

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
Oregon Republican Party

ADDRESS (number and street) PO Box 789  
 Check if different than previously reported. (ACC)  
Salem OR 97308

2. **FEC IDENTIFICATION NUMBER** C00153031  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)  
**CITY** **STATE** **ZIP CODE**

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 01 01 2009 through 01 31 2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Dennis Morgan

Signature of Treasurer Electronically Filed by Dennis Morgan Date 02 20 2009

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

|                 |  |  |  |  |  |  |  |  |  |
|-----------------|--|--|--|--|--|--|--|--|--|
| Office Use Only |  |  |  |  |  |  |  |  |  |
|-----------------|--|--|--|--|--|--|--|--|--|

**FEC FORM 3X**  
(Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Oregon Republican Party

Report Covering the Period: From: 

|   |   |
|---|---|
| M | M |
| 0 | 1 |

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

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

 To: 

|   |   |
|---|---|
| M | M |
| 0 | 1 |

|   |   |
|---|---|
| D | D |
| 3 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

|   | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |   |   |   |   |   |   |  |         |
|---|-------------------------|-----------------------------------|---|---|---|---|---|---|--|---------|
| 6. (a) Cash on Hand<br>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>9</td></tr></table> | Y                       | Y                                 | Y | Y | 2 | 0 | 0 | 9 |  | 1405.74 |
| Y   | Y                       | Y                                 | Y |   |   |   |   |   |  |         |
| 2   | 0                       | 0                                 | 9 |   |   |   |   |   |  |         |
| (b) Cash on Hand at<br>Beginning of Reporting Period .....  | 1405.74                 |                                   |   |   |   |   |   |   |  |         |
| (c) Total Receipts (from Line 19) .....   | 35149.85                | 35149.85                          |   |   |   |   |   |   |  |         |
| (d) Subtotal (add lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B) .....  | 36555.59                | 36555.59                          |   |   |   |   |   |   |  |         |
| 7. Total Disbursements (from Line 31) .....   | 22962.07                | 22962.07                          |   |   |   |   |   |   |  |         |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....   | 13593.52                | 13593.52                          |   |   |   |   |   |   |  |         |
| 9. Debts and Obligations owed <b>TO</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....   | 0.00                    |                                   |   |   |   |   |   |   |  |         |
| 10. Debts and Obligations owed <b>BY</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 188265.09               |                                   |   |   |   |   |   |   |  |         |

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 | 1 |

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

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

 To: 

|   |   |
|---|---|
| M | M |
| 0 | 1 |

|   |   |
|---|---|
| D | D |
| 3 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

| I. Receipts  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees  | 7000.00                       | 7000.00                           |
| (i) Itemized (use Schedule A) .....  |                               |                                   |
| (ii) Unitemized .....  | 4096.00                       | 4096.00                           |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) .....   | 11096.00                      | 11096.00                          |
| (b) Political Party Committees .....   | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs) .....  | 0.00                          | 0.00                              |
| (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....     | 11096.00                      | 11096.00                          |
| 12. Transfers From Affiliated/Other Party Committees .....   | 18000.00                      | 18000.00                          |
| 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) ..... | 53.85                         | 53.85                             |
| 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) .....   | 6000.00                       | 6000.00                           |
| (b) Levin Funds (from Schedule H5) .....   | 0.00                          | 0.00                              |
| (c) Total Transfer (add 18(a) and 18(b)).  | 6000.00                       | 6000.00                           |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....                          | 35149.85                      | 35149.85                          |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....                                    | 29149.85                      | 29149.85                          |

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| <b>II. DISBURSEMENTS</b>   | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Calendar Year-to-Date</b> |
|--|---------------------------------------|---|
| 21. Operating Expenditures:  |                                       |   |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4)                                     |                                       |   |
| (i) Federal Share.....   | 507.47                                | 507.47                                    |
| (ii) Non-Federal Share.....  | 1909.05                               | 1909.05                                   |
| (b) Other Federal Operating Expenditures.....  | 5201.85                               | 5201.85                                   |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶                        | 7618.37                               | 7618.37                                   |
| 22. Transfers to Affiliated/Other Party Committees.....  | 7200.00                               | 7200.00                                   |
| 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 .....                                  | 255.00                                | 255.00                                    |
| (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)) .....                           | 255.00                                | 255.00                                    |
| 29. Other Disbursements.....   | 0.00                                  | 0.00                                      |
| 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 .....                           | 7888.70                               | 7888.70                                   |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....              | 7888.70                               | 7888.70                                   |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..       | 22962.07                              | 22962.07                                  |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 21053.02                              | 21053.02                                  |

**DETAILED SUMMARY PAGE**  
of Disbursements

| III. Net Contributions/Operating Expenditures                                    | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) from Line 11(d), page 3) .....        | 11096.00                      | 11096.00                          |
| 34. Total Contribution Refunds (from Line 28(d)) .....                           | 255.00                        | 255.00                            |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....   | 10841.00                      | 10841.00                          |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 5709.32                       | 5709.32                           |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) .....               | 53.85                         | 53.85                             |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) .....             | 5655.47                       | 5655.47                           |

**SCHEDULE L (FEC Form 3X)**

**AGGREGATION PAGE: LEVIN FUNDS**

Transaction ID: SL1

|  |
|--|
| NAME OF COMMITTEE (In Full)<br>Oregon Republican Party |
| NAME OF ACCOUNT<br>KEY LEVIN                           |

|   | COLUMN A<br>TOTAL THIS PERIOD | COLUMN B<br>YEAR-TO-DATE |
|---|-------------------------------|--------------------------|
| 1. RECEIPTS FROM PERSONS  |                               |                          |
| a. Itemized.....<br><small>(Use Schedule L-A)</small>                                       | 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.....<br><small>(Add Lines 1c and 2)</small>                               | 0.00                          | 0.00                     |
| 4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT<br><small>(Use Schedule L-B)</small>          |                               |                          |
| 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                         | 10.75                    |
| 6. TOTAL DISBURSEMENTS.....<br><small>(Add Lines 4e and 5)</small>                          | 10.75                         | 10.75                    |
| 7. BEGINNING CASH ON HAND.....<br><small>(for Column B, use cash as of January 1st)</small> | 67.25                         | 67.25                    |
| 8. RECEIPTS.....<br><small>(from Line 3)</small>  | 0.00                          | 0.00                     |
| 9. SUBTOTAL.....<br><small>(Add Lines 7 and 8)</small>                                      | 67.25                         | 67.25                    |
| 10. DISBURSEMENTS.....<br><small>(From Line 6)</small>                                      | 10.75                         | 10.75                    |
| 11. ENDING CASH ON HAND.....<br><small>(Subtract Line 10 From Line 9)</small>               | 56.50                         | 56.50                    |

**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:<br>(check only one) |                             | PAGE 7 / 37                           |
|  | <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<br>Key Bank | Transaction ID: 4B90219.E16932<br>Date of Disbursement   |
|    | Mailing Address PO Box 22114   | <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> |
|    | City State Zip Code<br>Albany NY 12201                                       | Amount of Each Disbursement this Period<br><input type="text" value="10.75"/>  |
|    | Purpose of Disbursement<br>Bank Fees   | Account: 8   |

|  |                                    |
|--|------------------------------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <input type="text" value="10.75"/> |
| <b>TOTAL</b> 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 / 37  
(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

|  |  |
|--|--|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>Brian Boquist</p> <p>Mailing Address 17080 Butler Hill Road</p> <p>City State Zip Code<br/>Dallas OR 97338</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Self Occupation ICI of Oregon</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">5000.00</span></p> | <p>Date of Receipt<br/><span style="border: 1px solid black; padding: 2px;">01 / 30 / 2009</span></p> <p><b>Transaction ID:</b> 90219.C101133</p> <p>Amount of Each Receipt this Period<br/><span style="border: 1px solid black; padding: 2px;">5000.00</span></p> <p>Receipt</p> |
|--|--|

|   |   |
|---|---|
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>Wayne Brady</p> <p>Mailing Address 4742 Liberty Rd South PMB 280</p> <p>City State Zip Code<br/>Salem OR 97302-5000</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Retired Occupation Retired</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">250.00</span></p> | <p>Date of Receipt<br/><span style="border: 1px solid black; padding: 2px;">01 / 13 / 2009</span></p> <p><b>Transaction ID:</b> 90219.C101098</p> <p>Amount of Each Receipt this Period<br/><span style="border: 1px solid black; padding: 2px;">250.00</span></p> <p>Receipt</p> |
|---|---|

|   |   |
|---|---|
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>Robert DeArmond</p> <p>Mailing Address PO Box 3517</p> <p>City State Zip Code<br/>Central Point OR 97502-0019</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Retired Occupation Retired</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">500.00</span></p> | <p>Date of Receipt<br/><span style="border: 1px solid black; padding: 2px;">01 / 28 / 2009</span></p> <p><b>Transaction ID:</b> 90219.C101127</p> <p>Amount of Each Receipt this Period<br/><span style="border: 1px solid black; padding: 2px;">500.00</span></p> <p>Receipt</p> |
|---|---|

|  |   |
|--|---|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <span style="border: 1px solid black; padding: 2px;">5750.00</span> |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <span style="border: 1px solid black; padding: 2px;"> </span>       |

**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 / 37                  |
|   | <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

|   |  |                                     |   |
|---|--|-------------------------------------|---|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>Michael Kehoe   |                                     | Date of Receipt   |
|   | Mailing Address PO Box 428                                 |                                     | <input type="text" value="01"/> / <input type="text" value="28"/> / <input type="text" value="2009"/> |
|   | City   | State                               | Zip Code  |
|   | Lake Oswego  | OR                                  | 97034-0428  |
|   | FEC ID number of contributing federal political committee. |                                     | <input type="text" value="C"/>  |
| Name of Employer<br>Retired   |  | Occupation<br>Retired               | Transaction ID: 90219.C101128   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼            | Amount of Each Receipt this Period<br><input type="text" value="500.00"/>                             |
|   |  | <input type="text" value="500.00"/> | Receipt   |

|   |  |                                       |   |
|---|--|---------------------------------------|---|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>Malcolm McIver  |                                       | Date of Receipt   |
|   | Mailing Address 7860 SW Northvale Way                      |                                       | <input type="text" value="01"/> / <input type="text" value="30"/> / <input type="text" value="2009"/> |
|   | City   | State                                 | Zip Code  |
|   | Portland   | OR                                    | 97225-1552  |
|   | FEC ID number of contributing federal political committee. |                                       | <input type="text" value="C"/>  |
| Name of Employer<br>Commerce Investment Inc.  |  | Occupation<br>Real Estate Development | Transaction ID: 90219.C101134   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼              | Amount of Each Receipt this Period<br><input type="text" value="500.00"/>                             |
|   |  | <input type="text" value="500.00"/>   | Receipt   |

|   |  |                                     |   |
|---|--|-------------------------------------|---|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>Laura Meier     |                                     | Date of Receipt   |
|   | Mailing Address 1211 SW 5th Avenue, Ste. 2900              |                                     | <input type="text" value="01"/> / <input type="text" value="28"/> / <input type="text" value="2009"/> |
|   | City   | State                               | Zip Code  |
|   | Portland   | OR                                  | 97204-3729  |
|   | FEC ID number of contributing federal political committee. |                                     | <input type="text" value="C"/>  |
| Name of Employer<br>Homemaker   |  | Occupation<br>Homemaker             | Transaction ID: 90219.C101129   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼            | Amount of Each Receipt this Period<br><input type="text" value="250.00"/>                             |
|   |  | <input type="text" value="250.00"/> | Receipt   |

|  |                                      |
|--|--------------------------------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <input type="text" value="1250.00"/> |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <input type="text" value="7000.00"/> |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 37  
(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)  
National Republican Senatorial Committee

Mailing Address 425 2nd St NE

City State Zip Code  
Washington DC 20002-4914

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
18000.00

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

Transaction ID: 90219.C100996

Amount of Each Receipt this Period  
18000.00

Transfers From Affil./Auth.

|  |   |          |
|--|---|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 18000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ | 18000.00 |

**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)

PAGE 11 / 37

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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

|   |  |
|---|--|
| <b>A.</b><br>Full Name (Last, First, Middle Initial)<br>Direct Mail Systems, Inc<br>Mailing Address 12450 Automobile Boulevard<br>City Clearwater State FL Zip Code 34622-<br>Purpose of Disbursement<br>List rental - OR GOP<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: 90219.E16890<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 1 / 1 5 / 2 0 0 9 |
|   | Amount of Each Disbursement this Period<br>5000.00<br>LIST RENTAL - OR GOP                         |
| <b>B.</b><br>Full Name (Last, First, Middle Initial)<br>FLS Connect<br>Mailing Address 7320 N Dreamy Draw Dr<br>City Phoenix State AZ Zip Code 85020-5212<br>Purpose of Disbursement<br>Fundraising Phone Calls - OR GOP<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼      | Transaction ID: 90219.E16923<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 1 / 2 6 / 2 0 0 9 |
|   | Amount of Each Disbursement this Period<br>62.50<br>FUNDRAISING PHONE CALLS - OR GOP               |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | 5062.50 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | 5062.50 |

**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 checked="" 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)<br>Oregon Republican Party   | Transaction ID: 90219.E16897<br>Date of Disbursement<br>01 / 14 / 2009  |
|    | Mailing Address c/o Key Bank Federal Acct<br>1500 Edgewater St NW  | Amount of Each Disbursement this Period<br>225.00   |
|    | City Salem State OR Zip Code 97302-  |   |
|    | Purpose of Disbursement<br>Redesignation of Receipt  | Category/<br>Type   |
|    | Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

|    |  |   |
|----|--|---|
| B. | Full Name (Last, First, Middle Initial)<br>Oregon Republican Party   | Transaction ID: 90219.E16898<br>Date of Disbursement<br>01 / 14 / 2009  |
|    | Mailing Address c/o Key Bank Federal Acct<br>1500 Edgewater St NW  | Amount of Each Disbursement this Period<br>155.00   |
|    | City Salem State OR Zip Code 97302-  |   |
|    | Purpose of Disbursement<br>Redesignation of Receipt  | Category/<br>Type   |
|    | Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

|    |  |   |
|----|--|---|
| C. | Full Name (Last, First, Middle Initial)<br>Oregon Republican Party   | Transaction ID: 90219.E16896<br>Date of Disbursement<br>01 / 14 / 2009  |
|    | Mailing Address c/o Key Bank Federal Acct<br>1500 Edgewater St NW  | Amount of Each Disbursement this Period<br>480.00   |
|    | City Salem State OR Zip Code 97302-  |   |
|    | Purpose of Disbursement<br>Redesignation of Receipt  | Category/<br>Type   |
|    | Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

|  |   |        |
|--|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | ▶ | 860.00 |
| <b>TOTAL</b> 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 checked="" 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)<br>Oregon Republican Party   | Transaction ID: 90219.E16895<br>Date of Disbursement<br>01 / 10 / 2009   |
|    | Mailing Address c/o Key Bank Federal Acct<br>1500 Edgewater St NW  | Amount of Each Disbursement this Period<br>445.00  |
|    | City Salem State OR Zip Code 97302-  |  |
|    | Purpose of Disbursement<br>Redesignation of Receipt  | Category/<br>Type  |
|    | Candidate Name   |  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|    |  |  |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial)<br>Oregon Republican Party   | Transaction ID: 90219.E16893<br>Date of Disbursement<br>01 / 06 / 2009   |
|    | Mailing Address c/o Key Bank Federal Acct<br>1500 Edgewater St NW  | Amount of Each Disbursement this Period<br>715.00  |
|    | City Salem State OR Zip Code 97302-  |  |
|    | Purpose of Disbursement<br>Redesignation of Receipt  | Category/<br>Type  |
|    | Candidate Name   |  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|    |  |  |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial)<br>Oregon Republican Party   | Transaction ID: 90219.E16894<br>Date of Disbursement<br>01 / 10 / 2009   |
|    | Mailing Address c/o Key Bank Federal Acct<br>1500 Edgewater St NW  | Amount of Each Disbursement this Period<br>180.00  |
|    | City Salem State OR Zip Code 97302-  |  |
|    | Purpose of Disbursement<br>Redesignation of Receipt  | Category/<br>Type  |
|    | Candidate Name   |  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | ▶ | 1340.00 |
| <b>TOTAL</b> 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 14 / 37

|                              |  |                              |                              |                             |                              |
|------------------------------|--|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" 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)  
Oregon Republican Party

Transaction ID: 90219.E16892  
Date of Disbursement

Mailing Address c/o Key Bank Federal Acct  
1500 Edgewater St NW

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 1 | 5 |   | 2 | 0 | 0 | 9 |

City Salem State OR Zip Code 97302-

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Purpose of Disbursement  
Resignation of Receipt

|  |
|--|
|  |
|--|

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ..... ►

|         |
|---------|
| 5000.00 |
|---------|

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

|         |
|---------|
| 7200.00 |
|---------|

# 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)

PAGE 15 / 37

|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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

|  |  |
|--|--|
| <b>A.</b><br>Full Name (Last, First, Middle Initial)<br>Internal Revenue Svc-Payroll Tax Dept.<br>Mailing Address c/o Key Bank 1500 Edgewater St NW<br>City Salem State OR Zip Code 97304-<br>Purpose of Disbursement<br>FEA Payroll Taxes<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>State: District: | Transaction ID: 90219.E16861<br>Date of Disbursement<br>01 / 13 / 2009 |
|  | Amount of Each Disbursement this Period<br>462.94<br>FEA PAYROLL TAXES |
| <b>B.</b><br>Full Name (Last, First, Middle Initial)<br>Internal Revenue Svc-Payroll Tax Dept.<br>Mailing Address c/o Key Bank 1500 Edgewater St NW<br>City Salem State OR Zip Code 97304-<br>Purpose of Disbursement<br>FEA Payroll Taxes<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>State: District: | Transaction ID: 90219.E16874<br>Date of Disbursement<br>01 / 16 / 2009 |
|  | Amount of Each Disbursement this Period<br>26.67<br>FEA PAYROLL TAXES  |
| <b>C.</b><br>Full Name (Last, First, Middle Initial)<br>Internal Revenue Svc-Payroll Tax Dept.<br>Mailing Address c/o Key Bank 1500 Edgewater St NW<br>City Salem State OR Zip Code 97304-<br>Purpose of Disbursement<br>FEA Payroll Taxes<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>State: District: | Transaction ID: 90219.E16875<br>Date of Disbursement<br>01 / 16 / 2009 |
|  | Amount of Each Disbursement this Period<br>945.00<br>FEA PAYROLL TAXES |

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

1434.61

**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 16 / 37

|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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: 90219.E16913  
Date of Disbursement

Mailing Address c/o Key Bank 1500 Edgewater St NW

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 3 | 0 |   | 2 | 0 | 0 | 9 |

City Salem State OR Zip Code 97304-

Amount of Each Disbursement this Period

|       |
|-------|
| 26.66 |
|-------|

Purpose of Disbursement  
FEA Payroll Taxes

|                   |
|-------------------|
| Category/<br>Type |
|-------------------|

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

FEA PAYROLL TAXES

B.

Full Name (Last, First, Middle Initial)  
Internal Revenue Svc-Payroll Tax Dept.

Transaction ID: 90219.E16914  
Date of Disbursement

Mailing Address c/o Key Bank 1500 Edgewater St NW

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 3 | 0 |   | 2 | 0 | 0 | 9 |

City Salem State OR Zip Code 97304-

Amount of Each Disbursement this Period

|        |
|--------|
| 945.00 |
|--------|

Purpose of Disbursement  
FEA Payroll Taxes

|                   |
|-------------------|
| Category/<br>Type |
|-------------------|

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

FEA PAYROLL TAXES

C.

Full Name (Last, First, Middle Initial)  
Oregon Department of Revenue

Transaction ID: 90219.E16876  
Date of Disbursement

Mailing Address P.O. Box 14800

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 1 | 6 |   | 2 | 0 | 0 | 9 |

City Salem State OR Zip Code 97309-0920

Amount of Each Disbursement this Period

|        |
|--------|
| 346.11 |
|--------|

Purpose of Disbursement  
FEA Payroll Taxes

|                   |
|-------------------|
| Category/<br>Type |
|-------------------|

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

FEA PAYROLL TAXES

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

|         |
|---------|
| 1317.77 |
|---------|

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 17 / 37

|                              |                              |                              |                              |                             |   |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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)<br>Oregon Department of Revenue  | Transaction ID: 90219.E16915<br>Date of Disbursement<br>01 / 30 / 2009   |
|    | Mailing Address P.O. Box 14800   |  |
|    | City Salem State OR Zip Code 97309-0920  | Amount of Each Disbursement this Period<br>346.10  |
|    | Purpose of Disbursement FEA Payroll Taxes<br>Candidate Name  | Category/Type  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
|    |  | FEA PAYROLL TAXES  |

|    |  |  |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial)<br>Andrew Over   | Transaction ID: 90219.E16864<br>Date of Disbursement<br>01 / 15 / 2009   |
|    | Mailing Address 1485 SW 134th Ave  |  |
|    | City Beaverton State OR Zip Code 97005-0986  | Amount of Each Disbursement this Period<br>2395.11   |
|    | Purpose of Disbursement FEA Payroll<br>Candidate Name  | Category/Type  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>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)<br>Andrew Over   | Transaction ID: 90219.E16912<br>Date of Disbursement<br>01 / 30 / 2009   |
|    | Mailing Address 1485 SW 134th Ave  |  |
|    | City Beaverton State OR Zip Code 97005-0986  | Amount of Each Disbursement this Period<br>2395.11   |
|    | Purpose of Disbursement FEA Payroll<br>Candidate Name  | Category/Type  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
|    |  | FEA PAYROLL  |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <b>5136.32</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <b>7888.70</b> |

**SCHEDULE C (FEC Form 3X)**

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

PAGE 18 / 37  
FOR LINE 13 OF FORM 3X

**LOANS**

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

**Transaction ID:** LS90219.C93909

|  |   |
|--|---|
| <b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)<br>F. Douglas Day | Election:<br><input type="checkbox"/> Primary<br><input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| Mailing Address 4386 Rowan Ave N   |   |
| City Keizer State OR ZIP Code 97303-5824                                     |   |

|                                     |                                    |   |
|-------------------------------------|------------------------------------|---|
| Original Amount of Loan<br>10000.00 | Cumulative Payment To Date<br>0.00 | Balance Outstanding at Close of This Period<br>10000.00 |
|-------------------------------------|------------------------------------|---|

**TERMS**

|  |                      |                               |   |
|--|----------------------|-------------------------------|---|
| Date Incurred<br>MM DD YY YY<br>02 04 2008 | Date Due<br>20091231 | Interest Rate<br>8.00 % (apr) | Secured:<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|--|----------------------|-------------------------------|---|

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

|   |  |
|---|--|
| Full Name (Last, First, Middle Initial) | Name of Employer   |
| Mailing Address                         | Occupation   |
| City State ZIP Code                     | Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/> |
| Full Name (Last, First, Middle Initial) | Name of Employer   |
| Mailing Address                         | Occupation   |
| City State ZIP Code                     | Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/> |
| Full Name (Last, First, Middle Initial) | Name of Employer   |
| Mailing Address                         | Occupation   |
| City State ZIP Code                     | Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/> |
| Full Name (Last, First, Middle Initial) | Name of Employer   |
| Mailing Address                         | Occupation   |
| City State ZIP Code                     | Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/> |

|   |  |
|---|--|
| <b>SUBTOTALS</b> This Period This Page (optional) .....       | <input style="width: 100%;" type="text" value="10000.00"/> |
| <b>TOTALS</b> This Period (last page in this line only) ..... | <input style="width: 100%;" type="text" value=".00"/>      |

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

**SCHEDULE C (FEC Form 3X)**

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

**LOANS**

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

**Transaction ID: LS90219.C93964**

|  |   |
|--|---|
| <b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)<br>Michael Scheel | Election:<br><input type="checkbox"/> Primary<br><input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| Mailing Address 3951 Croisan Creek Rd S                                      |   |
| City Salem State OR ZIP Code 97302-9474                                      |   |

|                                     |                                    |   |
|-------------------------------------|------------------------------------|---|
| Original Amount of Loan<br>10000.00 | Cumulative Payment To Date<br>0.00 | Balance Outstanding at Close of This Period<br>10000.00 |
|-------------------------------------|------------------------------------|---|

**TERMS**

|  |                      |                               |   |
|--|----------------------|-------------------------------|---|
| Date Incurred<br>MM DD YY YY<br>01 31 2008 | Date Due<br>20091231 | Interest Rate<br>8.00 % (apr) | Secured:<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|--|----------------------|-------------------------------|---|

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

|   |  |
|---|--|
| Full Name (Last, First, Middle Initial) | Name of Employer   |
| Mailing Address                         | Occupation   |
| City State ZIP Code                     | Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/> |
| Full Name (Last, First, Middle Initial) | Name of Employer   |
| Mailing Address                         | Occupation   |
| City State ZIP Code                     | Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/> |
| Full Name (Last, First, Middle Initial) | Name of Employer   |
| Mailing Address                         | Occupation   |
| City State ZIP Code                     | Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/> |
| Full Name (Last, First, Middle Initial) | Name of Employer   |
| Mailing Address                         | Occupation   |
| City State ZIP Code                     | Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/> |

|   |  |
|---|--|
| <b>SUBTOTALS</b> This Period This Page (optional) .....       | <input style="width: 100%;" type="text" value="10000.00"/> |
| <b>TOTALS</b> This Period (last page in this line only) ..... | <input style="width: 100%;" type="text" value=".00"/>      |

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

**SCHEDULE C (FEC Form 3X)**

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

**LOANS**

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

**Transaction ID:** LS90219.C93966

|   |   |
|---|---|
| <b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)<br>Donald Malarkey | Election:<br><input type="checkbox"/> Primary<br><input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| Mailing Address 2495 E Nob Hill St SE   |   |
| City Salem State OR ZIP Code 97302-3733                                       |   |

|                                     |                                    |   |
|-------------------------------------|------------------------------------|---|
| Original Amount of Loan<br>10000.00 | Cumulative Payment To Date<br>0.00 | Balance Outstanding at Close of This Period<br>10000.00 |
|-------------------------------------|------------------------------------|---|

**TERMS**

|  |                      |                               |   |
|--|----------------------|-------------------------------|---|
| Date Incurred<br>MM DD YY YY<br>01 30 2008 | Date Due<br>20091231 | Interest Rate<br>8.00 % (apr) | Secured:<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|--|----------------------|-------------------------------|---|

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

|   |                                    |
|---|------------------------------------|
| Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                         | Occupation                         |
| City State ZIP Code                     | Amount Guaranteed Outstanding: [ ] |
| Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                         | Occupation                         |
| City State ZIP Code                     | Amount Guaranteed Outstanding: [ ] |
| Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                         | Occupation                         |
| City State ZIP Code                     | Amount Guaranteed Outstanding: [ ] |
| Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                         | Occupation                         |
| City State ZIP Code                     | Amount Guaranteed Outstanding: [ ] |

|   |          |
|---|----------|
| <b>SUBTOTALS</b> This Period This Page (optional) .....       | 10000.00 |
| <b>TOTALS</b> This Period (last page in this line only) ..... | .00      |

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

**SCHEDULE C (FEC Form 3X)**

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

PAGE 21 / 37  
FOR LINE 13 OF FORM 3X

**LOANS**

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

**Transaction ID:** LS90219.C93965

|  |   |
|--|---|
| <b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)<br>Julie Scheel | Election:<br><input type="checkbox"/> Primary<br><input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| Mailing Address 3951 Croisan Creek Rd S                                    |   |
| City Salem State OR ZIP Code 97302-9474                                    |   |

|                                     |                                    |   |
|-------------------------------------|------------------------------------|---|
| Original Amount of Loan<br>10000.00 | Cumulative Payment To Date<br>0.00 | Balance Outstanding at Close of This Period<br>10000.00 |
|-------------------------------------|------------------------------------|---|

**TERMS**

|  |                      |                               |   |
|--|----------------------|-------------------------------|---|
| Date Incurred<br>MM DD YY YY<br>01 31 2008 | Date Due<br>20091231 | Interest Rate<br>8.00 % (apr) | Secured:<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|--|----------------------|-------------------------------|---|

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

|   |  |
|---|--|
| Full Name (Last, First, Middle Initial) | Name of Employer   |
| Mailing Address                         | Occupation   |
| City State ZIP Code                     | Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/> |
| Full Name (Last, First, Middle Initial) | Name of Employer   |
| Mailing Address                         | Occupation   |
| City State ZIP Code                     | Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/> |
| Full Name (Last, First, Middle Initial) | Name of Employer   |
| Mailing Address                         | Occupation   |
| City State ZIP Code                     | Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/> |
| Full Name (Last, First, Middle Initial) | Name of Employer   |
| Mailing Address                         | Occupation   |
| City State ZIP Code                     | Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/> |

|   |  |
|---|--|
| <b>SUBTOTALS</b> This Period This Page (optional) .....       | <input style="width: 100%;" type="text" value="10000.00"/> |
| <b>TOTALS</b> This Period (last page in this line only) ..... | <input style="width: 100%;" type="text" value="40000.00"/> |

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

**SCHEDULE D (FEC Form 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

|  |   |
|--|---|
| <b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor<br>FLS Connect | Nature of Debt (Purpose):<br>Fundraising Phone Calls - OR GOP |
| Mailing Address 7320 N Dreamy Draw Dr  |   |
| City State ZIP Code<br>Phoenix AZ 85020-5212   |   |

|   |                                       |   |
|---|---------------------------------------|---|
| Outstanding Balance Beginning This Period<br>36589.61 | <b>Transaction ID:</b> LS90219.E16923 |   |
| Amount Incurred This Period<br>0.00                   | Payment This Period<br>62.50          | Outstanding Balance at Close of This Period<br>36527.11 |

|   |   |
|---|---|
| <b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor<br>Direct Mail Systems, Inc | Nature of Debt (Purpose):<br>List rental - OR GOP |
| Mailing Address 12450 Automobile Boulevard  |   |
| City State ZIP Code<br>Clearwater FL 34622-   |   |

|   |                                       |   |
|---|---------------------------------------|---|
| Outstanding Balance Beginning This Period<br>20008.94 | <b>Transaction ID:</b> LS90219.E16889 |   |
| Amount Incurred This Period<br>5000.00                | Payment This Period<br>5000.00        | Outstanding Balance at Close of This Period<br>20008.94 |

|  |  |
|--|--|
| <b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor<br>Wes Lematta | Nature of Debt (Purpose):<br>Contribution Refund |
| Mailing Address 800 NE Tenney Rd Ste 110   |  |
| City State ZIP Code<br>Vancouver WA 98685-2899   |  |

|  |                                       |  |
|--|---------------------------------------|--|
| Outstanding Balance Beginning This Period<br>2500.00 | <b>Transaction ID:</b> LS90219.E16256 |  |
| Amount Incurred This Period<br>0.00                  | Payment This Period<br>0.00           | Outstanding Balance at Close of This Period<br>2500.00 |

|  |   |          |
|--|---|----------|
| 1) <b>SUBTOTALS</b> This Period This Page (optional).....                                      | ▶ | 59036.05 |
| 2) <b>TOTALS</b> This Period (last page this line number only).....                            | ▶ |          |
| 3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....                        | ▶ |          |
| 4) <b>ADD 2) and 3)</b> 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<br>Donna Woolley |             |                        | Nature of Debt (Purpose):<br>Contribution Refund |
| Mailing Address PO Box 43   |             |                        |  |
| City<br>Drain   | State<br>OR | ZIP Code<br>97435-0043 |  |

|   |                     |   |  |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period |                     | Transaction ID: LS90219.E15765              |  |
| 6000.00                                   |                     |   |  |
| Amount Incurred This Period               | Payment This Period | Outstanding Balance at Close of This Period |  |
| 0.00                                      | 0.00                | 6000.00                                     |  |

|   |             |                        |  |
|---|-------------|------------------------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br>Joan Austin |             |                        | Nature of Debt (Purpose):<br>Contribution Refund |
| Mailing Address PO Box 209  |             |                        |  |
| City<br>Newberg   | State<br>OR | ZIP Code<br>97132-0209 |  |

|   |                     |   |  |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period |                     | Transaction ID: LS90219.E15760              |  |
| 2500.00                                   |                     |   |  |
| Amount Incurred This Period               | Payment This Period | Outstanding Balance at Close of This Period |  |
| 0.00                                      | 0.00                | 2500.00                                     |  |

|   |             |                        |   |
|---|-------------|------------------------|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br>Pitney Bowes Purchase Power |             |                        | Nature of Debt (Purpose):<br>Postage - OR GOP |
| Mailing Address PO Box 856042   |             |                        |   |
| City<br>Louisville  | State<br>KY | ZIP Code<br>40285-6042 |   |

|   |                     |   |  |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period |                     | Transaction ID: LS90219.E16938              |  |
| 0.00                                      |                     |   |  |
| Amount Incurred This Period               | Payment This Period | Outstanding Balance at Close of This Period |  |
| 1993.61                                   | 0.00                | 1993.61                                     |  |

|  |   |          |
|--|---|----------|
| 1) <b>SUBTOTALS</b> This Period This Page (optional).....                                      | ▶ | 10493.61 |
| 2) <b>TOTALS</b> This Period (last page this line number only).....                            | ▶ |          |
| 3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....                        | ▶ |          |
| 4) <b>ADD 2) and 3)</b> 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) | PAGE 24 / 37  |
|   | FOR LINE NUMBER:<br>(check only one) <input type="checkbox"/> 9<br><input checked="" type="checkbox"/> 10 |

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

|  |  |
|--|--|
| <b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b><br>AT&T Wireless | Nature of Debt (Purpose):<br>Phone service |
| Mailing Address PO Box 30459   |  |
| City State ZIP Code<br>Los Angeles CA 90030-   |  |

|   |                                       |   |
|---|---------------------------------------|---|
| Outstanding Balance Beginning This Period<br>67180.90 | <b>Transaction ID:</b> LS90219.E11336 |   |
| Amount Incurred This Period<br>0.00                   | Payment This Period<br>0.00           | Outstanding Balance at Close of This Period<br>67180.90 |

|  |  |
|--|--|
| <b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b><br>Andrew Over | Nature of Debt (Purpose):<br>Delivery/Food |
| Mailing Address 1485 SW 134th Ave  |  |
| City State ZIP Code<br>Beaverton OR 97005-0986   |  |

|   |                                       |   |
|---|---------------------------------------|---|
| Outstanding Balance Beginning This Period<br>0.00 | <b>Transaction ID:</b> LS90219.E16934 |   |
| Amount Incurred This Period<br>418.68             | Payment This Period<br>0.00           | Outstanding Balance at Close of This Period<br>418.68 |

|  |  |
|--|--|
| <b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b><br>Barbs Professional Bookkeeping &Tax | Nature of Debt (Purpose):<br>Payroll Service |
| Mailing Address 3295 Triangle Dr SE Ste 112  |  |
| City State ZIP Code<br>Salem OR 97302-4566   |  |

|   |                                       |  |
|---|---------------------------------------|--|
| Outstanding Balance Beginning This Period<br>0.00 | <b>Transaction ID:</b> LS90219.E16935 |  |
| Amount Incurred This Period<br>90.00              | Payment This Period<br>0.00           | Outstanding Balance at Close of This Period<br>90.00 |

|  |   |          |
|--|---|----------|
| 1) <b>SUBTOTALS</b> This Period This Page (optional).....                                      | ▶ | 67689.58 |
| 2) <b>TOTALS</b> This Period (last page this line number only).....                            | ▶ |          |
| 3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....                        | ▶ |          |
| 4) <b>ADD 2) and 3)</b> 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

|  |             |                        |  |
|--|-------------|------------------------|--|
| <b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b><br>Donald Malarkey |             |                        | Nature of Debt (Purpose):<br>Contribution Refund |
| Mailing Address 2495 E Nob Hill St SE  |             |                        |  |
| City<br>Salem  | State<br>OR | ZIP Code<br>97302-3733 |  |

|   |                               |   |  |
|---|-------------------------------|---|--|
| Outstanding Balance Beginning This Period<br>100.00 |                               | <b>Transaction ID:</b> LS90219.E16922               |  |
| Amount Incurred This Period<br>0.00                 | Payment This Period<br>100.00 | Outstanding Balance at Close of This Period<br>0.00 |  |

|   |             |                        |  |
|---|-------------|------------------------|--|
| <b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b><br>Oregon Federation of College Republicans |             |                        | Nature of Debt (Purpose):<br>Contribution Refund |
| Mailing Address PO Box 808  |             |                        |  |
| City<br>Corvallis   | State<br>OR | ZIP Code<br>97339-0808 |  |

|   |                             |   |  |
|---|-----------------------------|---|--|
| Outstanding Balance Beginning This Period<br>550.00 |                             | <b>Transaction ID:</b> LS90219.E16376                 |  |
| Amount Incurred This Period<br>0.00                 | Payment This Period<br>0.00 | Outstanding Balance at Close of This Period<br>550.00 |  |

|  |             |                        |  |
|--|-------------|------------------------|--|
| <b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b><br>Compliance Consulting Company |             |                        | Nature of Debt (Purpose):<br>Compliance Consulting |
| Mailing Address PO Box 365   |             |                        |  |
| City<br>Mc Lean  | State<br>VA | ZIP Code<br>22101-0365 |  |

|   |                             |   |  |
|---|-----------------------------|---|--|
| Outstanding Balance Beginning This Period<br>0.00 |                             | <b>Transaction ID:</b> LS90219.E16936                   |  |
| Amount Incurred This Period<br>10000.00           | Payment This Period<br>0.00 | Outstanding Balance at Close of This Period<br>10000.00 |  |

|  |          |
|--|----------|
| <b>1) SUBTOTALS</b> This Period This Page (optional).....                                      | 10550.00 |
| <b>2) TOTALS</b> This Period (last page this line number only).....                            | [ ]      |
| <b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....                        | [ ]      |
| <b>4) ADD 2) and 3)</b> 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<br>Graphix Plus |             |                        | Nature of Debt (Purpose):<br>Printing - OR GOP |
| Mailing Address 151 NW 3rd Ave   |             |                        |  |
| City<br>Canby  | State<br>OR | ZIP Code<br>97013-3701 |  |

|   |                     |   |  |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period |                     | <b>Transaction ID: LS90219.E16937</b>       |  |
| 0.00                                      |                     |   |  |
| Amount Incurred This Period               | Payment This Period | Outstanding Balance at Close of This Period |  |
| 495.85                                    | 0.00                | 495.85                                      |  |

|  |           |
|--|-----------|
| 1) <b>SUBTOTALS</b> This Period This Page (optional).....                                      | 495.85    |
| 2) <b>TOTALS</b> This Period (last page this line number only).....                            | 148265.09 |
| 3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....                        | 40000.00  |
| 4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) | 188265.09 |

**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)
- \_\_\_\_\_ Presidential and Senate Election Year (36% Federal)
- X  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<br>OREGON FEDERAL 1706<br>F-Key c/o Key Bank | DATE OF RECEIPT<br>M M / D D / Y Y Y Y<br>0 1 / 1 5 / 2 0 0 9 | TOTAL AMOUNT TRANSFERRED<br>5000.00 |
|--|---|-------------------------------------|

|  |  |                                 |
|--|--|---------------------------------|
| BREAKDOWN OF TRANSFER RECEIVED                                     |  | 5000.00                         |
| i) Total Administrative .....                                      |  | Transaction ID: H390219.C100855 |
| 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) .....                                |  |
| TOTAL This Period (Generic Voter Drive) .....                           |  |
| TOTAL This Period (Exempt Activities) .....                             |  |
| TOTAL This Period (Direct Fundraising) .....                            |  |
| TOTAL This Period (Direct Candidate Support) .....                      |  |
| TOTAL This Period (Public Communications Referring Only to Party) ..... |  |
| TOTAL This Period (Total Amount Transferred) .....                      |  |

**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<br>OREGON FEDERAL 1706<br>F-Key c/o Key Bank | DATE OF RECEIPT<br>M M / D D / Y Y Y Y<br>0 1 / 2 6 / 2 0 0 9 | TOTAL AMOUNT TRANSFERRED<br>1000.00 |
|--|---|-------------------------------------|

**BREAKDOWN OF TRANSFER RECEIVED**

|   |         |                                 |
|---|---------|---------------------------------|
| <b>i) Total Administrative</b> .....                                      | 1000.00 | Transaction ID: H390219.C101126 |
| <b>ii) Generic Voter Drive</b> .....                                      |         | Transaction ID:                 |
| <b>iii) Exempt Activities</b> .....                                       |         | Transaction ID:                 |
| <b>iv) Direct Fundraising</b> (List Activity or Event Identifier)         |         |                                 |
| a) _____  |         | Transaction ID:                 |
| b) _____  |         | Transaction ID:                 |
| c) Total Amount Transferred for Direct Fundraising .....                  |         |                                 |
| <b>v) Direct Candidate Support</b> (List of Activity or Event Identifier) |         |                                 |
| a) _____  |         | Transaction ID:                 |
| b) _____  |         | Transaction ID:                 |
| c) Total Amount Transferred For Direct Candidate Support .....            |         |                                 |
| <b>vi) Public Communications Referring Only to Party</b> (Made by PAC)    |         | Transaction ID:                 |

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

|  |         |
|--|---------|
| <b>TOTAL</b> This Period (Administrative) .....                                | 6000.00 |
| <b>TOTAL</b> This Period (Generic Voter Drive) .....                           | 0.00    |
| <b>TOTAL</b> This Period (Exempt Activities) .....                             | 0.00    |
| <b>TOTAL</b> This Period (Direct Fundraising) .....                            | 0.00    |
| <b>TOTAL</b> This Period (Direct Candidate Support) .....                      | 0.00    |
| <b>TOTAL</b> This Period (Public Communications Referring Only to Party) ..... | 0.00    |
| <b>TOTAL</b> This Period (Total Amount Transferred) .....                      | 6000.00 |

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

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

|  |       |          |   |  |  |
|--|-------|----------|---|--|--|
| <b>A. Full Name (Last, First, Middle Initial)</b><br>Textron Financial |       |          | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>40 Westminster Street                               |       |          | Allocated Activity or Event Year-To-Date<br>200.00  |  |  |
| City   | State | Zip Code | Date <input type="text" value="01"/> / <input type="text" value="12"/> / <input type="text" value="2009"/>  |  |  |
| Providence   | RI    | 02903-   |   |  |  |
| Purpose of Disbursement:<br>Rent                                       |       |          | Transaction ID: H490219.E16868  |  |  |
| Activity or Event Identifier:<br>ADMINISTRATION B 31                   |       |          |   |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 42.00         |   | 158.00           |   | 200.00       |

|  |       |          |   |  |  |
|--|-------|----------|---|--|--|
| <b>B. Full Name (Last, First, Middle Initial)</b><br>U.S. Postmaster |       |          | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>Lake Oswego Branch                                |       |          | Allocated Activity or Event Year-To-Date<br>934.32  |  |  |
| City   | State | Zip Code | Date <input type="text" value="01"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>  |  |  |
| Lake Oswego  | OR    | 97035-   |   |  |  |
| Purpose of Disbursement:<br>Postage--OR GOP                          |       |          | Transaction ID: H490219.E16879  |  |  |
| Activity or Event Identifier:<br>ADMINISTRATION B 31                 |       |          |   |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 17.85         |   | 67.15            |   | 85.00        |

|   |       |            |   |  |  |
|---|-------|------------|---|--|--|
| <b>C. Full Name (Last, First, Middle Initial)</b><br>Ricoh Customer Finance Corp. |       |            | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>PO Box 310010273   |       |            | Allocated Activity or Event Year-To-Date<br>849.32  |  |  |
| City  | State | Zip Code   | Date <input type="text" value="01"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>  |  |  |
| Pasadena  | CA    | 91110-0001 |   |  |  |
| Purpose of Disbursement:<br>Equipment Lease                                       |       |            | Transaction ID: H490219.E16880  |  |  |
| Activity or Event Identifier:<br>ADMINISTRATION B 31                              |       |            |   |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 28.77         |   | 108.23           |   | 137.00       |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 88.62         |   | 333.38           |   | 422.00       |

**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

|  |       |            |   |  |   |              |
|--|-------|------------|---|--|---|--------------|
| <b>A. Full Name (Last, First, Middle Initial)</b><br>Qwest |       |            | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |   |              |
| Mailing Address<br>PO Box 91155                            |       |            | Allocated Activity or Event Year-To-Date<br>[ 310.42 ]  |  |   |              |
| City   | State | Zip Code   | Category/<br>Type   |  |   |              |
| Seattle  | WA    | 98111-9255 |   |  |   |              |
| Purpose of Disbursement:<br>Phone service                  |       |            | Date <input type="text" value="01"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>  |  |   |              |
| Activity or Event Identifier:<br>ADMINISTRATION B 31       |       |            | Transaction ID: H490219.E16882  |  |   |              |
| FEDERAL SHARE  |       | +          | NONFEDERAL SHARE  |  | = | TOTAL AMOUNT |
| [ 10.71 ]  |       |            | [ 40.31 ]   |  |   | [ 51.02 ]    |

|   |       |          |   |  |   |              |
|---|-------|----------|---|--|---|--------------|
| <b>B. Full Name (Last, First, Middle Initial)</b><br>LifeWise |       |          | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |   |              |
| Mailing Address<br>815 SW Bond St                             |       |          | Allocated Activity or Event Year-To-Date<br>[ 581.37 ]  |  |   |              |
| City  | State | Zip Code | Category/<br>Type   |  |   |              |
| Bend  | OR    | 97702-   |   |  |   |              |
| Purpose of Disbursement:<br>Insurance                         |       |          | Date <input type="text" value="01"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>  |  |   |              |
| Activity or Event Identifier:<br>ADMINISTRATION B 31          |       |          | Transaction ID: H490219.E16883  |  |   |              |
| FEDERAL SHARE   |       | +        | NONFEDERAL SHARE  |  | = | TOTAL AMOUNT |
| [ 56.90 ]   |       |          | [ 214.05 ]  |  |   | [ 270.95 ]   |

|  |       |            |   |  |   |              |
|--|-------|------------|---|--|---|--------------|
| <b>C. Full Name (Last, First, Middle Initial)</b><br>Integra Telecom |       |            | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |   |              |
| Mailing Address<br>PO Box 34988                                      |       |            | Allocated Activity or Event Year-To-Date<br>[ 712.32 ]  |  |   |              |
| City   | State | Zip Code   | Category/<br>Type   |  |   |              |
| Seattle  | WA    | 98124-1988 |   |  |   |              |
| Purpose of Disbursement:<br>Phone service                            |       |            | Date <input type="text" value="01"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>  |  |   |              |
| Activity or Event Identifier:<br>ADMINISTRATION B 31                 |       |            | Transaction ID: H490219.E16885  |  |   |              |
| FEDERAL SHARE  |       | +          | NONFEDERAL SHARE  |  | = | TOTAL AMOUNT |
| [ 27.50 ]  |       |            | [ 103.45 ]  |  |   | [ 130.95 ]   |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| [ 95.11 ]     |   | [ 357.81 ]       |   | [ 452.92 ]   |

**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

|  |             |                        |   |  |  |
|--|-------------|------------------------|---|--|--|
| <b>A. Full Name (Last, First, Middle Initial)</b><br>Federal Express |             |                        | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>PO Box 1140                                       |             |                        | Allocated Activity or Event Year-To-Date<br>259.40  |  |  |
| City<br>Memphis  | State<br>TN | Zip Code<br>38101-1140 | Date<br>M M / D D / Y Y Y Y<br>0 1 / 1 5 / 2 0 0 9  |  |  |
| Purpose of Disbursement:<br>Shipping - OR GOP                        |             |                        | Transaction ID: H490219.E16888  |  |  |
| Activity or Event Identifier:<br>ADMINISTRATION B 31                 |             |                        |   |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 12.47         |   | 46.93            |   | 59.40        |

|   |             |                    |   |  |  |
|---|-------------|--------------------|---|--|--|
| <b>B. Full Name (Last, First, Middle Initial)</b><br>Stafford Studios |             |                    | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>6270 SE 29th Way                                   |             |                    | Allocated Activity or Event Year-To-Date<br>1988.81   |  |  |
| City<br>Gresham   | State<br>OR | Zip Code<br>97080- | Date<br>M M / D D / Y Y Y Y<br>0 1 / 2 6 / 2 0 0 9  |  |  |
| Purpose of Disbursement:<br>Web Service                               |             |                    | Transaction ID: H490219.E16916  |  |  |
| Activity or Event Identifier:<br>ADMINISTRATION B 31                  |             |                    |   |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 31.50         |   | 118.50           |   | 150.00       |

|  |             |                        |   |  |  |
|--|-------------|------------------------|---|--|--|
| <b>C. Full Name (Last, First, Middle Initial)</b><br>Federal Express |             |                        | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>PO Box 1140                                       |             |                        | Allocated Activity or Event Year-To-Date<br>1013.29   |  |  |
| City<br>Memphis  | State<br>TN | Zip Code<br>38101-1140 | Date<br>M M / D D / Y Y Y Y<br>0 1 / 2 6 / 2 0 0 9  |  |  |
| Purpose of Disbursement:<br>Shipping - OR GOP                        |             |                        | Transaction ID: H490219.E16917  |  |  |
| Activity or Event Identifier:<br>ADMINISTRATION B 31                 |             |                        |   |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 5.25          |   | 19.74            |   | 24.99        |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 49.22         |   | 185.17           |   | 234.39       |

**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

|  |             |                        |   |  |  |
|--|-------------|------------------------|---|--|--|
| <b>A. Full Name (Last, First, Middle Initial)</b><br>Integra Telecom |             |                        | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>PO Box 34988                                      |             |                        | Allocated Activity or Event Year-To-Date<br>2124.42   |  |  |
| City<br>Seattle  | State<br>WA | Zip Code<br>98124-1988 | Date <input type="text" value="01"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>  |  |  |
| Purpose of Disbursement:<br>Phone service                            |             |                        | Transaction ID: H490219.E16918  |  |  |
| Activity or Event Identifier:<br>ADMINISTRATION B 31                 |             |                        | Category/Type   |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 28.48         |   | 107.13           |   | 135.61       |

|   |             |                        |   |  |  |
|---|-------------|------------------------|---|--|--|
| <b>B. Full Name (Last, First, Middle Initial)</b><br>Ricoh Customer Finance Corp. |             |                        | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>PO Box 310010273   |             |                        | Allocated Activity or Event Year-To-Date<br>2261.42   |  |  |
| City<br>Pasadena  | State<br>CA | Zip Code<br>91110-0001 | Date <input type="text" value="01"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>  |  |  |
| Purpose of Disbursement:<br>Equipment Lease                                       |             |                        | Transaction ID: H490219.E16919  |  |  |
| Activity or Event Identifier:<br>ADMINISTRATION B 31                              |             |                        | Category/Type   |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 28.77         |   | 108.23           |   | 137.00       |

|   |             |                        |   |  |  |
|---|-------------|------------------------|---|--|--|
| <b>C. Full Name (Last, First, Middle Initial)</b><br>Office Depot |             |                        | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>10520 SW Cascade Ave                           |             |                        | Allocated Activity or Event Year-To-Date<br>1072.51   |  |  |
| City<br>Portland  | State<br>OR | Zip Code<br>97223-4302 | Date <input type="text" value="01"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>  |  |  |
| Purpose of Disbursement:<br>Office supplies                       |             |                        | Transaction ID: H490219.E16920  |  |  |
| Activity or Event Identifier:<br>ADMINISTRATION B 31              |             |                        | Category/Type   |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 12.44         |   | 46.78            |   | 59.22        |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 69.69         |   | 262.14           |   | 331.83       |

**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

|   |             |                    |   |  |  |
|---|-------------|--------------------|---|--|--|
| <b>A. Full Name (Last, First, Middle Initial)</b><br>Hartford Insurance |             |                    | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>PO Box 33015   |             |                    | Allocated Activity or Event Year-To-Date<br>[ 1838.81 ]   |  |  |
| City<br>San Antonio   | State<br>TX | Zip Code<br>78265- | Date<br>M M / D D / Y Y Y Y<br>0 1 / 2 6 / 2 0 0 9  |  |  |
| Purpose of Disbursement:<br>Insurance                                   |             |                    | Transaction ID: H490219.E16921  |  |  |
| Activity or Event Identifier:<br>ADMINISTRATION B 31                    |             |                    |   |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| [ 140.49 ]    |   | [ 528.51 ]       |   | [ 669.00 ]   |

|   |             |                    |   |  |  |
|---|-------------|--------------------|---|--|--|
| <b>B. Full Name (Last, First, Middle Initial)</b><br>Dell Financial |             |                    | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>PO Box 120001                                    |             |                    | Allocated Activity or Event Year-To-Date<br>[ 1169.81 ]   |  |  |
| City<br>Dallas  | State<br>TX | Zip Code<br>75312- | Date<br>M M / D D / Y Y Y Y<br>0 1 / 2 6 / 2 0 0 9  |  |  |
| Purpose of Disbursement:<br>Equipment Lease                         |             |                    | Transaction ID: H490219.E16924  |  |  |
| Activity or Event Identifier:<br>ADMINISTRATION B 31                |             |                    |   |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| [ 20.43 ]     |   | [ 76.87 ]        |   | [ 97.30 ]    |

|  |             |                        |   |  |  |
|--|-------------|------------------------|---|--|--|
| <b>C. Full Name (Last, First, Middle Initial)</b><br>Vance Day |             |                        | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |  |  |
| Mailing Address<br>PO Box 546                                  |             |                        | Allocated Activity or Event Year-To-Date<br>[ 988.30 ]  |  |  |
| City<br>Salem  | State<br>OR | Zip Code<br>97308-0546 | Date<br>M M / D D / Y Y Y Y<br>0 1 / 2 6 / 2 0 0 9  |  |  |
| Purpose of Disbursement:<br>Reimbursement--See below           |             |                        | Transaction ID: H490219.E16926  |  |  |
| Activity or Event Identifier:<br>ADMINISTRATION B 31           |             |                        |   |  |  |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| [ 11.34 ]     |   | [ 42.64 ]        |   | [ 53.98 ]    |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| [ 172.26 ]    |   | [ 648.02 ]       |   | [ 820.28 ]   |

**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

|  |       |            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|-------|------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| <b>A. Full Name (Last, First, Middle Initial)</b><br>Fred Meyer Stores                     |       |            | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Mailing Address<br>3450 Commercial St SE   |       |            | Allocated Activity or Event Year-To-Date<br>53.98   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 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>1</td><td>/</td><td>2</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table> Transaction ID: H490219.E16927                            |   |   | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 1 | / | 2 | 6 | / | 2 | 0 | 0 | 9 |
| M  | M     | /          |   |   |   | D | D | / | Y | Y | Y | Y |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 0  | 1     | /          | 2   | 6 | / | 2 | 0 | 0 | 9 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Salem  | OR    | 97302-4635 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Purpose of Disbursement:<br>Office supplies  |       |            | Category/<br>Type   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Activity or Event Identifier:<br>ADMINISTRATION B 31<br><b>[MEMO ITEM]</b> Office supplies |       |            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 11.34         |   | 42.64            |   | 53.98        |

|   |       |            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|-------|------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| <b>B. Full Name (Last, First, Middle Initial)</b><br>Gary Schmidt |       |            | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Mailing Address<br>14462 SE Bridgeton St                          |       |            | Allocated Activity or Event Year-To-Date<br>2416.52   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 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>1</td><td>/</td><td>2</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table> Transaction ID: H490219.E16928                            |   |   | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 1 | / | 2 | 6 | / | 2 | 0 | 0 | 9 |
| M   | M     | /          |   |   |   | D | D | / | Y | Y | Y | Y |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 0   | 1     | /          | 2   | 6 | / | 2 | 0 | 0 | 9 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Clackamas   | OR    | 97015-6270 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Purpose of Disbursement:<br>Reimbursement--See below              |       |            | Category/<br>Type   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Activity or Event Identifier:<br>ADMINISTRATION B 31              |       |            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 32.57         |   | 122.53           |   | 155.10       |

|  |       |          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|-------|----------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| <b>C. Full Name (Last, First, Middle Initial)</b><br>U.S. Postmaster                       |       |          | Type of Allocated Activity:<br><input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt<br><input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support<br><input type="checkbox"/> Public Comm (ref to party only) by PAC |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Mailing Address<br>410 Mill St SE  |       |          | Allocated Activity or Event Year-To-Date<br>126.00  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 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>1</td><td>/</td><td>2</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table> Transaction ID: H490219.E16931                            |   |   | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 1 | / | 2 | 6 | / | 2 | 0 | 0 | 9 |
| M  | M     | /        |   |   |   | D | D | / | Y | Y | Y | Y |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 0  | 1     | /        | 2   | 6 | / | 2 | 0 | 0 | 9 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Salem  | OR    | 97301-   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Purpose of Disbursement:<br>Postage--OR GOP  |       |          | Category/<br>Type   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Activity or Event Identifier:<br>ADMINISTRATION B 31<br><b>[MEMO ITEM]</b> Postage--OR GOP |       |          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 26.46         |   | 99.54            |   | 126.00       |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 32.57         |   | 122.53           |   | 155.10       |

**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)**  
Kinkos Lake Oswego

Mailing Address  
10 Centerpointe Dr Ste B

|             |       |            |
|-------------|-------|------------|
| City        | State | Zip Code   |
| Lake Oswego | OR    | 97035-8670 |

Purpose of Disbursement:  
Shipping

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

29.10

Activity or Event Identifier:  
ADMINISTRATION B 31  
**[MEMO ITEM]**Shipping

Date 

|   |   |
|---|---|
| M | M |
| 0 | 1 |

 / 

|   |   |
|---|---|
| D | D |
| 2 | 6 |

 / 

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

Transaction ID: H490219.E16929

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---------------|---|------------------|---|--------------|
| 6.11          |   | 22.99            |   | 29.10        |

**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 |
|---------------|------------------|--------------|
| 507.47        | 1909.05          | 2416.52      |

Image# 29991064763

Form/Schedule: **F3XN**  
Transaction ID:

Memo #1: Note that on Schedule B, Line 22, the transfers from the federal account to the non-federal account are for cash-flow purposes.

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