

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Oregon Republican Party

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	4

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	4

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>4</td></tr></table>	Y	Y	Y	Y	2	0	0	4		11331.57
Y	Y	Y	Y							
2	0	0	4							
(b) Cash on Hand at Beginning of Reporting Period	272825.80									
(c) Total Receipts (from Line 19)	58676.00	533316.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	331501.80	544647.57								
7. Total Disbursements (from Line 31)	64912.20	278057.97								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	266589.60	266589.60								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	125384.16									

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	4

D	D
0	1

Y	Y	Y	Y
2	0	0	4

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	4

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	33475.00	417968.60
(i) Itemized (use Schedule A)	20501.00	100797.40
(ii) Unitemized	53976.00	518766.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	9850.00
(c) Other Political Committees (such as PACs)	0.00	53976.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	53976.00	528616.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
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)	4700.00	4700.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	4700.00	4700.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	58676.00	533316.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	53976.00	528616.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	5999.96	25555.25
(ii) Non-Federal Share.....	10666.62	45431.56
(b) Other Federal Operating Expenditures.....	17797.07	57432.63
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	34463.65	128419.44
22. Transfers to Affiliated/Other Party Committees.....	10180.00	25480.00
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	0.00	100.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	100.00
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	20268.55	124058.53
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	20268.55	124058.53
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	64912.20	278057.97
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	54245.58	232626.41

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3	53976.00	528616.00
34. Total Contribution Refunds (from Line 28(d))	0.00	100.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	53976.00	528516.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	23797.03	82987.88
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	23797.03	82987.88

SCHEDULE L (FEC Form 3X)

AGGREGATION PAGE: LEVIN FUNDS

Transaction ID: SL1

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

	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
a. Itemized..... <small>(Use Schedule L-A)</small>	5000.00	5000.00
b. Unitemized.....	150.00	255.93
c. Total.....	5150.00	5255.93
2. OTHER RECEIPTS.....	150.00	79850.00
3. TOTAL RECEIPTS..... <small>(Add Lines 1c and 2)</small>	5300.00	85105.93
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT <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.....	0.00	113.25
6. TOTAL DISBURSEMENTS..... <small>(Add Lines 4e and 5)</small>	0.00	113.25
7. BEGINNING CASH ON HAND..... <small>(for Column B, use cash as of January 1st)</small>	79692.68	0.00
8. RECEIPTS..... <small>(from Line 3)</small>	5300.00	85105.93
9. SUBTOTAL..... <small>(Add Lines 7 and 8)</small>	84992.68	85105.93
10. DISBURSEMENTS..... <small>(From Line 6)</small>	0.00	113.25
11. ENDING CASH ON HAND..... <small>(Subtract Line 10 From Line 9)</small>		84992.68

**SCHEDULE L-A (FEC Form 3X)
ITEMIZED RECEIPTS OF LEVIN FUNDS**

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

FOR LINE NUMBER:
(check only one) 1a 2

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

Full Name (Last, First, Middle Initial)
A. William McCormick

Transaction ID: SL71029.C93313

Date of Receipt

/ /

Mailing Address 11837 SW Riverwood Road

Amount of Each Receipt this Period

City State Zip Code
Portland OR 97219-

Aggregate Year-to-Date

Name of Employer or Principal Place of Business
McCormick & Schmick Mgt

Occupation
CEO

Account: 8

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE L-A (FEC Form 3X)
ITEMIZED RECEIPTS OF LEVIN FUNDS

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

FOR LINE NUMBER: 1a 2
 (check only one)

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NAME OF COMMITTEE (In Full)
 Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Northwest Grassroots & Communications

Mailing Address 5 Centerpointe Drive Suite 400

City Lake Oswego State OR Zip Code 97035-

Name of Employer or Principal Place of Business

Occupation

Transaction ID: SLC71962

Date of Receipt

/ /

Amount of Each Receipt this Period

Aggregate Year-to-Date

Account: 8

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Rick Bosch

Mailing Address 8780 SW Bomar Ct

City State Zip Code
Portland OR 97223

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

Name of Employer Occupation
Heinz Mechanical Contractor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
04 / 15 / 2004

Transaction ID: C72373

Amount of Each Receipt this Period
500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Clifford Bryden

Mailing Address 1058 S.E. Kane St.

City State Zip Code
Roseburg OR 97470-4803

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
MM / DD / YYYY
04 / 16 / 2004

Transaction ID: C72479

Amount of Each Receipt this Period
200.00

Receipt

C. Full Name (Last, First, Middle Initial)
Dean Bundy

Mailing Address 10550 S Kelland Ct

City State Zip Code
Oregon City OR 97045

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
MM / DD / YYYY
04 / 01 / 2004

Transaction ID: C71961

Amount of Each Receipt this Period
200.00

Receipt

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 47
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

Full Name (Last, First, Middle Initial) A. James Butsch		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 2 / 2 0 0 4
Mailing Address 7877 SW Edgewater East		Transaction ID: C72635
City Wilsonville	State OR	Zip Code 97070-9482
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self	Occupation Farming	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Earle Chiles		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 4
Mailing Address 111 SW 5th Avenue, STE 400		Transaction ID: C72687
City Portland	State OR	Zip Code 97204
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self	Occupation Investor	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. James Damon		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 4
Mailing Address PO Box 2848		Transaction ID: C72457
City Seaside	State OR	Zip Code 97138-2848
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Retired	Occupation Retired	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

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

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

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

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Bonnie J. Ford

Mailing Address PO Box 1183

City State Zip Code
Roseburg OR 97470

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
MM / DD / YYYY
04 / 15 / 2004

Transaction ID: C72372

Amount of Each Receipt this Period
200.00

Receipt

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

Mailing Address 1771 E Lincoln Rd

City State Zip Code
Woodburn OR 97071

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
MM / DD / YYYY
04 / 06 / 2004

Transaction ID: C72148

Amount of Each Receipt this Period
100.00

Receipt

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

Mailing Address 32140 SW Boones Bend Rd

City State Zip Code
Wilsonville OR 97070-6414

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
04 / 14 / 2004

Transaction ID: C72472

Amount of Each Receipt this Period
225.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	525.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 47
	<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

Full Name (Last, First, Middle Initial) A. Mark L. Holloway		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 4	
Mailing Address 13221 SW 68th Parkway #420 8824 SW Firview Pl., Beaverton		Transaction ID: C72454	
City State Zip Code Portland OR 97223	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Self Occupation Investor	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Robert Holmes		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 4	
Mailing Address 1210 Spyglass Dr.		Transaction ID: C72576	
City State Zip Code Eugene OR 97401-2057	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Janice Hooson		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 4	
Mailing Address 4308 SW Fraser Avenue		Transaction ID: C72679	
City State Zip Code Portland OR 97225-1911	Amount of Each Receipt this Period 750.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 750.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	1250.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Kermit Houser

Mailing Address 10131 Morning Dove Drive

City State Zip Code
Klamath Falls OR 97601

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 0 4

Transaction ID: C72347

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address 4380 SW Macadam #590

City State Zip Code
Portland OR 97201-6408

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

Name of Employer Occupation
Mack, Roberts Certified Public Accountant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 0 4

Transaction ID: C72341

Amount of Each Receipt this Period
200.00

Receipt

C. Full Name (Last, First, Middle Initial)
Gerald Moshofsky

Mailing Address 1240 E 22nd Ave

City State Zip Code
Eugene OR 97403-1509

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

Name of Employer Occupation
Newood Display Fixtures Pres. Fixture Co.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

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

Transaction ID: C72517

Amount of Each Receipt this Period
200.00

Receipt

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

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

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

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Mark Mounsey

Mailing Address 1254 SW Cardinell Drive

City Portland State OR Zip Code 97201

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

Name of Employer FTL Inc. Occupation Exec.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 0 4

Transaction ID: C72308

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Betty Roberts

Mailing Address PO Box 7007

City Eugene State OR Zip Code 97401

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 0 4

Transaction ID: C72583

Amount of Each Receipt this Period
500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Doris Storms

Mailing Address 2135 Westwood Lane

City Eugene State OR Zip Code 97401-5428

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

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

Transaction ID: C72689

Amount of Each Receipt this Period
200.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	950.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Warren Ulrich

Mailing Address 3445 NW Luzon St.

City State Zip Code
Portland OR 97210

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

Name of Employer Information Requested Occupation requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
04 / 16 / 2004

Transaction ID: C72499

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 2120 Fairmount Street

City State Zip Code
Klamath Falls OR 97601

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
MM / DD / YYYY
04 / 20 / 2004

Transaction ID: 71026.C93296

Amount of Each Receipt this Period
10000.00

Reattribution Memo

[MEMO ITEM]
Reattribution from Spouse

C. Full Name (Last, First, Middle Initial)
Rod Wendt

Mailing Address 2120 Fairmount Street

City State Zip Code
Klamath Falls OR 97601-1536

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

Name of Employer JELD-WEN, Inc. Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 25000.00

Date of Receipt
MM / DD / YYYY
04 / 20 / 2004

Transaction ID: C72510

Amount of Each Receipt this Period
25000.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	25250.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Rod Wendt

Mailing Address 2120 Fairmount Street

City State Zip Code
Klamath Falls OR 97601-1536

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

Name of Employer Occupation
JELD-WEN, Inc. President

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 15000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 20 / 2004

Transaction ID: 71026.C93297

Amount of Each Receipt this Period
-10000.00

Reattribution Memo
[MEMO ITEM]
Reattribution to Spouse

B. Full Name (Last, First, Middle Initial)
James M. Wilson

Mailing Address 21458 Oak Ln

City State Zip Code
Aurora OR 97002

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

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 100.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 19 / 2004

Transaction ID: C72604

Amount of Each Receipt this Period
100.00

Receipt

C. Full Name (Last, First, Middle Initial)
James M. Wilson

Mailing Address 21458 Oak Ln

City State Zip Code
Aurora OR 97002

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

Name of Employer Occupation
Retired Retired

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

Date of Receipt
M M / D D / Y Y Y Y
04 / 27 / 2004

Transaction ID: C72684

Amount of Each Receipt this Period
100.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	200.00
TOTAL This Period (last page this line number only)	▶	

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

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

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
John S Wilson

Mailing Address PO Box 129

City State Zip Code
North Powder OR 97867

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

Name of Employer Occupation
Wilson Cattle Co Rancher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	5	/	2	0	0	4

Transaction ID: C72054

Amount of Each Receipt this Period
2000.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	2000.00
TOTAL This Period (last page this line number only)	▶	33475.00

**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 18 / 47

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

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

Full Name (Last, First, Middle Initial) A. Creative Strategies		Transaction ID: E9472 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 4
Mailing Address 9 Monroe Parkway, Suite 120		Amount of Each Disbursement this Period 1350.00
City Lake Oswego State OR Zip Code 97035-	Category/ Type	
Purpose of Disbursement DIRECT MAIL CONSULTING FEE		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	DIRECT MAIL CONSULTING FEE

Full Name (Last, First, Middle Initial) B. Creative Strategies		Transaction ID: E9494 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 4
Mailing Address 9 Monroe Parkway, Suite 120		Amount of Each Disbursement this Period 1500.00
City Lake Oswego State OR Zip Code 97035-	Category/ Type	
Purpose of Disbursement POSTAGE		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	POSTAGE

Full Name (Last, First, Middle Initial) C. Direct Mail Systems, Inc		Transaction ID: E9358 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 4
Mailing Address 12450 Automobile Boulevard		Amount of Each Disbursement this Period 1000.00
City Clearwater State FL Zip Code 34622-	Category/ Type	
Purpose of Disbursement FUNDRAISING MAIL		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FUNDRAISING MAIL

SUBTOTAL of Disbursements This Page (optional) ▶	3850.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 19 / 47

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

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

Full Name (Last, First, Middle Initial) A. Direct Mail Systems, Inc		Transaction ID: E9391 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 8 / 2 0 0 4
Mailing Address 12450 Automobile Boulevard		Amount of Each Disbursement this Period 1000.00
City Clearwater State FL Zip Code 34622-	FUNDRAISING MAIL	
Purpose of Disbursement FUNDRAISING MAIL Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Direct Mail Systems, Inc		Transaction ID: E9414 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 4
Mailing Address 12450 Automobile Boulevard		Amount of Each Disbursement this Period 1000.00
City Clearwater State FL Zip Code 34622-	DIRECT MAIL	
Purpose of Disbursement DIRECT MAIL Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Direct Mail Systems, Inc		Transaction ID: E9454 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 4
Mailing Address 12450 Automobile Boulevard		Amount of Each Disbursement this Period 1000.00
City Clearwater State FL Zip Code 34622-	DIRECT MAIL	
Purpose of Disbursement DIRECT MAIL Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 20 / 47

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

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

Full Name (Last, First, Middle Initial) A. Direct Mail Systems, Inc		Transaction ID: E9496 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 4
Mailing Address 12450 Automobile Boulevard		Amount of Each Disbursement this Period 1000.00
City Clearwater State FL Zip Code 34622-	Purpose of Disbursement DIRECT MAIL Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	DIRECT MAIL

Full Name (Last, First, Middle Initial) B. Electric Lightwave		Transaction ID: E9361 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 4
Mailing Address PO Box 20553		Amount of Each Disbursement this Period 500.00
City Rochester State NY Zip Code 14602-	Purpose of Disbursement AUTODIAL INFO CALLS/OGOP Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	AUTODIAL INFO CALLS/OGOP

Full Name (Last, First, Middle Initial) C. Electric Lightwave		Transaction ID: E9415 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 4
Mailing Address PO Box 20553		Amount of Each Disbursement this Period 1000.00
City Rochester State NY Zip Code 14602-	Purpose of Disbursement AUTO DIAL INFO CALLS/OGOP Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	AUTO DIAL INFO CALLS/OGOP

SUBTOTAL of Disbursements This Page (optional) ▶	2500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

Full Name (Last, First, Middle Initial) A. FLS Connect		Transaction ID: E9359 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 4
Mailing Address 7320 N Dreamy Draw Dr		Amount of Each Disbursement this Period 2900.00
City Phoenix State AZ Zip Code 85020-5212	Category/ Type TELEMARKETING	
Purpose of Disbursement TELEMARKETING		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. FLS Connect		Transaction ID: E9416 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 4
Mailing Address 7320 N Dreamy Draw Dr		Amount of Each Disbursement this Period 1000.00
City Phoenix State AZ Zip Code 85020-5212	Category/ Type TELEMARKETING	
Purpose of Disbursement TELEMARKETING		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. FLS Connect		Transaction ID: E9466 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 4
Mailing Address 7320 N Dreamy Draw Dr		Amount of Each Disbursement this Period 630.00
City Phoenix State AZ Zip Code 85020-5212	Category/ Type TELEMARKETING	
Purpose of Disbursement TELEMARKETING		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4530.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 22 / 47

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

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

Full Name (Last, First, Middle Initial) A. FLS Connect		Transaction ID: E9497 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 4
Mailing Address 7320 N Dreamy Draw Dr		Amount of Each Disbursement this Period 445.00
City Phoenix State AZ Zip Code 85020-5212	Category/ Type TELEMARKETING	
Purpose of Disbursement TELEMARKETING		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. LifeWise		Transaction ID: E9362 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 4
Mailing Address 815 SW Bond St		Amount of Each Disbursement this Period 1658.00
City Bend State OR Zip Code 97702-	Category/ Type HEALTH INSURANCE	
Purpose of Disbursement HEALTH INSURANCE		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Oregon Department of Revenue		Transaction ID: E9393 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 4
Mailing Address PO Box 14800		Amount of Each Disbursement this Period 128.00
City Salem State OR Zip Code 97309-	Category/ Type CORP TAXES	
Purpose of Disbursement CORP TAXES		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2231.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 23 / 47

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

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

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

Mailing Address PO Box 14800

City Salem State OR Zip Code 97309-

Purpose of Disbursement
Q1 QUARTERLY PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: E9500
Date of Disbursement
04 / 30 / 2004

Amount of Each Disbursement this Period
1307.29

Category/Type
Q1 QUARTERLY PAYROLL TAXES

SUBTOTAL of Disbursements This Page (optional)	▶	1307.29
TOTAL This Period (last page this line number only)	▶	17418.29

**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

Full Name (Last, First, Middle Initial) A. Oregon Republican Party		Transaction ID: 71026.E13191 Date of Disbursement 04 / 27 / 2004
Mailing Address c/o Key Bank Levin Account 1500 Edgewater St NW		Amount of Each Disbursement this Period 5000.00
City Salem State OR Zip Code 97302-	Purpose of Disbursement XFER TO LEVIN W.MCCORMICK Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Oregon Republican Party		Transaction ID: 71029.E13192 Date of Disbursement 04 / 27 / 2004
Mailing Address c/o Key Bank Levin Account 1500 Edgewater St NW		Amount of Each Disbursement this Period 150.00
City Salem State OR Zip Code 97302-	Purpose of Disbursement XFER TO LEVIN D. MORGAN Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Oregon Republican Party		Transaction ID: E9460 Date of Disbursement 04 / 20 / 2004
Mailing Address Key Bank NonFederal Acct 1500 Edgewater St NW		Amount of Each Disbursement this Period 5000.00
City Salem State OR Zip Code 97302-	Purpose of Disbursement 4-20-04 WENDT CONTRIBUTION RE-ALLOC Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	10150.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 25 / 47

<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

Full Name (Last, First, Middle Initial)

A. Oregon Republican Party

Mailing Address Key Bank NonFederal Acct
1500 Edgewater St NW

City Salem State OR Zip Code 97302-

Purpose of Disbursement
RUTH BIELENSBERG RE-ALLOCATION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: E9477

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

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 26 / 47

<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

Full Name (Last, First, Middle Initial) A. Michelle Ashenfelter		Transaction ID: E9357 Date of Disbursement MM / DD / YYYY 04 / 01 / 2004	
Mailing Address 2012 NE 15th		Amount of Each Disbursement this Period 1559.88	
City Portland	State OR	Zip Code 97212-	Category/ Type
Purpose of Disbursement FEA PAYROLL		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	FEA PAYROLL	

Full Name (Last, First, Middle Initial) B. Michelle Ashenfelter		Transaction ID: E9377 Date of Disbursement MM / DD / YYYY 04 / 01 / 2004	
Mailing Address 2012 NE 15th		Amount of Each Disbursement this Period 966.46	
City Portland	State OR	Zip Code 97212-	Category/ Type
Purpose of Disbursement TRAVEL EXPS REIMBURSED		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	TRAVEL EXPS REIMBURSED	

Full Name (Last, First, Middle Initial) C. Michelle Ashenfelter		Transaction ID: E9409 Date of Disbursement MM / DD / YYYY 04 / 15 / 2004	
Mailing Address 2012 NE 15th		Amount of Each Disbursement this Period 1554.79	
City Portland	State OR	Zip Code 97212-	Category/ Type
Purpose of Disbursement FEA PAYROLL		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	FEA PAYROLL	

SUBTOTAL of Disbursements This Page (optional) ▶	4081.13
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

Full Name (Last, First, Middle Initial) A. Michelle Ashenfelter		Transaction ID: E9459 Date of Disbursement MM / DD / YYYY 04 / 19 / 2004
Mailing Address 2012 NE 15th		Amount of Each Disbursement this Period 424.90
City Portland State OR Zip Code 97212-	Purpose of Disbursement FEA REIMBURSE FOR TRAVEL EXPENSES Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA REIMBURSE FOR TRAVEL EXPENSES

Full Name (Last, First, Middle Initial) B. Peter Corvallis Productions		Transaction ID: E9381 Date of Disbursement MM / DD / YYYY 04 / 06 / 2004
Mailing Address 79 SW Oak		Amount of Each Disbursement this Period 683.50
City Portland State OR Zip Code 97204-	Purpose of Disbursement MEETING SET UP FEES/OGOP Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	MEETING SET UP FEES/OGOP

Full Name (Last, First, Middle Initial) C. Darryl Howard & Asso		Transaction ID: E9412 Date of Disbursement MM / DD / YYYY 04 / 14 / 2004
Mailing Address 7514 Harley Way SE		Amount of Each Disbursement this Period 2500.00
City Salem State OR Zip Code 97301-	Purpose of Disbursement FEA ACCOUNTING SERVICES Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA ACCOUNTING SERVICES

SUBTOTAL of Disbursements This Page (optional) ▶	3608.40
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 28 / 47

<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

Full Name (Last, First, Middle Initial) A. Sandy Howard		Transaction ID: E9360 Date of Disbursement MM / DD / YYYY 04 / 01 / 2004	
Mailing Address PO Box 1083		Amount of Each Disbursement this Period 2345.70	
City Salem State OR Zip Code 97308-	Purpose of Disbursement FEA VACATION PAYOUT	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		FEA VACATION PAYOUT

Full Name (Last, First, Middle Initial) B. Sandy Howard		Transaction ID: E9355 Date of Disbursement MM / DD / YYYY 04 / 01 / 2004	
Mailing Address PO Box 1083		Amount of Each Disbursement this Period 1528.66	
City Salem State OR Zip Code 97308-	Purpose of Disbursement FEA PAYROLL	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		FEA PAYROLL

Full Name (Last, First, Middle Initial) C. Sandy Howard		Transaction ID: E9457 Date of Disbursement MM / DD / YYYY 04 / 19 / 2004	
Mailing Address PO Box 1083		Amount of Each Disbursement this Period 107.30	
City Salem State OR Zip Code 97308-	Purpose of Disbursement FEA REIMBURSE FOR TRAVEL EXPENSES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		FEA REIMBURSE FOR TRAVEL EXPENSES

SUBTOTAL of Disbursements This Page (optional) ▶	3981.66
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

Full Name (Last, First, Middle Initial) A. Key Bank**		Transaction ID: E9498 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 4
Mailing Address 1500 Edgewater St NW		Amount of Each Disbursement this Period 168.00
City Salem State OR Zip Code 97304-	Purpose of Disbursement FEA Q1 940 TAX Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA Q1 940 TAX

Full Name (Last, First, Middle Initial) B. Amy Langdon		Transaction ID: E9356 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 4
Mailing Address 2830 Foxhaven Dr S		Amount of Each Disbursement this Period 2064.94
City Salem State OR Zip Code 97306-	Purpose of Disbursement FEA PAYROLL Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA PAYROLL

Full Name (Last, First, Middle Initial) C. Amy Langdon		Transaction ID: E9378 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 4
Mailing Address 2830 Foxhaven Dr S		Amount of Each Disbursement this Period 936.48
City Salem State OR Zip Code 97306-	Purpose of Disbursement FEA HOTEL/AIR EXPENSE REIM Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA HOTEL/AIR EXPENSE REIM

SUBTOTAL of Disbursements This Page (optional) ▶	3169.42
TOTAL This Period (last page this line number only) ▶	(Empty box)

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 30 / 47

<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. Amy Langdon Full Name (Last, First, Middle Initial) Mailing Address 2830 Foxhaven Dr S City Salem State OR Zip Code 97306-		Transaction ID: E9428 Date of Disbursement 04 / 14 / 2004
Purpose of Disbursement FEA REIMBURSE FOR TRAVEL EXPENSES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Amount of Each Disbursement this Period 651.48 FEA REIMBURSE FOR TRAVEL EXPENSES
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type		

B. Amy Langdon Full Name (Last, First, Middle Initial) Mailing Address 2830 Foxhaven Dr S City Salem State OR Zip Code 97306-		Transaction ID: E9410 Date of Disbursement 04 / 15 / 2004
Purpose of Disbursement FEA PAYROLL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Amount of Each Disbursement this Period 2059.86 FEA PAYROLL
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type		

C. Amy Langdon Full Name (Last, First, Middle Initial) Mailing Address 2830 Foxhaven Dr S City Salem State OR Zip Code 97306-		Transaction ID: E9458 Date of Disbursement 04 / 19 / 2004
Purpose of Disbursement FEA REIMBURSE FOR TRAVEL EXPENSES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Amount of Each Disbursement this Period 425.17 FEA REIMBURSE FOR TRAVEL EXPENSES
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type		

SUBTOTAL of Disbursements This Page (optional) ▶	3136.51
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 31 / 47

<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

Full Name (Last, First, Middle Initial) A. Oregon Department of Revenue		Transaction ID: E9455 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 4
Mailing Address PO Box 14800		Amount of Each Disbursement this Period 507.00
City Salem State OR Zip Code 97309-	Purpose of Disbursement FEA PAYROLL TAX Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA PAYROLL TAX

Full Name (Last, First, Middle Initial) B. Oregon Department of Revenue		Transaction ID: E9456 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 4
Mailing Address PO Box 14800		Amount of Each Disbursement this Period 500.00
City Salem State OR Zip Code 97309-	Purpose of Disbursement FEA PAYROLL TAXES Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA PAYROLL TAXES

Full Name (Last, First, Middle Initial) C. Oregon Department of Revenue		Transaction ID: E9499 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 4
Mailing Address PO Box 14800		Amount of Each Disbursement this Period 500.00
City Salem State OR Zip Code 97309-	Purpose of Disbursement FEA: PAYROLL TAXES Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA: PAYROLL TAXES

SUBTOTAL of Disbursements This Page (optional) ▶	1507.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 32 / 47

<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

Full Name (Last, First, Middle Initial)

A. Annastasia Pannas

Mailing Address 5225 Chapman St. S

City Salem State OR Zip Code 97306-

Purpose of Disbursement
FEA PAYROLL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: E9411

Date of Disbursement

/ /

Amount of Each Disbursement this Period

784.43

FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional)

784.43

TOTAL This Period (last page this line number only)

20268.55

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 Advanced Office Systems	Nature of Debt (Purpose): riso supplies
Mailing Address P.O. Box 1193	
City State ZIP Code Tualatin OR 97062-1193	

Outstanding Balance Beginning This Period 1386.55	Transaction ID: 3LS71015.E13094	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1386.55

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Creative Strategies	Nature of Debt (Purpose): Direct Mail Consulting fee
Mailing Address 9 Monroe Parkway, Suite 120	
City State ZIP Code Lake Oswego OR 97035-	

Outstanding Balance Beginning This Period 3330.76	Transaction ID: 11LSE9472	
Amount Incurred This Period 0.00	Payment This Period 1350.00	Outstanding Balance at Close of This Period 1980.76

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

Outstanding Balance Beginning This Period 34896.24	Transaction ID: 4LSE9359	
Amount Incurred This Period 0.00	Payment This Period 4975.00	Outstanding Balance at Close of This Period 29921.24

1) SUBTOTALS This Period This Page (optional).....	33288.55
2) TOTALS This Period (last page this line number only).....	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Oregon Republican Party

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

Outstanding Balance Beginning This Period 36525.28	Transaction ID: 15LSE9358	
Amount Incurred This Period 0.00	Payment This Period 4000.00	Outstanding Balance at Close of This Period 32525.28

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Norton & Butler CPA	Nature of Debt (Purpose): CPA Services
Mailing Address PO Box 12873	
City State ZIP Code Salem OR 97309-	

Outstanding Balance Beginning This Period 840.00	Transaction ID: 24LSE9463	
Amount Incurred This Period 0.00	Payment This Period 325.00	Outstanding Balance at Close of This Period 515.00

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

Outstanding Balance Beginning This Period 1565.00	Transaction ID: 16LSE9122	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1565.00

1) SUBTOTALS This Period This Page (optional).....	▶	34605.28
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Pitney Bowes Credit Corp	Nature of Debt (Purpose): postage machine lease
Mailing Address P. O. Box 85460	
City State ZIP Code Louisville KY 40285-5460	

Outstanding Balance Beginning This Period 872.04	Transaction ID: 19LSE9392	
Amount Incurred This Period 0.00	Payment This Period 872.04	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Reed Harris Mailhouse	Nature of Debt (Purpose): generic direct mail/ogop
Mailing Address 322 NW 14th	
City State ZIP Code Portland OR 97210-	

Outstanding Balance Beginning This Period 3079.37	Transaction ID: 26LSE9470	
Amount Incurred This Period 0.00	Payment This Period 3079.37	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor WB Adams Insurance Co	Nature of Debt (Purpose): liability insurance
Mailing Address 6290 SW Arctic Dr	
City State ZIP Code Beaverton OR 97005-	

Outstanding Balance Beginning This Period 2150.00	Transaction ID: 18LS71002.E13089	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2150.00

1) SUBTOTALS This Period This Page (optional).....	2150.00
2) TOTALS This Period (last page this line number only).....	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 36 / 47
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Premiere Conferencing	Nature of Debt (Purpose): conference calls
Mailing Address PO Box 87-5450	
City State ZIP Code Kansas City MO 64180-	

Outstanding Balance Beginning This Period <input type="text" value="1794.74"/>	Transaction ID: 2LSE9417	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="504.92"/>	Outstanding Balance at Close of This Period <input type="text" value="1289.82"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Computer Village	Nature of Debt (Purpose): Computer work
Mailing Address 4075 76th Ave NE	
City State ZIP Code Salem OR 97305-	

Outstanding Balance Beginning This Period <input type="text" value="5660.03"/>	Transaction ID: 25LSE9589	
Amount Incurred This Period <input type="text" value="7837.69"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="13497.72"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Telecommunication Politel	Nature of Debt (Purpose): telemarketing
Mailing Address 1711 W County Rd B #330N	
City State ZIP Code Saint Paul MN 55113-	

Outstanding Balance Beginning This Period <input type="text" value="4500.00"/>	Transaction ID: 8LS70929.E13085	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="4500.00"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="19287.54"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Oregon Republican Party

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

Outstanding Balance Beginning This Period 2188.50	Transaction ID: 1LSE9361	
Amount Incurred This Period 451.33	Payment This Period 1500.00	Outstanding Balance at Close of This Period 1139.83

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

Outstanding Balance Beginning This Period 3658.70	Transaction ID: 22LSE9591	
Amount Incurred This Period 1163.90	Payment This Period 0.00	Outstanding Balance at Close of This Period 4822.60

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Fred Gabriel, PC	Nature of Debt (Purpose): CPA services
Mailing Address 2011 State	
City State ZIP Code Salem OR 97301-	

Outstanding Balance Beginning This Period 2150.00	Transaction ID: 17LSE11439	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2150.00

1) SUBTOTALS This Period This Page (optional).....	8112.43
2) TOTALS This Period (last page this line number only).....	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 38 / 47
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Oregon Republican Party

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

Outstanding Balance Beginning This Period 4001.56	Transaction ID: 23LSE9468	
Amount Incurred This Period 0.00	Payment This Period 575.72	Outstanding Balance at Close of This Period 3425.84

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Key Bank for IRS Payroll taxes	Nature of Debt (Purpose): payroll taxes
Mailing Address 1105 Edgewater	
City State ZIP Code Salem OR 97304-	

Outstanding Balance Beginning This Period 6661.80	Transaction ID: 21LSE9120	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 6661.80

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Connolly & Goldian	Nature of Debt (Purpose): legal services
Mailing Address PO Box 3095	
City State ZIP Code Salem OR 97302-	

Outstanding Balance Beginning This Period 17852.72	Transaction ID: LS71017.E13099	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 17852.72

1) SUBTOTALS This Period This Page (optional).....	▶	27940.36
2) TOTALS This Period (last page this line number only).....	▶	125384.16
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

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

NAME OF COMMITTEE (In Full)
 Oregon Republican Party

NAME OF ACCOUNT OREGON NONFED Key Bank NonFederal Acc	DATE OF RECEIPT M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 4	TOTAL AMOUNT TRANSFERRED 4700.00
---	---	-------------------------------------

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	4700.00	Transaction ID: H3C72417
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)	4700.00
TOTAL This Period (Generic Voter Drive)	0.00
TOTAL This Period (Exempt Activities)	0.00
TOTAL This Period (Direct Fundraising)	0.00
TOTAL This Period (Direct Candidate Support)	0.00
TOTAL This Period (Public Communications Referring Only to Party)	0.00
TOTAL This Period (Total Amount Transferred)	4700.00

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Pitney Bowes Credit Corp			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P. O. Box 85460			Allocated Activity or Event Year-To-Date 53970.27		
City	State	Zip Code	Category/ Type		
Louisville	KY	40285-5460			
Purpose of Disbursement: postage machine lease			Date <input type="text" value="04"/> / <input type="text" value="08"/> / <input type="text" value="2004"/>		
Activity or Event Identifier: ADMINISTRATION B 2111			Transaction ID: H4E9392		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
313.93		558.11		872.04

B. Full Name (Last, First, Middle Initial) Office Depot**			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2945 Liberty St S			Allocated Activity or Event Year-To-Date 54523.82		
City	State	Zip Code	Category/ Type		
Salem	OR	97306-			
Purpose of Disbursement: office supplies			Date <input type="text" value="04"/> / <input type="text" value="14"/> / <input type="text" value="2004"/>		
Activity or Event Identifier: ADMINISTRATION B 2111			Transaction ID: H4E9413		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
90.00		160.00		250.00

C. Full Name (Last, First, Middle Initial) Premiere Conferencing			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 87-5450			Allocated Activity or Event Year-To-Date 56734.77		
City	State	Zip Code	Category/ Type		
Kansas City	MO	64180-			
Purpose of Disbursement: conference calls			Date <input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2004"/>		
Activity or Event Identifier: ADMINISTRATION B 2111			Transaction ID: H4E9417		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
181.77		323.15		504.92

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
585.70		1041.26		1626.96

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) Kevin Mannix			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 375 18th St NE			Allocated Activity or Event Year-To-Date 56229.85	
City Salem	State OR	Zip Code 97301-4307	Date MM / DD / YYYY 04 / 14 / 2004	
Purpose of Disbursement: reimburse for travel expenses			Transaction ID: H4E9427	
Activity or Event Identifier: ADMINISTRATION B 2111				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
614.17		1091.86		1706.03

B. Full Name (Last, First, Middle Initial) Certified Property			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 269			Allocated Activity or Event Year-To-Date 62434.77	
City Salem	State OR	Zip Code 97308-0269	Date MM / DD / YYYY 04 / 19 / 2004	
Purpose of Disbursement: office rent			Transaction ID: H4E9453	
Activity or Event Identifier: ADMINISTRATION B 2111				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2052.00		3648.00		5700.00

C. Full Name (Last, First, Middle Initial) Norton & Butler CPA			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 12873			Allocated Activity or Event Year-To-Date 62759.77	
City Salem	State OR	Zip Code 97309-	Date MM / DD / YYYY 04 / 20 / 2004	
Purpose of Disbursement: CPA Services			Transaction ID: H4E9463	
Activity or Event Identifier: ADMINISTRATION B 2111				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
117.00		208.00		325.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2783.17		4947.86		7731.03

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) Eagle Security			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 4531			Allocated Activity or Event Year-To-Date 68098.18	
City Salem	State OR	Zip Code 97302-	Date M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 4	
Purpose of Disbursement: security system			Transaction ID: H4E9464	
Activity or Event Identifier: ADMINISTRATION B 2111				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
56.05		99.65		155.70

B. Full Name (Last, First, Middle Initial) Environment Control			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 1065			Allocated Activity or Event Year-To-Date 68243.18	
City Salem	State OR	Zip Code 97308-	Date M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 4	
Purpose of Disbursement: office cleaning service			Transaction ID: H4E9465	
Activity or Event Identifier: ADMINISTRATION B 2111				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.20		92.80		145.00

C. Full Name (Last, First, Middle Initial) Office Depot**			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2945 Liberty St S			Allocated Activity or Event Year-To-Date 64476.50	
City Salem	State OR	Zip Code 97306-	Date M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 4	
Purpose of Disbursement: office supplies			Transaction ID: H4E9467	
Activity or Event Identifier: ADMINISTRATION B 2111				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
618.02		1098.71		1716.73

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
726.27		1291.16		2017.43

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Pitney Bowes Purchase Power			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 856042			Allocated Activity or Event Year-To-Date 68818.90		
City Louisville	State KY	Zip Code 40285-	Date MM / DD / YYYY 04 / 20 / 2004		
Purpose of Disbursement: postage			Transaction ID: H4E9468		
Activity or Event Identifier: ADMINISTRATION B 2111					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
207.26		368.46		575.72

B. Full Name (Last, First, Middle Initial) QWest**			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 12480			Allocated Activity or Event Year-To-Date 67942.48		
City Seattle	State WA	Zip Code 98111-	Date MM / DD / YYYY 04 / 20 / 2004		
Purpose of Disbursement: phone bill			Transaction ID: H4E9469		
Activity or Event Identifier: ADMINISTRATION B 2111					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
139.18		247.43		386.61

C. Full Name (Last, First, Middle Initial) Reed Harris Mailhouse			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 322 NW 14th			Allocated Activity or Event Year-To-Date 67555.87		
City Portland	State OR	Zip Code 97210-	Date MM / DD / YYYY 04 / 20 / 2004		
Purpose of Disbursement: generic direct mail/ogop			Transaction ID: H4E9470		
Activity or Event Identifier: ADMINISTRATION B 2111					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1108.57		1970.80		3079.37

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1455.01		2586.69		4041.70

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)
Stafford Studios

Mailing Address
11594 SE Meadowgold Place

City	State	Zip Code
Clackamas	OR	97015-

Purpose of Disbursement:
website maintenance

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

69043.90

Activity or Event Identifier:
ADMINISTRATION B 2111

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	0	/	2	0	0	4

Transaction ID: H4E9471

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
81.00		144.00		225.00

B. Full Name (Last, First, Middle Initial)
Key Bank**

Mailing Address
1500 Edgewater St NW

City	State	Zip Code
Salem	OR	97304-

Purpose of Disbursement:
Bank fees

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

69469.76

Activity or Event Identifier:
ADMINISTRATION B 2111

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	3	0	/	2	0	0	4

Transaction ID: H4E9575

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
153.31		272.55		425.86

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

Mailing Address
P. O. Box 85460

City	State	Zip Code
Louisville	KY	40285-5460

Purpose of Disbursement:
Postage machine

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

54273.82

Activity or Event Identifier:
ADMINISTRATION B 2111

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	8	/	2	0	0	4

Transaction ID: H4E9588

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
109.28		194.27		303.55

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
343.59		610.82		954.41

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) Clackamas County Central Comm.			Type of Allocated Activity: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input checked="" type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 1326			Allocated Activity or Event Year-To-Date 1223.00	
City Clackamas	State OR	Zip Code 97015-	Category/ Type	
Purpose of Disbursement: Voter Registration/OGOP-generic				
Activity or Event Identifier: GV GENERICVOTER DRIVE			Date <input type="text" value="04"/> / <input type="text" value="01"/> / <input type="text" value="2004"/> Transaction ID: H4E9373	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.36"/>		<input type="text" value="0.64"/>		<input type="text" value="1.00"/>

B. Full Name (Last, First, Middle Initial) Deschutes County Central Committee			Type of Allocated Activity: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input checked="" type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 18160 Cottonwood Rd PMB #448			Allocated Activity or Event Year-To-Date 1405.00	
City Bend	State OR	Zip Code 97707-	Category/ Type	
Purpose of Disbursement: Voter Registration/OGOP-generic				
Activity or Event Identifier: GV GENERICVOTER DRIVE			Date <input type="text" value="04"/> / <input type="text" value="01"/> / <input type="text" value="2004"/> Transaction ID: H4E9374	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="47.52"/>		<input type="text" value="84.48"/>		<input type="text" value="132.00"/>

C. Full Name (Last, First, Middle Initial) Coos County Republican Central Committ			Type of Allocated Activity: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input checked="" type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1156 N. 9th St.			Allocated Activity or Event Year-To-Date 1273.00	
City Coos Bay	State OR	Zip Code 97420-	Category/ Type	
Purpose of Disbursement: Voter Registration/OGOP-generic				
Activity or Event Identifier: GV GENERICVOTER DRIVE			Date <input type="text" value="04"/> / <input type="text" value="01"/> / <input type="text" value="2004"/> Transaction ID: H4E9375	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="14.40"/>		<input type="text" value="25.60"/>		<input type="text" value="40.00"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="62.28"/>		<input type="text" value="110.72"/>		<input type="text" value="173.00"/>

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
<input type="text"/>	<input type="text"/>	<input type="text"/>

**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) Central Committee Lane County			Type of Allocated Activity: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input checked="" type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 10247			Allocated Activity or Event Year-To-Date 1233.00	
City Eugene	State OR	Zip Code 97440-2247	Date <input type="text" value="04"/> / <input type="text" value="01"/> / <input type="text" value="2004"/>	
Purpose of Disbursement: Voter Registration/OGOP-generic			Transaction ID: H4E9376	
Activity or Event Identifier: GV GENERICVOTER DRIVE				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.60		6.40		10.00

B. Full Name (Last, First, Middle Initial) Benton County Clerk			Type of Allocated Activity: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input checked="" type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 120 NW 4th St			Allocated Activity or Event Year-To-Date 1407.00	
City Corvallis	State OR	Zip Code 97330-4734	Date <input type="text" value="04"/> / <input type="text" value="12"/> / <input type="text" value="2004"/>	
Purpose of Disbursement: voter file/lists OGOP			Transaction ID: H4E9394	
Activity or Event Identifier: GV GENERICVOTER DRIVE				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.72		1.28		2.00

C. Full Name (Last, First, Middle Initial) Josephine Co. Elections			Type of Allocated Activity: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input checked="" type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 69			Allocated Activity or Event Year-To-Date 1457.00	
City Grants Pass	State OR	Zip Code 97526-	Date <input type="text" value="04"/> / <input type="text" value="23"/> / <input type="text" value="2004"/>	
Purpose of Disbursement: voter file/lists OGOP			Transaction ID: H4E9474	
Activity or Event Identifier: GV GENERICVOTER DRIVE				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.00		32.00		50.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.32		39.68		62.00

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Wallowa County Clerk

Mailing Address
101 S River Street Room 100, Door 16

City State Zip Code
Enterprise OR 97828-1335

Purpose of Disbursement:
voter file/lists-OGOP

Activity or Event Identifier:
GV GENERICVOTER DRIVE

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

1517.05

Date MM / DD / YYYY
04 / 23 / 2004

Transaction ID: H4E9475

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.62		38.43		60.05

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.62		38.43		60.05

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
5999.96	10666.62	16666.58