

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street)   
 Check if different than previously reported. (ACC)

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

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

5. Covering Period  07 / 01 / 2015 through  12 / 31 / 2015

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

Type or Print Name of Treasurer Judith Zamore

Signature of Treasurer Judith Zamore [Electronically Filed] Date  01 / 28 / 2016

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**Oregon Victory Fund**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>	<input type="text" value="500.00"/>	<input type="text" value="500.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="500.00"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="102600.00"/>	<input type="text" value="102600.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="103100.00"/>	<input type="text" value="103100.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="102500.00"/>	<input type="text" value="102500.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="600.00"/>	<input type="text" value="600.00"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Oregon Victory Fund**

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

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		
(i) Itemized (use Schedule A).....	102600.00	102600.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	102600.00	102600.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	102600.00	102600.00
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).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	102600.00	102600.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	102600.00	102600.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	1445.70	1445.70
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	1445.70	1445.70
22. Transfers to Affiliated/Other Party Committees.....	95854.30	95854.30
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (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 .....	5200.00	5200.00
(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)).....	5200.00	5200.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated 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 .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	102500.00	102500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	102500.00	102500.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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) .....	102600.00	102600.00
34. Total Contribution Refunds (from Line 28(d)) .....	5200.00	5200.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	97400.00	97400.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	1445.70	1445.70
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1445.70	1445.70

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 12
	<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	

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

NAME OF COMMITTEE (In Full)  
**Oregon Victory Fund**

Full Name (Last, First, Middle Initial) <b>A. ActBlue</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 20 / 2015
Mailing Address 366 Summer Street		<b>Transaction ID : SA11AI.4147</b>
City Somerville	State MA	Zip Code 02144
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 36600.00	
Name of Employer	Occupation	Total earmarked through conduit; PAC limit not affected
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 36600.00	<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>B. Mary Boyle</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 02 / 2015
Mailing Address PO Box 2824		<b>Transaction ID : SA11AI.4136</b>
City Portland	State OR	Zip Code 97208
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 15200.00	
Name of Employer None	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15200.00	

Full Name (Last, First, Middle Initial) <b>C. Timothy Boyle</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 02 / 2015
Mailing Address PO Box 2824		<b>Transaction ID : SA11AI.4134</b>
City Portland	State OR	Zip Code 97208
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 9800.00	
Name of Employer Columbia Sportswear	Occupation CEO & Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 9800.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	25000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

Full Name (Last, First, Middle Initial)  
**A. George Bulkeley**

Mailing Address 4636 SW Humphrey Court

City	State	Zip Code
Portland	OR	97221

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

Name of Employer	Occupation
Self	Writer/Researcher

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10200.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2015

**Transaction ID : SA11AI.4130**

Amount of Each Receipt this Period  
10200.00

Full Name (Last, First, Middle Initial)  
**B. James Calhoun**

Mailing Address 27 Livingston

City	State	Zip Code
Wellesley	MA	02482

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

Name of Employer	Occupation
Nike, Inc.	President & CEO/Converse

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	16	/	2015

**Transaction ID : SA11AI.4126**

Amount of Each Receipt this Period  
5400.00

Full Name (Last, First, Middle Initial)  
**C. Trevor Edwards**

Mailing Address 2343 NW Pinnacle Drive

City	State	Zip Code
Portland	OR	97229

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

Name of Employer	Occupation
Nike, Inc.	President Nike Brand

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	28	/	2015

**Transaction ID : SA11AI.4124**

Amount of Each Receipt this Period  
5400.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	21000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 12
	<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 Victory Fund**

Full Name (Last, First, Middle Initial) <b>A. Hilary Krane</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 15 / 2015 <b>Transaction ID : SA11AI.4128</b>
Mailing Address 4636 SW Humphrey Court		Amount of Each Receipt this Period 10200.00
City Portland	State OR	Zip Code 97221
FEC ID number of contributing federal political committee. C	Name of Employer Nike	Occupation Attorney
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10200.00	

Full Name (Last, First, Middle Initial) <b>B. Debra Lee</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 10 / 2015 <b>Transaction ID : SA11AI.4118</b>
Mailing Address 305 Harvard Place		Amount of Each Receipt this Period 5000.00
City Medford	State OR	Zip Code 97504
FEC ID number of contributing federal political committee. C	Name of Employer Nonprofit Legal Services	Occupation Attorney
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C. Kathy Parker</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 28 / 2015 <b>Transaction ID : SA11AI.4122</b>
Mailing Address 5323 SW Hewett Blvd.		Amount of Each Receipt this Period 12800.00
City Portland	State OR	Zip Code 97221
FEC ID number of contributing federal political committee. C	Name of Employer Lincoln High School	Occupation Track Coach
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 12800.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	28000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 12
	<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 Victory Fund**

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

Mailing Address 5323 SW Hewett Blvd.

City Portland State OR Zip Code 97221

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

Name of Employer Nike, Inc. Occupation President and CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
12800.00

Date of Receipt  
12 / 28 / 2015  
Transaction ID : SA11AI.4120

Amount of Each Receipt this Period  
12800.00

**B. Peter Sage**  
Full Name (Last, First, Middle Initial)

Mailing Address 305 Harvard Place

City Medford State OR Zip Code 97504

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
12 / 10 / 2015  
Transaction ID : SA11AI.4145

Amount of Each Receipt this Period  
5000.00

**C. Christiana Shi**  
Full Name (Last, First, Middle Initial)

Mailing Address 2415 NW Lovejoy Street

City Portland State OR Zip Code 97210

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

Name of Employer Nike Occupation President, DTC

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10800.00

Date of Receipt  
12 / 15 / 2015  
Transaction ID : SA11AI.4132

Amount of Each Receipt this Period  
10800.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	28600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	102600.00

**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)

<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 Victory Fund**

Full Name (Last, First, Middle Initial)

**A. ActBlue**

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement Fees

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4140**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

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)

<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 Victory Fund**

Full Name (Last, First, Middle Initial)

**A. DEMOCRATIC PARTY OF OREGON**

Mailing Address 232 NE 9TH AVE.

City PORTLAND State OR Zip Code 97232

Purpose of Disbursement  
Transfer

008

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2015

Transaction ID : SB22.4142

Amount of Each Disbursement this Period

73807.81

Full Name (Last, First, Middle Initial)

**B. WYDEN FOR SENATE**

Mailing Address 232 NE 9TH AVENUE

City PORTLAND State OR Zip Code 97232

Purpose of Disbursement  
Transfer

008

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2015

Transaction ID : SB22.4143

Amount of Each Disbursement this Period

22046.49

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

95854.30

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

95854.30

**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 checked="" 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 Victory Fund**

Full Name (Last, First, Middle Initial)

**A. Kathy Parker**

Mailing Address 5323 SW Hewett Blvd.

City Portland State OR Zip Code 97221

Purpose of Disbursement Refund

010

Candidate Name

Category/Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2015

Transaction ID : SB28A.4138

Amount of Each Disbursement this Period

2600.00

Full Name (Last, First, Middle Initial)

**B. Mark Parker**

Mailing Address 5323 SW Hewett Blvd.

City Portland State OR Zip Code 97221

Purpose of Disbursement Refund

010

Candidate Name

Category/Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2015

Transaction ID : SB28A.4139

Amount of Each Disbursement this Period

2600.00

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/Type

Candidate Name

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

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

5200.00

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

5200.00