

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Oregon Republican Party

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		45558.56
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	400.27									
(c) Total Receipts (from Line 19)	37490.82	265692.44								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	37891.09	311251.00								
7. Total Disbursements (from Line 31)	37152.77	310612.68								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	738.32	638.32								
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)	110682.02									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

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**

Write or Type Committee Name
Oregon Republican Party

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	24163.00	67148.94
(i) Itemized (use Schedule A)		
(ii) Unitemized	9186.00	115560.84
(iii) TOTAL (add Lines 11(a)(i) and (ii)	33349.00	182709.78
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	7000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	33349.00	189709.78
12. Transfers From Affiliated/Other Party Committees	1200.00	1200.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	142.43
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	2941.82	74640.23
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	2941.82	74640.23
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	37490.82	265692.44
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	34549.00	191052.21

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	7017.08	45779.95
(ii) Non-Federal Share.....	12474.79	81386.63
(b) Other Federal Operating Expenditures.....	8754.22	47890.64
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	28246.09	175057.22
22. Transfers to Affiliated/Other Party Committees.....	0.00	30031.64
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	3900.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	8906.68	101623.82
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	8906.68	101623.82
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	37152.77	310612.68
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	24677.98	229226.05

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3	33349.00	189709.78
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	33349.00	189709.78
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	15771.30	93670.59
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	142.43
38. Net Operating Expenditures (subtract Line 37 from Line 36)	15771.30	93528.16

SCHEDULE L (FEC Form 3X)

AGGREGATION PAGE: LEVIN FUNDS

Transaction ID: SL1

NAME OF COMMITTEE (In Full) Oregon Republican Party
NAME OF ACCOUNT KEY LEVIN

	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
a. Itemized..... (Use Schedule L-A)	0.00	0.00
b. Unitemized.....	0.00	0.00
c. Total.....	0.00	0.00
2. OTHER RECEIPTS.....	0.00	0.00
3. TOTAL RECEIPTS..... (Add Lines 1c and 2)	0.00	0.00
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
a. Voter Registration.....	0.00	0.00
b. Voter ID.....	0.00	0.00
c. GOTV.....	0.00	0.00
d. Generic Campaign.....	0.00	0.00
e. Total.....	0.00	0.00
5. OTHER DISBURSEMENTS.....	10.75	96.75
6. TOTAL DISBURSEMENTS..... (Add Lines 4e and 5)	10.75	96.75
7. BEGINNING CASH ON HAND..... (for Column B, use cash as of January 1st)	647.25	733.25
8. RECEIPTS..... (from Line 3)	0.00	0.00
9. SUBTOTAL..... (Add Lines 7 and 8)	647.25	733.25
10. DISBURSEMENTS..... (From Line 6)	10.75	96.75
11. ENDING CASH ON HAND..... (Subtract Line 10 From Line 9)	636.50	636.50

**SCHEDULE L-B (FEC Form 3X)
ITEMIZED DISBURSEMENTS
OF LEVIN FUNDS**

Use separate schedule(s) for each category of the Aggregation Page	FOR LINE NUMBER: (check only one)		PAGE 7 / 47
	<input type="checkbox"/> 4a	<input type="checkbox"/> 4c	<input checked="" type="checkbox"/> 5
	<input type="checkbox"/> 4b	<input type="checkbox"/> 4d	

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) / Full Organization Name Oregon Republican Party	Transaction ID: 4B71118.E13302 Date of Disbursement
	Mailing Address c/o Key Bank Levin Account 1500 Edgewater St NW	<input type="text" value="09"/> <input type="text" value="09"/> / <input type="text" value="30"/> <input type="text" value="30"/> / <input type="text" value="2007"/> <input type="text" value="2007"/>
	City Salem State OR Zip Code 97302	Amount of Each Disbursement this Period <input type="text" value="10.75"/>
	Purpose of Disbursement Bank fees	Account: 8

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="10.75"/>
TOTAL This Period (last page this line number only)	<input type="text" value="10.75"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 47
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
James E. Anderson

Mailing Address 1526 SW Meteor PI

City State Zip Code
Troutdale OR 97060-5427

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 485.00

Date of Receipt 09 / 25 / 2007

Transaction ID: 71015.C93056

Amount of Each Receipt this Period 325.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Betty Atteberry

Mailing Address 3720 NW Bronson Crest Loop

City State Zip Code
Portland OR 97229-7064

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 09 / 12 / 2007

Transaction ID: 70925.C92812

Amount of Each Receipt this Period 200.00

Receipt

C.

Full Name (Last, First, Middle Initial)
George Ken Austin

Mailing Address PO Box 209

City State Zip Code
Newberg OR 97132-0209

FEC ID number of contributing federal political committee. C

Name of Employer Adec. Inc. Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 26 / 2007

Transaction ID: 71015.C93075

Amount of Each Receipt this Period 10000.00

Receipt

SUBTOTAL of Receipts This Page (optional)	10525.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 47
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) Joan Austin	Date of Receipt MM / DD / YYYY 09 / 28 / 2007
	Mailing Address PO Box 209	Transaction ID: 71015.C93101
	City State Zip Code Newberg OR 97132-0209	Amount of Each Receipt this Period 10000.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation A-dec, Inc. CEO	NOTE: Seeking Redesignati- on
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 13000.00	

B.	Full Name (Last, First, Middle Initial) Bob Avery	Date of Receipt MM / DD / YYYY 09 / 10 / 2007
	Mailing Address PO Box 580	Transaction ID: 70925.C92809
	City State Zip Code Junction City OR 97448-0580	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Excel phone systems	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

C.	Full Name (Last, First, Middle Initial) Bob Avery	Date of Receipt MM / DD / YYYY 09 / 25 / 2007
	Mailing Address PO Box 580	Transaction ID: 71015.C93073
	City State Zip Code Junction City OR 97448-0580	Amount of Each Receipt this Period 345.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Excel phone systems	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.00	

SUBTOTAL of Receipts This Page (optional)	▶	10365.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 47
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
Donna Cain

Mailing Address 6580 E Evans Creek Rd

City State Zip Code
Rogue River OR 97537-9605

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1214.94

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 04 / 2007

Transaction ID: 70920.C92760

Amount of Each Receipt this Period
478.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Kitty Harmon

Mailing Address 8105 N Haven Ave

City State Zip Code
Portland OR 97203-3417

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

Name of Employer Occupation
University of Portland Academic Counselor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 25 / 2007

Transaction ID: 71015.C93057

Amount of Each Receipt this Period
175.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Thomas Harmon

Mailing Address 8105 N Haven Ave

City State Zip Code
Portland OR 97203-3417

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 25 / 2007

Transaction ID: 71015.C93058

Amount of Each Receipt this Period
225.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **878.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 47
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
Dorothy Hess

Mailing Address 13669 Gaffney Ln Apt 23

City Oregon City State OR Zip Code 97045-8961

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 09 / 25 / 2007

Transaction ID: 71015.C93063

Amount of Each Receipt this Period 100.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Nonnie Hussa

Mailing Address 2090 Summit Dr

City Lake Oswego State OR Zip Code 97034-3624

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 09 / 19 / 2007

Transaction ID: 71002.C92928

Amount of Each Receipt this Period 100.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Eliot Jenkins

Mailing Address 13169 SE River Rd Apt 307T

City Portland State OR Zip Code 97222-9789

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 21 / 2007

Transaction ID: 71015.C93014

Amount of Each Receipt this Period 250.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 450.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 47
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
Louis Levy

Mailing Address PO Box 1186

City Pendleton State OR Zip Code 97801-0018

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

Name of Employer Self Occupation Rancher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 27 / 2007

Transaction ID: 71015.C93090

Amount of Each Receipt this Period 100.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Lovella Moore

Mailing Address 3600 Westover Blvd

City Central Point State OR Zip Code 97502-1345

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 21 / 2007

Transaction ID: 71015.C92997

Amount of Each Receipt this Period 100.00

Receipt

C.

Full Name (Last, First, Middle Initial)
William J. Moshofsky

Mailing Address 10585 SW 161st Ct

City Beaverton State OR Zip Code 97007-8171

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 09 / 25 / 2007

Transaction ID: 71015.C93061

Amount of Each Receipt this Period 100.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ 300.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 47
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Robert Neighbor
 Mailing Address 2130 SW Jefferson St Ste 315
 City State Zip Code
 Portland OR 97201-7711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RW Neighbor & Col Insurance Agent
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 200.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 10 / 2007
Transaction ID: 70925.C92787
 Amount of Each Receipt this Period
 100.00
 Receipt

B. Full Name (Last, First, Middle Initial)
Walter Rietz
 Mailing Address 69288 Sabrina Ln
 City State Zip Code
 Sisters OR 97759-9743
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired Retired
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 200.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 25 / 2007
Transaction ID: 71015.C93062
 Amount of Each Receipt this Period
 100.00
 Receipt

C. Full Name (Last, First, Middle Initial)
Robert L. Terry
 Mailing Address 9650 SW Hardebeck Rd
 City State Zip Code
 Gaston OR 97119-9017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Farmer
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 06 / 2007
Transaction ID: 70920.C92762
 Amount of Each Receipt this Period
 1000.00
 Receipt

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 47

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
Marvin Torbenson

Mailing Address 805 NE 90th Ave

City State Zip Code
Portland OR 97220-5736

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

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 14 / 2007

Transaction ID: 71002.C92884

Amount of Each Receipt this Period

300.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Solomon Yue

Mailing Address 265 50th Ave NW

City State Zip Code
Salem OR 97304-3221

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

Name of Employer Occupation
US Global Enterprising Co- President

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 285.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 25 / 2007

Transaction ID: 71015.C93072

Amount of Each Receipt this Period

45.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Leo Zupan

Mailing Address 1115 Barrington Cir

City State Zip Code
Ashland OR 97520-9551

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

Name of Employer Occupation
Self Real Estate Broker

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 200.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 21 / 2007

Transaction ID: 71015.C92998

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

445.00

TOTAL This Period (last page this line number only)

24163.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 15 / 47	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) Republican National Committee		Date of Receipt																					
	Mailing Address 310 First St SE		<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>8</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	8		2	0	0	7
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	9		2	8		2	0	0	7														
	City State Zip Code Washington DC 20003-		Transaction ID: 71002.C92872																					
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1200.00																					
Name of Employer Republican National Committee		Occupation Political Party																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1200.00																						

Transfers From Affil./Auth.

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

**SCHEDULE B (FEC Form 3X)
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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) CTS Holdings LLC	Transaction ID: 71018.E13109 Date of Disbursement 09 / 07 / 2007
	Mailing Address c/o Key Bank 1500 Edgewater St NW	Amount of Each Disbursement this Period 10.00
	City Salem State OR Zip Code 97304-	
	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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		MERCHANT FEES

B.	Full Name (Last, First, Middle Initial) CTS Holdings LLC	Transaction ID: 71018.E13111 Date of Disbursement 09 / 10 / 2007
	Mailing Address c/o Key Bank 1500 Edgewater St NW	Amount of Each Disbursement this Period 0.72
	City Salem State OR Zip Code 97304-	
	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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		MERCHANT FEES

C.	Full Name (Last, First, Middle Initial) CTS Holdings LLC	Transaction ID: 80222.E13515 Date of Disbursement 09 / 19 / 2007
	Mailing Address c/o Key Bank 1500 Edgewater St NW	Amount of Each Disbursement this Period 3.33
	City Salem State OR Zip Code 97304-	
	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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		MERCHANT FEES

SUBTOTAL of Disbursements This Page (optional)	14.05
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) CTS Holdings LLC	Transaction ID: 80222.E13516 Date of Disbursement 09 / 28 / 2007
	Mailing Address c/o Key Bank 1500 Edgewater St NW	Amount of Each Disbursement this Period 3.79
	City Salem State OR Zip Code 97304-	
	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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		MERCHANT FEES

B.	Full Name (Last, First, Middle Initial) Direct Mail Systems, Inc	Transaction ID: 80122.E13395 Date of Disbursement 09 / 01 / 2007
	Mailing Address 12450 Automobile Boulevard	Amount of Each Disbursement this Period 663.00
	City Clearwater State FL Zip Code 34622-	
	Purpose of Disbursement Party Building direct mail Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PARTY BUILDING DIRECT MAIL

C.	Full Name (Last, First, Middle Initial) European Car Clinic	Transaction ID: 71018.E13138 Date of Disbursement 09 / 26 / 2007
	Mailing Address 6015 Battle Creek Rd Se	Amount of Each Disbursement this Period 442.50
	City Salem State OR Zip Code 97317-	
	Purpose of Disbursement Auto Exp/OGOP Fundraising Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		AUTO EXP/OGOP FUNDRAISING

SUBTOTAL of Disbursements This Page (optional)	▶	1109.29
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) Internal Revenue Svc-Payroll Tax Dept.	Transaction ID: 80122.E13406 Date of Disbursement
	Mailing Address c/o Key Bank 1500 Edgewater St NW	<input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2007"/>
	City Salem State OR Zip Code 97304-	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll taxes	<input type="text" value="1581.84"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL TAXES

B.	Full Name (Last, First, Middle Initial) Internal Revenue Svc-Payroll Tax Dept.	Transaction ID: 80122.E13407 Date of Disbursement
	Mailing Address c/o Key Bank 1500 Edgewater St NW	<input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2007"/>
	City Salem State OR Zip Code 97304-	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll taxes	<input type="text" value="1000.00"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL TAXES

C.	Full Name (Last, First, Middle Initial) Key Bank**	Transaction ID: 80225.E13519 Date of Disbursement
	Mailing Address 1500 Edgewater St NW	<input type="text" value="09"/> / <input type="text" value="04"/> / <input type="text" value="2007"/>
	City Salem State OR Zip Code 97304-	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank fees	<input type="text" value="93.09"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		BANK FEES

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2674.93"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) Key Bank**	Transaction ID: 71018.E13108 Date of Disbursement 09 / 07 / 2007
	Mailing Address 1500 Edgewater St NW	Amount of Each Disbursement this Period 36.50
	City Salem State OR Zip Code 97304-	
	Purpose of Disbursement Bank fees Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		BANK FEES

B.	Full Name (Last, First, Middle Initial) Key Bank**	Transaction ID: 71018.E13107 Date of Disbursement 09 / 07 / 2007
	Mailing Address 1500 Edgewater St NW	Amount of Each Disbursement this Period 36.50
	City Salem State OR Zip Code 97304-	
	Purpose of Disbursement Bank fees Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		BANK FEES

C.	Full Name (Last, First, Middle Initial) Key Bank**	Transaction ID: 71018.E13110 Date of Disbursement 09 / 10 / 2007
	Mailing Address 1500 Edgewater St NW	Amount of Each Disbursement this Period 73.00
	City Salem State OR Zip Code 97304-	
	Purpose of Disbursement Bank fees Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		BANK FEES

SUBTOTAL of Disbursements This Page (optional)	▶	146.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) Key Bank**	Transaction ID: 71018.E13112 Date of Disbursement 09 / 18 / 2007
	Mailing Address 1500 Edgewater St NW	Amount of Each Disbursement this Period 20.00
	City Salem State OR Zip Code 97304-	
	Purpose of Disbursement Bank fees Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		BANK FEES

B.	Full Name (Last, First, Middle Initial) Key Bank**	Transaction ID: 71018.E13113 Date of Disbursement 09 / 20 / 2007
	Mailing Address 1500 Edgewater St NW	Amount of Each Disbursement this Period 36.50
	City Salem State OR Zip Code 97304-	
	Purpose of Disbursement Bank fees Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		BANK FEES

C.	Full Name (Last, First, Middle Initial) Key Bank**	Transaction ID: 71018.E13114 Date of Disbursement 09 / 21 / 2007
	Mailing Address 1500 Edgewater St NW	Amount of Each Disbursement this Period 36.50
	City Salem State OR Zip Code 97304-	
	Purpose of Disbursement Bank fees Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		BANK FEES

SUBTOTAL of Disbursements This Page (optional)	▶	93.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: (check only one)

PAGE 21 / 47

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) Key Bank**	Transaction ID: 71018.E13115 Date of Disbursement 09 / 21 / 2007
	Mailing Address 1500 Edgewater St NW	Amount of Each Disbursement this Period 109.50
	City Salem State OR Zip Code 97304-	
	Purpose of Disbursement Bank fees Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		BANK FEES

B.	Full Name (Last, First, Middle Initial) Key Bank**	Transaction ID: 80225.E13520 Date of Disbursement 09 / 26 / 2007
	Mailing Address 1500 Edgewater St NW	Amount of Each Disbursement this Period 318.00
	City Salem State OR Zip Code 97304-	
	Purpose of Disbursement Bank fees Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		BANK FEES

C.	Full Name (Last, First, Middle Initial) Key Bank**	Transaction ID: 80222.E13514 Date of Disbursement 09 / 30 / 2007
	Mailing Address 1500 Edgewater St NW	Amount of Each Disbursement this Period 3.50
	City Salem State OR Zip Code 97304-	
	Purpose of Disbursement Bank fees Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		BANK FEES

SUBTOTAL of Disbursements This Page (optional)	▶	431.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

<p>A. Full Name (Last, First, Middle Initial) Amy Langdon</p> <p>Mailing Address 2830 Foxhaven Dr SE</p> <p>City Salem State OR Zip Code 97306-2526</p> <p>Purpose of Disbursement FEA Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80122.E13397</p> <p>Date of Disbursement 09 / 01 / 2007</p> <p>Amount of Each Disbursement this Period 1671.12</p> <p>FEA PAYROLL</p>
<p>B. Full Name (Last, First, Middle Initial) Oregon Department of Revenue</p> <p>Mailing Address PO Box 14800</p> <p>City Salem State OR Zip Code 97309-</p> <p>Purpose of Disbursement Payroll taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80122.E13401</p> <p>Date of Disbursement 09 / 01 / 2007</p> <p>Amount of Each Disbursement this Period 368.15</p> <p>PAYROLL TAXES</p>
<p>C. Full Name (Last, First, Middle Initial) Republican National Committee</p> <p>Mailing Address 310 First St SE</p> <p>City Washington State DC Zip Code 20003-</p> <p>Purpose of Disbursement INKIND: Office Equipment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 71002.E13088</p> <p>Date of Disbursement 09 / 28 / 2007</p> <p>Amount of Each Disbursement this Period 1200.00</p> <p>INKIND: OFFICE EQUIPMENT</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>3239.27</p>
<p>TOTAL This Period (last page this line number only)</p>	

**SCHEDULE B (FEC Form 3X)
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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
Belinda Smith

Mailing Address 687 SW Concord Way

City State Zip Code
Beaverton OR 97006-

Purpose of Disbursement
FEA Payroll

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80122.E13403
Date of Disbursement

09 / 01 / 2007

Amount of Each Disbursement this Period

673.68

FEA PAYROLL

B.

Full Name (Last, First, Middle Initial)
World Trade Center & Catering

Mailing Address PO Box 3340

City State Zip Code
Portland OR 97208-

Purpose of Disbursement
Catering/OGOP

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 71018.E13122
Date of Disbursement

09 / 18 / 2007

Amount of Each Disbursement this Period

363.00

CATERING/OGOP

SUBTOTAL of Disbursements This Page (optional)

1036.68

TOTAL This Period (last page this line number only)

8744.22

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) Internal Revenue Svc-Payroll Tax Dept.	Transaction ID: 71018.E13129 Date of Disbursement
	Mailing Address c/o Key Bank 1500 Edgewater St NW	<input type="text" value="09"/> / <input type="text" value="14"/> / <input type="text" value="2007"/>
	City Salem State OR Zip Code 97304-	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll taxes	<input type="text" value="1581.82"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL TAXES

B.	Full Name (Last, First, Middle Initial) Amy Langdon	Transaction ID: 71018.E13124 Date of Disbursement
	Mailing Address 2830 Foxhaven Dr SE	<input type="text" value="09"/> / <input type="text" value="14"/> / <input type="text" value="2007"/>
	City Salem State OR Zip Code 97306-2526	Amount of Each Disbursement this Period
	Purpose of Disbursement FEA Payroll	<input type="text" value="1671.12"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA PAYROLL

C.	Full Name (Last, First, Middle Initial) LifeWise	Transaction ID: 71018.E13131 Date of Disbursement
	Mailing Address 815 SW Bond St	<input type="text" value="09"/> / <input type="text" value="18"/> / <input type="text" value="2007"/>
	City Bend State OR Zip Code 97702-	Amount of Each Disbursement this Period
	Purpose of Disbursement Health Insurance	<input type="text" value="354.85"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		HEALTH INSURANCE

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3607.79"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) Oregon Department of Revenue	Transaction ID: 71018.E13127 Date of Disbursement 09 / 14 / 2007
	Mailing Address PO Box 14800	Amount of Each Disbursement this Period 368.16
	City Salem State OR Zip Code 97309-	
	Purpose of Disbursement Payroll taxes	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL TAXES

B.	Full Name (Last, First, Middle Initial) Oregon Department of Revenue	Transaction ID: 71018.E13155 Date of Disbursement 09 / 28 / 2007
	Mailing Address PO Box 14800	Amount of Each Disbursement this Period 368.15
	City Salem State OR Zip Code 97309-	
	Purpose of Disbursement Payroll taxes	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL TAXES

C.	Full Name (Last, First, Middle Initial) Belinda Smith	Transaction ID: 71018.E13126 Date of Disbursement 09 / 14 / 2007
	Mailing Address 687 SW Concord Way	Amount of Each Disbursement this Period 673.68
	City Beaverton State OR Zip Code 97006-	
	Purpose of Disbursement FEA Payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional)	▶	1409.99
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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)
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) Smith Barney Investments Mailing Address 121 Sw Morrison St Ste 1600 City Portland State OR Zip Code 97204- Purpose of Disbursement IRA Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 70920.E13066 Date of Disbursement 09 / 01 / 2007 Amount of Each Disbursement this Period 1296.30 IRA CONTRIBUTION
B.	Full Name (Last, First, Middle Initial) Smith Barney Investments Mailing Address 121 Sw Morrison St Ste 1600 City Portland State OR Zip Code 97204- Purpose of Disbursement IRA Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80122.E13408 Date of Disbursement 09 / 01 / 2007 Amount of Each Disbursement this Period 1296.30 IRA CONTRIBUTION
C.	Full Name (Last, First, Middle Initial) Smith Barney Investments Mailing Address 121 Sw Morrison St Ste 1600 City Portland State OR Zip Code 97204- Purpose of Disbursement IRA Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71018.E13128 Date of Disbursement 09 / 14 / 2007 Amount of Each Disbursement this Period 1296.30 IRA CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional) ▶	3888.90
TOTAL This Period (last page this line number only) ▶	8906.68

SCHEDULE D (FEC Form 3X)

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)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Amy Langdon			Nature of Debt (Purpose): FEA Payroll
Mailing Address 2830 Foxhaven Dr SE			
City Salem	State OR	ZIP Code 97306-2526	

Outstanding Balance Beginning This Period <input type="text" value="1671.12"/>		Transaction ID: LS80122.E13397	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1671.12"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Amy Langdon			Nature of Debt (Purpose): FEA Payroll
Mailing Address 2830 Foxhaven Dr SE			
City Salem	State OR	ZIP Code 97306-2526	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: LS71018.E13152	
Amount Incurred This Period <input type="text" value="1671.12"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1671.12"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor FLS Connect			Nature of Debt (Purpose): telemarketing
Mailing Address 7320 N Dreamy Draw Dr			
City Phoenix	State AZ	ZIP Code 85020-5212	

Outstanding Balance Beginning This Period <input type="text" value="6374.10"/>		Transaction ID: LSE8395	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="6374.10"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="8045.22"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

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)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Direct Mail Systems, Inc			Nature of Debt (Purpose): Party Building direct mail
Mailing Address 12450 Automobile Boulevard			
City	State	ZIP Code	
Clearwater	FL	34622-	

Outstanding Balance Beginning This Period		Transaction ID: LS80122.E13395	
663.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	663.00	0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Oregon Department of Revenue			Nature of Debt (Purpose): Payroll taxes
Mailing Address PO Box 14800			
City	State	ZIP Code	
Salem	OR	97309-	

Outstanding Balance Beginning This Period		Transaction ID: LS80122.E13401	
368.15			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	368.15	0.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Belinda Smith			Nature of Debt (Purpose): FEA Payroll
Mailing Address 687 SW Concord Way			
City	State	ZIP Code	
Beaverton	OR	97006-	

Outstanding Balance Beginning This Period		Transaction ID: LS80122.E13403	
673.68			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	673.68	0.00	

1) SUBTOTALS This Period This Page (optional).....	▶	0.00
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL 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 3X)

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)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Belinda Smith			Nature of Debt (Purpose): FEA Payroll
Mailing Address 687 SW Concord Way			
City Beaverton	State OR	ZIP Code 97006-	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: LS71018.E13154	
Amount Incurred This Period <input type="text" value="673.68"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="673.68"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Electric Lightwave			Nature of Debt (Purpose): generic autodialer
Mailing Address PO Box 20553			
City Rochester	State NY	ZIP Code 14602-	

Outstanding Balance Beginning This Period <input type="text" value="348.88"/>		Transaction ID: LSE8087	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="348.88"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Certified Property			Nature of Debt (Purpose): Rent fees
Mailing Address PO Box 269			
City Salem	State OR	ZIP Code 97308-0269	

Outstanding Balance Beginning This Period <input type="text" value="10913.34"/>		Transaction ID: LS71019.E13159	
Amount Incurred This Period <input type="text" value="8022.12"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="18935.46"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="19958.02"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

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)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Pitney Bowes Purchase Power			Nature of Debt (Purpose): Postage
Mailing Address PO Box 856042			
City Louisville	State KY	ZIP Code 40285-	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: LS80222.E13513	
Amount Incurred This Period <input type="text" value="1935.41"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1935.41"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Eagle Teleconferencing			Nature of Debt (Purpose): phone bill
Mailing Address 207 West Washington Street			
City Rushville	State IL	ZIP Code 62681-	

Outstanding Balance Beginning This Period <input type="text" value="363.34"/>		Transaction ID: LSE11559	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="363.34"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Eagle Teleconferencing			Nature of Debt (Purpose): Teleconference
Mailing Address 207 West Washington Street			
City Rushville	State IL	ZIP Code 62681-	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: LS71018.E13137	
Amount Incurred This Period <input type="text" value="1329.24"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1329.24"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="3627.99"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 31 / 47
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor AT&T Wireless	Nature of Debt (Purpose): Telephone/Total debt in dispute
Mailing Address PO Box 30459	
City State ZIP Code Los Angeles CA 90030-	

Outstanding Balance Beginning This Period <input type="text" value="67180.90"/>	Transaction ID: LSE11336	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="67180.90"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Discover Corporate Card	Nature of Debt (Purpose): Travel & Exps DEBT
Mailing Address PO Box 30423	
City State ZIP Code Salt Lake City UT 84130-0423	

Outstanding Balance Beginning This Period <input type="text" value="2410.99"/>	Transaction ID: LS71019.E13166	
Amount Incurred This Period <input type="text" value="320.33"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2731.32"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Shawn Cleave	Nature of Debt (Purpose): Payroll NONFEA <25%
Mailing Address 995 Cascade Dr NW	
City State ZIP Code Salem OR 97304-3762	

Outstanding Balance Beginning This Period <input type="text" value="1653.61"/>	Transaction ID: LS71018.E13151	
Amount Incurred This Period <input type="text" value="1653.63"/>	Payment This Period <input type="text" value="1653.61"/>	Outstanding Balance at Close of This Period <input type="text" value="1653.63"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="71565.85"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

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)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Internal Revenue Svc-Payroll Tax Dept.			Nature of Debt (Purpose): Payroll taxes
Mailing Address c/o Key Bank 1500 Edgewater St NW			
City Salem	State OR	ZIP Code 97304-	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: LS71018.E13157	
Amount Incurred This Period <input type="text" value="2581.80"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2581.80"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Internal Revenue Svc-Payroll Tax Dept.			Nature of Debt (Purpose): Payroll taxes
Mailing Address c/o Key Bank 1500 Edgewater St NW			
City Salem	State OR	ZIP Code 97304-	

Outstanding Balance Beginning This Period <input type="text" value="2581.84"/>		Transaction ID: LS80122.E13406	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="2581.84"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor IN Compliance Inc.			Nature of Debt (Purpose): Consulting Treasury
Mailing Address PO Box 751271			
City Las Vegas	State NV	ZIP Code 89131-	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: LS71019.E13164	
Amount Incurred This Period <input type="text" value="2500.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2500.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="5081.80"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 33 / 47
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Discover Card - Federal	Nature of Debt (Purpose): Auto Exps & Off Supp/CC DEBT 4/07
Mailing Address PO Box 30423	
City State ZIP Code Salt Lake City UT 84130-0423	

Outstanding Balance Beginning This Period 1106.84	Transaction ID: LS70801.E12961	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1106.84

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Smith Barney Investments	Nature of Debt (Purpose): IRA Contribution
Mailing Address 121 Sw Morrison St Ste 1600	
City State ZIP Code Portland OR 97204-	

Outstanding Balance Beginning This Period 2592.60	Transaction ID: LS70920.E13066	
Amount Incurred This Period 1296.30	Payment This Period 2592.60	Outstanding Balance at Close of This Period 1296.30

1) SUBTOTALS This Period This Page (optional).....	2403.14
2) TOTALS This Period (last page this line number only).....	110682.02
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	110682.02

METHOD OF ALLOCATION FOR:

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Seperate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)
Oregon Republican Party

USE ONLY ONE SECTION, A or B

A. State and Local Party Committees

Fixed Percentage (select one)

- _____ Presidential-Only Election Year (28% Federal)
- X Presidential and Senate Election Year (36% Federal)
- _____ Senate-Only Election Year (21% Federal)
- _____ Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees

Flat Minimum Federal Percentage

If the committee will allocate using the flat minimum percentage of 50% federal funds, check

or

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... %

Nonfederal..... %

This ratio applies to (check all that apply):

Administrative Generic Voter Drive Public Communications Referencing Party Only

METHOD OF ALLOCATION FOR:

- SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS
- SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)(Seperate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)
Oregon Republican Party

USE ONLY ONE SECTION, A or B

A. State and Local Party Committees

Fixed Percentage (select one)

- _____ Presidential-Only Election Year (28% Federal)
- X Presidential and Senate Election Year (36% Federal)
- _____ Senate-Only Election Year (21% Federal)
- _____ Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees

Flat Minimum Federal Percentage

If the committee will allocate using the flat minimum percentage of 50% federal funds, check

or

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... %

Nonfederal..... %

This ratio applies to (check all that apply):

Administrative Generic Voter Drive Public Communications Referencing Party Only

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

Oregon Republican Party

NAME OF ACCOUNT
 OREGON NONFED Key
 Bank NonFederal Acc

DATE OF RECEIPT

M M / D D / Y Y Y Y
 0 9 / 2 6 / 2 0 0 7

TOTAL AMOUNT TRANSFERRED

2941.82

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

2941.82

Transaction ID: H371015.C93104

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) _____

Transaction ID:

b) _____

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a) _____

Transaction ID:

b) _____

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

2941.82

TOTAL This Period (Generic Voter Drive)

0.00

TOTAL This Period (Exempt Activities)

0.00

TOTAL This Period (Direct Fundraising)

0.00

TOTAL This Period (Direct Candidate Support)

0.00

TOTAL This Period (Public Communications Referring Only to Party)

0.00

TOTAL This Period (Total Amount Transferred)

2941.82

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Eschelon Teleco (Advanced Telecom)

Mailing Address
PO Box 34988

City	State	Zip Code
Seattle	WA	98124-1988

Purpose of Disbursement:
Telephone

Activity or Event Identifier:
ADMINISTRATION B 2

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
95128.93

Date / /
Transaction ID: H470920.E13053

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
547.37		973.10		1520.47

B. Full Name (Last, First, Middle Initial)
Textron Financial

Mailing Address
40 Westminster Street

City	State	Zip Code
Providence	RI	02903-

Purpose of Disbursement:
Rent

Activity or Event Identifier:
ADMINISTRATION B 2

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
100387.16

Date / /
Transaction ID: H470920.E13060

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1297.66		2306.96		3604.62

C. Full Name (Last, First, Middle Initial)
Pitney Bowes Credit Corp

Mailing Address
P. O. Box 85460

City	State	Zip Code
Louisville	KY	40285-5460

Purpose of Disbursement:
Postage machine lease

Activity or Event Identifier:
ADMINISTRATION B 2

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
112269.94

Date / /
Transaction ID: H471018.E13116

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.16		37.62		58.78

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1866.19		3317.68		5183.87

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Pitney Bowes Credit Corp			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P. O. Box 85460			Allocated Activity or Event Year-To-Date 112328.72		
City Louisville	State KY	Zip Code 40285-5460			
Purpose of Disbursement: Postage machine lease			Category/Type		
Activity or Event Identifier: ADMINISTRATION B 2			Transaction ID: H471018.E13117		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.16		37.62		58.78

B. Full Name (Last, First, Middle Initial) Pitney Bowes Credit Corp			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P. O. Box 85460			Allocated Activity or Event Year-To-Date 112387.50		
City Louisville	State KY	Zip Code 40285-5460			
Purpose of Disbursement: Postage machine lease			Category/Type		
Activity or Event Identifier: ADMINISTRATION B 2			Transaction ID: H471018.E13118		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.16		37.62		58.78

C. Full Name (Last, First, Middle Initial) Textron Financial			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 40 Westminster Street			Allocated Activity or Event Year-To-Date 105991.82		
City Providence	State RI	Zip Code 02903-			
Purpose of Disbursement: Rent			Category/Type		
Activity or Event Identifier: ADMINISTRATION B 2			Transaction ID: H471018.E13121		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
934.32		1661.00		2595.32

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
976.64		1736.24		2712.88

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Shawn Cleave			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 995 Cascade Dr NW			Allocated Activity or Event Year-To-Date 103396.50																						
City	State	Zip Code	Date <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>1</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table> Transaction ID: H471018.E13123			M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	1	4	/	2	0	0	7
M	M	/				D	D	/	Y	Y	Y	Y													
0	9	/	1	4	/	2	0	0	7																
Salem	OR	97304-3762																							
Purpose of Disbursement: Payroll NONFEA <25%			Category/ Type																						
Activity or Event Identifier: ADMINISTRATION B 2																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
595.30		1058.32		1653.62

B. Full Name (Last, First, Middle Initial) US Postmaster			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 410 Mill St SE			Allocated Activity or Event Year-To-Date 101742.88																						
City	State	Zip Code	Date <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>1</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table> Transaction ID: H471018.E13130			M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	1	3	/	2	0	0	7
M	M	/				D	D	/	Y	Y	Y	Y													
0	9	/	1	3	/	2	0	0	7																
Salem	OR	97301-																							
Purpose of Disbursement: Postage/OGOP			Category/ Type																						
Activity or Event Identifier: ADMINISTRATION B 2																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
72.00		128.00		200.00

C. Full Name (Last, First, Middle Initial) Warren Wilson			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 962 62nd Court NE			Allocated Activity or Event Year-To-Date 107697.40																						
City	State	Zip Code	Date <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>1</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table> Transaction ID: H471018.E13132			M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	1	9	/	2	0	0	7
M	M	/				D	D	/	Y	Y	Y	Y													
0	9	/	1	9	/	2	0	0	7																
Salem	OR	97317-																							
Purpose of Disbursement: Computer repairs/NONEMPLOYEE			Category/ Type																						
Activity or Event Identifier: ADMINISTRATION B 2																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
129.60		230.40		360.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
796.90		1416.72		2213.62

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Ricoh Customer Finance Corp.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 310010273			Allocated Activity or Event Year-To-Date 108015.40		
City Pasadena	State CA	Zip Code 91110-0001	Date 09 / 24 / 2007		
Purpose of Disbursement: Equipment lease			Transaction ID: H471018.E13133		
Activity or Event Identifier: ADMINISTRATION B 2					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
114.48		203.52		318.00

B. Full Name (Last, First, Middle Initial) Barbs Professional Bookkeeping & Tax			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3295 Triangle Dr. SE #112			Allocated Activity or Event Year-To-Date 107337.40		
City Salem	State OR	Zip Code 97302-	Date 09 / 18 / 2007		
Purpose of Disbursement: Payroll services			Transaction ID: H471018.E13134		
Activity or Event Identifier: ADMINISTRATION B 2					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
247.50		440.00		687.50

C. Full Name (Last, First, Middle Initial) Dell Financial			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 120001			Allocated Activity or Event Year-To-Date 108287.70		
City Dallas	State TX	Zip Code 75312-	Date 09 / 26 / 2007		
Purpose of Disbursement: Equipment lease/Server			Transaction ID: H471018.E13136		
Activity or Event Identifier: ADMINISTRATION B 2					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
35.03		62.27		97.30

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
397.01		705.79		1102.80

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) IN Compliance Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 751271			Allocated Activity or Event Year-To-Date 111413.77		
City Las Vegas	State NV	Zip Code 89131-	Date <input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Consulting Treasury			Transaction ID: H471018.E13139		
Activity or Event Identifier: ADMINISTRATION B 2					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
900.00		1600.00		2500.00

B. Full Name (Last, First, Middle Initial) IN Compliance Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 751271			Allocated Activity or Event Year-To-Date 111436.27		
City Las Vegas	State NV	Zip Code 89131-	Date <input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Printing			Transaction ID: H471018.E13140		
Activity or Event Identifier: ADMINISTRATION B 2					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.10		14.40		22.50

C. Full Name (Last, First, Middle Initial) KFE Systems			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 5050 Commercial St. SE			Allocated Activity or Event Year-To-Date 111786.27		
City Salem	State OR	Zip Code 97306-	Date <input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Computer maintenance			Transaction ID: H471018.E13141		
Activity or Event Identifier: ADMINISTRATION B 2					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
126.00		224.00		350.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1034.10		1838.40		2872.50

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) UPS			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Lockbox 577			Allocated Activity or Event Year-To-Date 108491.00	
City Carol Stream	State IL	Zip Code 60132-0577	Date <input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2007"/>	
Purpose of Disbursement: Shipping			Transaction ID: H471018.E13142	
Activity or Event Identifier: ADMINISTRATION B 2				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
73.19		130.11		203.30

B. Full Name (Last, First, Middle Initial) Eschelon Teleco (Advanced Telecom)			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 34988			Allocated Activity or Event Year-To-Date 106649.90	
City Seattle	State WA	Zip Code 98124-1988	Date <input type="text" value="09"/> / <input type="text" value="18"/> / <input type="text" value="2007"/>	
Purpose of Disbursement: Telephone			Transaction ID: H471018.E13144	
Activity or Event Identifier: ADMINISTRATION B 2				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
236.91		421.17		658.08

C. Full Name (Last, First, Middle Initial) Ricoh Customer Finance Corp.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 310010273			Allocated Activity or Event Year-To-Date 108913.77	
City Pasadena	State CA	Zip Code 91110-0001	Date <input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2007"/>	
Purpose of Disbursement: Equipment lease			Transaction ID: H471018.E13145	
Activity or Event Identifier: ADMINISTRATION B 2				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
152.20		270.57		422.77

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
462.30		821.85		1284.15

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Shawn Cleave

Mailing Address
995 Cascade Dr NW

City State Zip Code
Salem OR 97304-3762

Purpose of Disbursement:
See Below/Meals & Telephone

Activity or Event Identifier:
ADMINISTRATION B 2

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
112988.03

Date 09 / 27 / 2007
Transaction ID: H471018.E13148

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
179.40		318.94		498.34

B. Full Name (Last, First, Middle Initial)
AT&T Wireless

Mailing Address
PO Box 30459

City State Zip Code
Los Angeles CA 90030-

Purpose of Disbursement:
Telephone/ Cleave

Activity or Event Identifier:
ADMINISTRATION B 2
[MEMO ITEM] Telephone/ Cleave

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
472.99

Date 09 / 27 / 2007
Transaction ID: H471019.E13162

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
170.28		302.71		472.99

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

Mailing Address
4295 SE 182nd

City State Zip Code
Gresham OR 97030-

Purpose of Disbursement:
Meals / Cleave

Activity or Event Identifier:
ADMINISTRATION B 2
[MEMO ITEM] Meals / Cleave

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
25.35

Date 09 / 27 / 2007
Transaction ID: H471019.E13163

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.13		16.22		25.35

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
179.40		318.94		498.34

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Pitney Bowes Purchase Power			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 856042			Allocated Activity or Event Year-To-Date 101542.88	
City Louisville	State KY	Zip Code 40285-	Date M M / D D / Y Y Y Y 09 / 06 / 2007 Transaction ID: H471018.E13149	
Purpose of Disbursement: Postage/OGOP				
Activity or Event Identifier: ADMINISTRATION B 2				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
416.06		739.66		1155.72

B. Full Name (Last, First, Middle Initial) Dell Financial			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 120001			Allocated Activity or Event Year-To-Date 113100.33	
City Dallas	State TX	Zip Code 75312-	Date M M / D D / Y Y Y Y 09 / 28 / 2007 Transaction ID: H471018.E13150	
Purpose of Disbursement: Equipment lease/Server				
Activity or Event Identifier: ADMINISTRATION B 2				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
40.43		71.87		112.30

C. Full Name (Last, First, Middle Initial) Shawn Cleave			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 995 Cascade Dr NW			Allocated Activity or Event Year-To-Date 112489.69	
City Salem	State OR	Zip Code 97304-3762	Date M M / D D / Y Y Y Y 09 / 27 / 2007 Transaction ID: H471019.E13161	
Purpose of Disbursement: Mileage reimbursement				
Activity or Event Identifier: ADMINISTRATION B 2				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
36.79		65.40		102.19

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
493.28		876.93		1370.21

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Discover Corporate Card

Mailing Address
PO Box 30423

City	State	Zip Code
Salt Lake City	UT	84130-0423

Purpose of Disbursement:
Credit Card Fees/ CC DEBT 9/07

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

170.28

Activity or Event Identifier:
ADMINISTRATION B 2

[MEMO ITEM] Credit Card Fees/ CC DEBT 9/07

Date / /

Transaction ID: H471019.E13168

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
61.30		108.98		170.28

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

Mailing Address
1230 State Street

City	State	Zip Code
Salem	OR	97301-

Purpose of Disbursement:
Meals/CC DEBT 9/07

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

17.00

Activity or Event Identifier:
ADMINISTRATION B 2

[MEMO ITEM] Meals/CC DEBT 9/07

Date / /

Transaction ID: H471019.E13169

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.12		10.88		17.00

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

Mailing Address
2147 Route 27

City	State	Zip Code
Edison	NJ	08817-

Purpose of Disbursement:
Telephone/ CC DEBT 9/07

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

58.97

Activity or Event Identifier:
ADMINISTRATION B 2

[MEMO ITEM] Telephone/ CC DEBT 9/07

Date / /

Transaction ID: H471019.E13170

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.23		37.74		58.97

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Stock Musicians			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1960 Cty Rd. 6, RR#2 Lakefield			Allocated Activity or Event Year-To-Date 29.95		
City State Zip Code Ontario, Canada 020 -	Category/ Type		Date M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 7		
Purpose of Disbursement: Music rental fees/CC DEBT 9/07			Transaction ID: H471019.E13171		
Activity or Event Identifier: ADMINISTRATION B 2 [MEMO ITEM] Music rental fees/CC DEBT 9/07					
FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT	
10.78		19.17		29.95	

B. Full Name (Last, First, Middle Initial) Kwans Restaurant			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Commercial at Mission			Allocated Activity or Event Year-To-Date 17.00		
City State Zip Code Salem OR 97301-	Category/ Type		Date M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 7		
Purpose of Disbursement: Meals/ CC DEBT 9/07			Transaction ID: H471019.E13172		
Activity or Event Identifier: ADMINISTRATION B 2 [MEMO ITEM] Meals/ CC DEBT 9/07					
FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT	
6.12		10.88		17.00	

C. Full Name (Last, First, Middle Initial) Federal Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 1140			Allocated Activity or Event Year-To-Date 27.13		
City State Zip Code Memphis TN 38101-	Category/ Type		Date M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 7		
Purpose of Disbursement: Shipping/ CC DEBT 9/07			Transaction ID: H471019.E13173		
Activity or Event Identifier: ADMINISTRATION B 2 [MEMO ITEM] Shipping/ CC DEBT 9/07					
FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT	
9.77		17.36		27.13	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT	
0.00		0.00		0.00	

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Shawn Cleave			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 995 Cascade Dr NW			Allocated Activity or Event Year-To-Date 96782.54	
City Salem	State OR	Zip Code 97304-3762	Date M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 7	
Purpose of Disbursement: Payroll NONFEA <25%			Transaction ID: H480122.E13398	
Activity or Event Identifier: ADMINISTRATION B 2				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
595.30		1058.31		1653.61

B. Full Name (Last, First, Middle Initial) U.S. Postmaster			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Tigard or Main Branch			Allocated Activity or Event Year-To-Date 108190.40	
City Tigard	State OR	Zip Code 97223-	Date M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 7	
Purpose of Disbursement: Bulk mail permit			Transaction ID: H480222.E13509	
Activity or Event Identifier: ADMINISTRATION B 2				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
63.00		112.00		175.00

C. Full Name (Last, First, Middle Initial) Office Depot			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 10520 SW Cascade Blvd			Allocated Activity or Event Year-To-Date 112211.16	
City Tigard	State OR	Zip Code 97223-	Date M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 7	
Purpose of Disbursement: Office Supplies			Transaction ID: H480222.E13512	
Activity or Event Identifier: ADMINISTRATION B 2				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
152.96		271.93		424.89

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
811.26		1442.24		2253.50

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
7017.08		12474.79		19491.87