

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

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

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

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

5. Covering Period 09 01 2006 through 09 30 2006

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 Charles S. Oakes

Signature of Treasurer Electronically Filed by Charles S. Oakes Date 05 08 2007

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**

Write or Type Committee Name  
Oregon Republican Party

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	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>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		8109.60
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	15321.00									
(c) Total Receipts (from Line 19) .....	39203.45	157672.62								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	54524.45	165782.22								
7. Total Disbursements (from Line 31) .....	27910.63	139168.40								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	26613.82	26613.82								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	91275.86									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
Oregon Republican Party

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

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	30190.67	57274.22
(i) Itemized (use Schedule A) .....	9012.78	65499.28
(ii) Unitemized .....	39203.45	122773.50
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	2000.00
(b) Political Party Committees .....	0.00	5300.00
(c) Other Political Committees (such as PACs) .....	39203.45	130073.50
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
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	27599.12
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	27599.12
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	39203.45	157672.62
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	39203.45	130073.50

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	4375.99	8209.84
(ii) Non-Federal Share.....	7779.54	14595.29
(b) Other Federal Operating Expenditures.....	4229.98	41027.72
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	16385.51	63832.85
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
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	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	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 .....	11525.12	75335.55
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	11525.12	75335.55
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	27910.63	139168.40
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	20131.09	124573.11

**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 .....	39203.45	130073.50
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	39203.45	130073.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	8605.97	49237.56
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	8605.97	49237.56

**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 6 / 25
	<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)  
James E. Anderson

Mailing Address 1526 SW Meteor Pl.

City State Zip Code  
Troutdale OR 97060

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

Name of Employer Information Requested Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 05 / 2006

Transaction ID: 60920.C87632

Amount of Each Receipt this Period  
35.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
John Breeden

Mailing Address 4072 Normandy Wy

City State Zip Code  
Eugene OR 97405

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

Name of Employer Information Requested 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  
09 / 30 / 2006

Transaction ID: 61010.C87860

Amount of Each Receipt this Period  
200.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Norman Brenden

Mailing Address 12344 Paradise Alley Rd NE

City State Zip Code  
Silverton OR 97381-9369

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 ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 14 / 2006

Transaction ID: 61010.C87775

Amount of Each Receipt this Period  
5000.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5235.00
<b>TOTAL</b> 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 7 / 25
	<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)  
William Colson

Mailing Address PO Box 14111

City Salem State OR Zip Code 97309

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

Name of Employer Self Occupation Investor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
09 / 14 / 2006

Transaction ID: 61010.C87776

Amount of Each Receipt this Period  
5000.00

Receipt

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

Mailing Address 19239 Greenlakes Lp

City Bend State OR Zip Code 97702

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

Name of Employer Information Requested Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
09 / 25 / 2006

Transaction ID: 61010.C87852

Amount of Each Receipt this Period  
250.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Kathryn Daniels

Mailing Address PO Box 6520

City Brookings State OR Zip Code 97415-0282

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 ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
09 / 13 / 2006

Transaction ID: 61010.C87771

Amount of Each Receipt this Period  
250.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5500.00
<b>TOTAL</b> 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 8 / 25
	<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)  
Wallace G. Iverson

Mailing Address 717 Murphy Rd

City State Zip Code  
Medford OR 97504-8425

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 ▼ 10110.61

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 08 / 2006

Transaction ID: 60920.C87661

Amount of Each Receipt this Period  
10110.61

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Wallace G. Iverson

Mailing Address 717 Murphy Rd

City State Zip Code  
Medford OR 97504-8425

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  
M M / D D / Y Y Y Y Y  
09 / 08 / 2006

Transaction ID: 102320060C88829

Amount of Each Receipt this Period  
-110.61

Reattribution Memo

**[MEMO ITEM]**  
REALLOCATE TO NON-FEDERAL ACCT

**C.** Full Name (Last, First, Middle Initial)  
Kenneth & Jennette Knott

Mailing Address 59926 Comstock Rd.

City State Zip Code  
Cove OR 97824

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

Name of Employer Self Occupation  
Rancher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 22 / 2006

Transaction ID: 61010.C87757

Amount of Each Receipt this Period  
500.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	10610.61
<b>TOTAL</b> 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 / 25
	<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)  
Jerry Lausmann

Mailing Address P.O. Box 1608

City State Zip Code  
Medford OR 97501-0246

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

Name of Employer Occupation  
Kogap Lumber Land & timber management

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 05 / 2006

Transaction ID: 60920.C87640

Amount of Each Receipt this Period  
200.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Robert McNitt

Mailing Address 40823 Huntley Road

City State Zip Code  
Stayton OR 97383

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

Name of Employer Occupation  
Information Requested Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 18 / 2006

Transaction ID: 61010.C87813

Amount of Each Receipt this Period  
300.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Lawrence Smith

Mailing Address 7778 SW Green Valley Ter

City State Zip Code  
Portland OR 97225-1568

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

Name of Employer Occupation  
Information Requested Information Requested

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 13 / 2006

Transaction ID: 61010.C87772

Amount of Each Receipt this Period  
100.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	600.00
<b>TOTAL</b> 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 / 25
	<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)  
Lawrence Smith

Mailing Address 7778 SW Green Valley Ter

City State Zip Code  
Portland OR 97225-1568

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  
09 / 14 / 2006

Transaction ID: 61010.C87779

Amount of Each Receipt this Period  
100.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Stephen Snipes

Mailing Address 410 Siletz View Lane

City State Zip Code  
Gleneden Beach OR 97388

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  
09 / 06 / 2006

Transaction ID: 60920.C87648

Amount of Each Receipt this Period  
100.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Peter Stott

Mailing Address 2896 SW Patton Road

City State Zip Code  
Portland OR 97204-3701

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 ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
09 / 21 / 2006

Transaction ID: 61010.C87906

Amount of Each Receipt this Period  
5000.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5200.00
<b>TOTAL</b> 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 11 / 25
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

**A.** Full Name (Last, First, Middle Initial)  
Lynda Truitt

Mailing Address 3595 Cherokee Dr S

City State Zip Code  
Salem OR 97302-9712

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 ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2006

Transaction ID: 61010.C87839

Amount of Each Receipt this Period  
250.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Jay Woodworth

Mailing Address 2090 Ridge Pointe Dr

City State Zip Code  
Lake Oswego OR 97034-7572

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 ▼ 3637.61

Date of Receipt  
MM / DD / YYYY  
09 / 01 / 2006

Transaction ID: 60920.C87625

Amount of Each Receipt this Period  
2795.06

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3045.06
<b>TOTAL</b> This Period (last page this line number only) .....	▶	30190.67

# 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 12 / 25

<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) <b>A. Direct Mail Systems, Inc</b>		<b>Transaction ID:</b> 61019.E12206 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 6
Mailing Address 12450 Automobile Boulevard		Amount of Each Disbursement this Period 1000.00
City Clearwater State FL Zip Code 34622-	Category/ Type  PARTY BUILDING DIRECT MAIL	
Purpose of Disbursement PARTY BUILDING 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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Direct Mail Systems, Inc</b>		<b>Transaction ID:</b> 61019.E12207 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address 12450 Automobile Boulevard		Amount of Each Disbursement this Period 831.45
City Clearwater State FL Zip Code 34622-	Category/ Type  PARTY BUILDING DIRECT MAIL	
Purpose of Disbursement PARTY BUILDING 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) ▼	

Full Name (Last, First, Middle Initial) <b>C. FLS Connect</b>		<b>Transaction ID:</b> 61019.E12215 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6
Mailing Address 7320 N Dreamy Draw Dr		Amount of Each Disbursement this Period 397.50
City Phoenix State AZ Zip Code 85020-5212	Category/ Type  PARTY BUILDING TELEMARKET- ING	
Purpose of Disbursement PARTY BUILDING 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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2228.95
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

Full Name (Last, First, Middle Initial) <b>A. FLS Connect</b>		<b>Transaction ID:</b> 61019.E12217 <b>Date of Disbursement</b> MM / DD / YYYY 09 / 25 / 2006
Mailing Address 7320 N Dreamy Draw Dr		Amount of Each Disbursement this Period 207.50
City Phoenix State AZ Zip Code 85020-5212	Purpose of Disbursement PARTY BUILDING 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) ▼	PARTY BUILDING TELEMARKETING

Full Name (Last, First, Middle Initial) <b>B. FLS Connect</b>		<b>Transaction ID:</b> 61019.E12216 <b>Date of Disbursement</b> MM / DD / YYYY 09 / 25 / 2006
Mailing Address 7320 N Dreamy Draw Dr		Amount of Each Disbursement this Period 290.00
City Phoenix State AZ Zip Code 85020-5212	Purpose of Disbursement PARTY BUILDING 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) ▼	PARTY BUILDING TELEMARKETING

Full Name (Last, First, Middle Initial) <b>C. Key Bank**</b>		<b>Transaction ID:</b> 61019.E12202 <b>Date of Disbursement</b> MM / DD / YYYY 09 / 05 / 2006
Mailing Address 1500 Edgewater St NW		Amount of Each Disbursement this Period 216.53
City Salem State OR Zip Code 97304-	Purpose of Disbursement AUTHNET CTS DISCOVER 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) ▼	AUTHNET CTS DISCOVER

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	714.03
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

Full Name (Last, First, Middle Initial) <b>A. Key Bank**</b>		<b>Transaction ID:</b> 61019.E12226 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 2 / 2 0 0 6
Mailing Address 1500 Edgewater St NW		Amount of Each Disbursement this Period 500.00
City Salem State OR Zip Code 97304-	Category/ Type  MERCHANT CHARGES	
Purpose of Disbursement MERCHANT CHARGES		
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>B. Key Bank**</b>		<b>Transaction ID:</b> 61019.E12212 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address 1500 Edgewater St NW		Amount of Each Disbursement this Period 114.00
City Salem State OR Zip Code 97304-	Category/ Type  1120POL INCOME TAXES	
Purpose of Disbursement 1120POL INCOME 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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Multnomah County Central Comm#336</b>		<b>Transaction ID:</b> 61019.E12221 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 6
Mailing Address 3423 SE Henry Street		Amount of Each Disbursement this Period 303.00
City Portland State OR Zip Code 97202-	Category/ Type  LDD CREDIT CARDS	
Purpose of Disbursement LDD CREDIT CARDS		
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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	917.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

Full Name (Last, First, Middle Initial) <b>A. Postmaster</b>		<b>Transaction ID:</b> 61019.E12204 Date of Disbursement 09 / 07 / 2006
Mailing Address 410 Mill St SE		Amount of Each Disbursement this Period 160.00
City Salem      State OR      Zip Code 97301-	BRE ACCOUNT	
Purpose of Disbursement BRE ACCOUNT		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Verizon Directories Corporation</b>		<b>Transaction ID:</b> 61019.E12214 Date of Disbursement 09 / 17 / 2006
Mailing Address PO Box 612727		Amount of Each Disbursement this Period 210.00
City San Antonio      State TX      Zip Code 78261-2727	YELLOW PAGES/PARTY AD-NON-CANDIDATE	
Purpose of Disbursement YELLOW PAGES/PARTY AD-NONCANDIDATE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>370.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>4229.98</b>

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

Full Name (Last, First, Middle Initial) <b>A. Key Bank**</b>		Transaction ID: 61019.E12203 Date of Disbursement MM / DD / YYYY 09 / 15 / 2006	
Mailing Address 1500 Edgewater St NW		Amount of Each Disbursement this Period 1284.44	
City Salem State OR Zip Code 97304-	Purpose of Disbursement FEA PAYROLL TAXES	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 TAXES	

Full Name (Last, First, Middle Initial) <b>B. Amy Langdon</b>		Transaction ID: 61019.E12190 Date of Disbursement MM / DD / YYYY 09 / 01 / 2006	
Mailing Address 2830 Foxhaven Dr S		Amount of Each Disbursement this Period 2291.96	
City Salem State OR Zip Code 97306-	Purpose of Disbursement FEA PAYROLL	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) <b>C. Amy Langdon</b>		Transaction ID: 61019.E12191 Date of Disbursement MM / DD / YYYY 09 / 15 / 2006	
Mailing Address 2830 Foxhaven Dr S		Amount of Each Disbursement this Period 2291.95	
City Salem State OR Zip Code 97306-	Purpose of Disbursement FEA PAYROLL	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	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5868.35
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

Full Name (Last, First, Middle Initial) <b>A. LifeWise</b>		Transaction ID: 61019.E12205 Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2006
Mailing Address 815 SW Bond St		Amount of Each Disbursement this Period 297.20
City Bend State OR Zip Code 97702-	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) ▼	HEALTH INSURANCE

Full Name (Last, First, Middle Initial) <b>B. Oregon Department of Revenue</b>		Transaction ID: 61019.E12208 Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2006
Mailing Address PO Box 14800		Amount of Each Disbursement this Period 286.00
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) <b>C. Kelsey Schmidt</b>		Transaction ID: 61019.E12192 Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2006
Mailing Address 1794 SW Fellows St Apt 8		Amount of Each Disbursement this Period 664.66
City McMinnville State OR Zip Code 97128-7318	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

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1247.86
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A. Kelsey Schmidt</b> Full Name (Last, First, Middle Initial) Mailing Address 1794 SW Fellows St Apt 8 City McMinnville State OR Zip Code 97128-7318 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) ▼		<b>Transaction ID: 61019.E12201</b> Date of Disbursement 09 / 15 / 2006 Amount of Each Disbursement this Period 109.62 Category/Type FEA PAYROLL
---	--	--

<b>B. Belinda Smith</b> Full Name (Last, First, Middle Initial) Mailing Address 687 SW Concord Way City Beaverton State OR Zip Code 97006- 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) ▼		<b>Transaction ID: 61019.E12193</b> Date of Disbursement 09 / 01 / 2006 Amount of Each Disbursement this Period 516.61 Category/Type FEA PAYROLL
--	--	--

<b>C. Belinda Smith</b> Full Name (Last, First, Middle Initial) Mailing Address 687 SW Concord Way City Beaverton State OR Zip Code 97006- 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) ▼		<b>Transaction ID: 61019.E12194</b> Date of Disbursement 09 / 15 / 2006 Amount of Each Disbursement this Period 516.62 Category/Type FEA PAYROLL
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1142.85
<b>TOTAL</b> 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 19 / 25

<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) <b>A. Cindy Taylor</b>		Transaction ID: 61019.E12197 Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2006	
Mailing Address 595 Rockwood St SE		Amount of Each Disbursement this Period 947.52	
City Salem State OR Zip Code 97306-1756	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) ▼		

Full Name (Last, First, Middle Initial) <b>B. Cindy Taylor</b>		Transaction ID: 61019.E12198 Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 595 Rockwood St SE		Amount of Each Disbursement this Period 947.51	
City Salem State OR Zip Code 97306-1756	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) ▼		

Full Name (Last, First, Middle Initial) <b>C. David Taylor</b>		Transaction ID: 61019.E12195 Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2006	
Mailing Address 595 Rockwood St SE		Amount of Each Disbursement this Period 751.87	
City Salem State OR Zip Code 97306-1756	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) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2646.90
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 25

<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) <b>A. David Taylor</b>		Transaction ID: 61019.E12196 Date of Disbursement 09 / 15 / 2006	
Mailing Address 595 Rockwood St SE		Amount of Each Disbursement this Period 619.16	
City Salem State OR Zip Code 97306-1756	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	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>619.16</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>11525.12</b>

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor 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 21811.30	<b>Transaction ID:</b> 2LSE11265	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 21811.30

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

Outstanding Balance Beginning This Period 564.49	<b>Transaction ID:</b> 4LSE7774	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 564.49

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Lightwave 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 348.88	<b>Transaction ID:</b> 6LSE11694	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 348.88

<b>1) SUBTOTALS</b> This Period This Page (optional).....	▶	22724.67
<b>2) TOTALS</b> This Period (last page this line number only).....	▶	
<b>3) TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A.</b> 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 <input type="text" value="896.99"/>	<b>Transaction ID: 3LSE10304</b>	
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="896.99"/>

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

Outstanding Balance Beginning This Period <input type="text" value="473.30"/>	<b>Transaction ID: 1LSE11559</b>	
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="473.30"/>

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor AT&T Wireless	Nature of Debt (Purpose): Cell phone bills
Mailing Address PO Box 79075	
City State ZIP Code Phoenix AZ 85062-	

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

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="68551.19"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text" value="91275.86"/>
<b>3) TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text" value=""/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text" value=""/>

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

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A. Full Name (Last, First, Middle Initial)</b> 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 17310.77		
City Louisville	State KY	Zip Code 40285-5460	Date <input type="text" value="09"/> / <input type="text" value="12"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Postage machine rental			Transaction ID: H461019.E12199		
Activity or Event Identifier: ADMINISTRATION B 21					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
36.06		64.11		100.17

<b>B. Full Name (Last, First, Middle Initial)</b> 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 10934.40		
City Louisville	State KY	Zip Code 40285-5460	Date <input type="text" value="09"/> / <input type="text" value="06"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Postage machine lease			Transaction ID: H461019.E12200		
Activity or Event Identifier: ADMINISTRATION B 21					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
102.53		182.27		284.80

<b>C. Full Name (Last, First, Middle Initial)</b> 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 17010.60		
City Salem	State OR	Zip Code 97308-0269	Date <input type="text" value="09"/> / <input type="text" value="08"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Office rent			Transaction ID: H461019.E12209		
Activity or Event Identifier: ADMINISTRATION B 21					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2187.43		3888.77		6076.20

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2326.02		4135.15		6461.17

**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** Clackamas **State** OR **Zip Code** 97015-  
**Purpose of Disbursement:**  
Website consulting  
**Activity or Event Identifier:**  
ADMINISTRATION B 21

**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**  
17210.60  
**Date** 09 / 08 / 2006  
**Transaction ID:** H461019.E12210

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
72.00		128.00		200.00

**B. Full Name (Last, First, Middle Initial)**  
Aristotle  
**Mailing Address**  
205 Pennsylvania Ave SE  
**City** Washington **State** DC **Zip Code** 20003-  
**Purpose of Disbursement:**  
Software & support  
**Activity or Event Identifier:**  
ADMINISTRATION B 21

**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**  
19260.77  
**Date** 09 / 15 / 2006  
**Transaction ID:** H461019.E12211

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
702.00		1248.00		1950.00

**C. Full Name (Last, First, Middle Initial)**  
Eschelon Teleco (Advanced Telecom)  
**Mailing Address**  
PO Box 34988  
**City** Seattle **State** WA **Zip Code** 98124-1988  
**Purpose of Disbursement:**  
Telephone  
**Activity or Event Identifier:**  
ADMINISTRATION B 21

**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**  
19914.13  
**Date** 09 / 15 / 2006  
**Transaction ID:** H461019.E12213

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
235.21		418.15		653.36

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1009.21		1794.15		2803.36

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A. Full Name (Last, First, Middle Initial)</b> Ricoh Customer Finance Corp.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 310010273			Allocated Activity or Event Year-To-Date 22732.13		
City Pasadena	State CA	Zip Code 91110-0001	Date 09 / 27 / 2006		
Purpose of Disbursement: Copier lease			Category/ Type		
Activity or Event Identifier: ADMINISTRATION B 21			Transaction ID: H461019.E12218		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
114.48		203.52		318.00

<b>B. Full Name (Last, First, Middle Initial)</b> Key Bank**			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 1500 Edgewater St NW			Allocated Activity or Event Year-To-Date 22805.13		
City Salem	State OR	Zip Code 97304-	Date 09 / 30 / 2006		
Purpose of Disbursement: Bank fees			Category/ Type		
Activity or Event Identifier: ADMINISTRATION B 21			Transaction ID: H461019.E12220		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
26.28		46.72		73.00

<b>C. Full Name (Last, First, Middle Initial)</b> Command Consulting			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 678			Allocated Activity or Event Year-To-Date 22414.13		
City Salem	State OR	Zip Code 97302-	Date 09 / 22 / 2006		
Purpose of Disbursement: Consulting			Category/ Type		
Activity or Event Identifier: ADMINISTRATION B 21			Transaction ID: H461019.E12227		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
900.00		1600.00		2500.00

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1040.76		1850.24		2891.00

**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
4375.99		7779.54		12155.53