Page (optional)..... | 16324.23 |
| 2) TOTALS This Period (last page this line number only)..... | |
| 3) TOTALS OUTSTANDING LOANS from Schedule C (last page only)..... | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | |

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

| | | |
|---|--------------------------------------|--|
| (Use separate schedule(s) for each numbered line) | PAGE 139 / 139 | |
| | FOR LINE NUMBER: (check only one) | <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10 |

NAME OF COMMITTEE (In Full)
 Dave Wu for US Congress

| | |
|--|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Thor D. Hesla | Nature of Debt (Purpose): salary bonus |
| Mailing Address 220-3rd St., SE | |
| City State ZIP Code Washington DC 20003 | |

| | | |
|---|------------------------------|---|
| Outstanding Balance Beginning This Period | Transaction ID: D2501 | |
| 13000.00 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | 0.00 | 13000.00 |

| | |
|--|----------|
| 1) SUBTOTALS This Period This Page (optional)..... | 13000.00 |
| 2) TOTALS This Period (last page this line number only)..... | 29324.23 |
| 3) TOTALS OUTSTANDING LOANS from Schedule C (last page only)..... | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | |