

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines.

12FE4M5

Matthew Robinson for Congress

ADDRESS (number and street) 2251 Dick George Rd.

Check if different than previously reported. (ACC)

Cave Junction

OR

97523

2. **FEC IDENTIFICATION NUMBER** ▼

C C00519850

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

OR

04

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y
04 / 26 / 2012

through

M M / D D / Y Y Y Y
06 / 30 / 2012

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 Noah Robinson

Signature of Treasurer Noah Robinson

[Electronically Filed]

Date

M M / D D / Y Y Y Y
07 / 15 / 2012

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

Office Use Only								
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Matthew Robinson for Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	28950.52	40690.52
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	28950.52	40690.52
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	11162.65	40224.83
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	11162.65	40224.83
8. Cash on Hand at Close of Reporting Period (from Line 27).....	3412.06	
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).....	22946.37	

For further information contact:

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

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

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

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- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

Matthew Robinson for Congress

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

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of <input type="text" value="05"/> / <input type="text" value="15"/> / <input type="text" value="2012"/> (date of general election)	COLUMN C Total for <input type="text" value="05"/> / <input type="text" value="16"/> / <input type="text" value="2012"/> (date after general election) through <input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2012"/> (last day of reporting period)
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
<input type="text" value="19098.00"/>	<input type="text" value="26998.00"/>	<input type="text" value="0.00"/>
(ii) Unitemized		
<input type="text" value="9852.52"/>	<input type="text" value="13517.52"/>	<input type="text" value="0.00"/>
(iii) Total of contributions from individuals		
<input type="text" value="28950.52"/>	<input type="text" value="40515.52"/>	<input type="text" value="0.00"/>
(b) Political Party Committees		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) Other Political Committees		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	175.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
28950.52	40690.52	0.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	22946.37	0.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	22946.37	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
0.00	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	0.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
28950.52	63636.89	0.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

Write or Type Committee Name

Matthew Robinson for Congress

Report Covering the Period: From: 04 / 26 / 2012 To: 06 / 30 / 2012

II. DISBURSEMENTS

Table with 3 columns: COLUMN A Total this Period, COLUMN B Election Cycle Total as of *, COLUMN C Total for * through *. Rows include: 17. OPERATING EXPENDITURES (11162.65, 40224.83, 0.00), 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES (0.00, 0.00, 0.00), 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate (0.00, 0.00, 0.00), (b) Of All Other Loans (0.00, 0.00, 0.00), (c) TOTAL LOAN REPAYMENTS (0.00, 0.00, 0.00), 20. REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political Committees (0.00, 0.00, 0.00), (b) Political Party Committees (0.00, 0.00, 0.00).

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
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(c) Other Political Committees (such as PACs)

0.00	0.00	0.00
------	------	------

(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

0.00	0.00	0.00
------	------	------

21. OTHER DISBURSEMENTS

20000.00	20000.00	0.00
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22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)

31162.65	60224.83	0.00
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III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

28950.52	40690.52	0.00
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IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

11162.65	40224.83	0.00
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V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	5624.19
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	28950.52
25. SUBTOTAL (add Line 23 and Line 24).....	34574.71
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	31162.65
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	3412.06

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 18
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Matthew Robinson for Congress

A. Full Name (Last, First, Middle Initial)
Carl Alleman

Mailing Address 911 Reeves Creek Rd.
P. O. Box 309

City Selma State OR Zip Code 97538

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
249.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 15 / 2012

Transaction ID : SA11AI.4610

Amount of Each Receipt this Period
199.00

B. Full Name (Last, First, Middle Initial)
Carl Alleman

Mailing Address 911 Reeves Creek Rd.
P. O. Box 309

City Selma State OR Zip Code 97538

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
448.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 15 / 2012

Transaction ID : SA11AI.4611

Amount of Each Receipt this Period
199.00

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

Mailing Address P.O. Box 11390

City Midland State TX Zip Code 79702

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

Name of Employer Occupation
Petroleum Engineer Self

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 11 / 2012

Transaction ID : SA11AI.4302

Amount of Each Receipt this Period
1000.00

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

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

1398.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 18
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Matthew Robinson for Congress

A. Full Name (Last, First, Middle Initial)
Channing Chrisman

Mailing Address 654 Georgia Ave.

City Palo Alto State CA Zip Code 94306

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

Name of Employer Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 11 / 2012

Transaction ID : SA11AI.4533

Amount of Each Receipt this Period
 250.00

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

Mailing Address 4401 Orwood Rd. #A87

City Brentwood State CA Zip Code 94513

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

Name of Employer Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 06 / 2012

Transaction ID : SA11AI.4491

Amount of Each Receipt this Period
 500.00

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

Mailing Address 20 Ocean Club Dr.

City Amelia Island State FL Zip Code 32034

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

Name of Employer Occupation Retired Audio Engineer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 09 / 2012

Transaction ID : SA11AI.4509

Amount of Each Receipt this Period
 2500.00

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

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

3250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 18
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Matthew Robinson for Congress

Full Name (Last, First, Middle Initial) A. James Foley		Date of Receipt M M / D D / Y Y Y Y 05 / 10 / 2012	
Mailing Address P.O. Box 1217		Transaction ID : SA11AI.4292	
City Cave Junction	State OR	Zip Code 97523	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) B. Steven Friedrich		Date of Receipt M M / D D / Y Y Y Y 05 / 14 / 2012	
Mailing Address 5261 Hollow Ln.		Transaction ID : SA11AI.4608	
City Greenwood	State CA	Zip Code 95635	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Layered Logic Inc.	Occupation Programmer		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) C. Sally Hayes		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2012	
Mailing Address 927 N.W. 40th Drive		Transaction ID : SA11AI.4606	
City Gainesville	State FL	Zip Code 32605	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Self	Occupation Homemaker		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 18
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Matthew Robinson for Congress

A. Full Name (Last, First, Middle Initial)
Fred Kapetnasky

Mailing Address 2599 Sonata Dr.

City Columbus State OH Zip Code 43209

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

Name of Employer Self Occupation Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 06 / 2012

Transaction ID : SA11AI.4465

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Walter Kendall

Mailing Address 1211 Tyler St.

City Glendale State CA Zip Code 91205

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

Name of Employer Self Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 28 / 2012

Transaction ID : SA11AI.4365

Amount of Each Receipt this Period
 200.00

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

Mailing Address P. O. Box 7066

City Carmel State CA Zip Code 93921

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 28 / 2012

Transaction ID : SA11AI.4326

Amount of Each Receipt this Period
 250.00

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

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

700.00

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

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

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NAME OF COMMITTEE (In Full)
Matthew Robinson for Congress

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

Mailing Address 14611 Minnich Rd.

City Hoagland State IN Zip Code 46745

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 09 / 2012

Transaction ID : SA11AI.4296

Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
Doris Lawson

Mailing Address 14611 Minnich Rd.

City Hoagland State IN Zip Code 46745

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 09 / 2012

Transaction ID : SA11AI.4298

Amount of Each Receipt this Period
 2500.00

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

Mailing Address 62873 Windrift Rd.

City Joseph State OR Zip Code 97846

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

Name of Employer Self Occupation Farmer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2012

Transaction ID : SA11AI.4561

Amount of Each Receipt this Period
 2500.00

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

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

7500.00

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

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

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NAME OF COMMITTEE (In Full)
Matthew Robinson for Congress

A. Full Name (Last, First, Middle Initial)
Thomas Lowinger

Mailing Address 155 W. 68th St. Apt. 517

City New York State NY Zip Code 10023

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

Name of Employer The Brooklyn Hospital Center Occupation Physicist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 14 / 2012

Transaction ID : SA11AI.4549

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Jonathan May

Mailing Address 7000 Lakepointe Dr.

City Oklahoma City State OK Zip Code 73116

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

Name of Employer Self Occupation Sales

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 26 / 2012

Transaction ID : SA11AI.4310

Amount of Each Receipt this Period
 500.00

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

Mailing Address 10405 Trail Haven Rd.

City Rogers State MN Zip Code 55374

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 15 / 2012

Transaction ID : SA11AI.4567

Amount of Each Receipt this Period
 250.00

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

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

1000.00

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

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

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NAME OF COMMITTEE (In Full)
Matthew Robinson for Congress

Full Name (Last, First, Middle Initial) A. George Beverly Shea		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 10 / 2012
Mailing Address P.O. Box 1029		Transaction ID : SA11AI.4305
City Montreat	State NC	
Zip Code 28757		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self	Occupation Vocalist	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) B. Georges St. Laurent, Jr.		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 15 / 2012
Mailing Address 120 NE 35th St. Ste. 200		Transaction ID : SA11AI.4581
City Vancouver	State WA	
Zip Code 98684		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer St. Laurent Properties	Occupation Owner	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) C. Margaret Thomson		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 06 / 2012
Mailing Address 206 Macintosh Lane		Transaction ID : SA11AI.4463
City Centerville	State GA	
Zip Code 31028		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer F. H. Thomson Co. Inc.	Occupation Business Owner	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	2250.00
TOTAL This Period (last page this line number only).....	19098.00

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

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NAME OF COMMITTEE (In Full)
Matthew Robinson for Congress

Full Name (Last, First, Middle Initial) A. Dalton Marketing		Date of Disbursement MM / DD / YYYY 05 / 07 / 2012
Mailing Address P.O. Box 2279		Amount of Each Disbursement this Period 6150.33 Transaction ID : SB17.4621
City White City	State OR	
Zip Code 97503	Purpose of Disbursement 004	
Candidate Name Matthew Robinson for Congress		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OR	District: 04	

Full Name (Last, First, Middle Initial) B. Paypal		Date of Disbursement MM / DD / YYYY 05 / 15 / 2012
Mailing Address 2211 North First St.		Amount of Each Disbursement this Period 300.57 Transaction ID : SB17.4625
City San Jose	State CA	
Zip Code 95131	Purpose of Disbursement 003	
Candidate Name Matthew Robinson for Congress		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OR	District: 04	

Full Name (Last, First, Middle Initial) c. West Coast Paper		Date of Disbursement MM / DD / YYYY 05 / 15 / 2012
Mailing Address 3600 Avion Drive		Amount of Each Disbursement this Period 4711.75 Transaction ID : SB17.4623
City Medford	State OR	
Zip Code 97504	Purpose of Disbursement Printing and Mailing	
Candidate Name Matthew Robinson for Congress		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OR	District: 04	

SUBTOTAL of Disbursements This Page (optional).....	11162.65
TOTAL This Period (last page this line number only).....	11162.65

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

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NAME OF COMMITTEE (In Full)
Matthew Robinson for Congress

Full Name (Last, First, Middle Initial) A. Matthew Robinson for Congress		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2012
Mailing Address 2251 Dick George Rd.		Amount of Each Disbursement this Period 20000.00 Transaction ID : SB21.4628
City Cave Junction State OR Zip Code 97523	Purpose of Disbursement Loan Repayment 009 Category/Type	
Candidate Name Matthew Robinson for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OR District: 04		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	20000.00
TOTAL This Period (last page this line number only).....	20000.00

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4101

Matthew Robinson for Congress

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

[PERSONAL FUNDS]

Election: 2012

Matthew Robinson for Congress

Primary

General

Other (specify) ▼

Mailing Address

2251 Dick George Rd.

City

State

ZIP Code

Cave Junction

OR

97523

Original Amount of Loan

100.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100.00

TERMS

Date Incurred

M 03 /

D 06 /

Y 2012 Y

Date Due

M /

D /

Y 1/1/2013 Y

Interest Rate

0.00

% (apr)

Secured:

Yes

No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶

100.00

TOTALS This Period (last page in this line only)..... ▶

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4102

Matthew Robinson for Congress

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

[PERSONAL FUNDS]

Election: 2012

Matthew Robinson for Congress

Primary

General

Other (specify) ▼

Mailing Address

2251 Dick George Rd.

City

State

ZIP Code

Cave Junction

OR

97523

Original Amount of Loan

2500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2500.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

03 / 08 / 2012

1/1/2013

0.00 % (apr)

Yes No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶

2500.00

TOTALS This Period (last page in this line only)..... ▶

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4103

Matthew Robinson for Congress

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

[PERSONAL FUNDS]

Election: 2012

Matthew Robinson for Congress

Primary

General

Other (specify) ▼

Mailing Address

2251 Dick George Rd.

City

State

ZIP Code

Cave Junction

OR

97523

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

20346.37

0.00

20346.37

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

04

17

2012

1/1/2013

0.00

% (apr)

Yes

No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶

20346.37

TOTALS This Period (last page in this line only)..... ▶

22946.37

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