

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Oregon Republican Party

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 6 |

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

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 4 |

 To:

| | |
|---|---|
| M | M |
| 0 | 6 |

| | |
|---|---|
| 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 | 223941.33 | | | | | | | | | |
| (c) Total Receipts (from Line 19) | 54300.20 | 653764.20 | | | | | | | | |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 278241.53 | 665095.77 | | | | | | | | |
| 7. Total Disbursements (from Line 31) | 118084.33 | 504938.57 | | | | | | | | |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 160157.20 | 160157.20 | | | | | | | | |
| 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) | 91858.14 | | | | | | | | | |

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 | 6 |

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

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 4 |

 To:

| | |
|---|---|
| M | M |
| 0 | 6 |

| | |
|---|---|
| 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 | 25331.12 | 489079.72 |
| (i) Itemized (use Schedule A) | 28969.08 | 149134.48 |
| (ii) Unitemized | 54300.20 | 638214.20 |
| (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) | 54300.20 | 648064.20 |
| (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 | 1000.00 |
| 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 | 4700.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfer (add 18(a) and 18(b)). | 0.00 | 4700.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) | 54300.20 | 653764.20 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 54300.20 | 649064.20 |

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..... | 7561.52 | 52696.40 |
| (ii) Non-Federal Share..... | 13442.67 | 93682.47 |
| (b) Other Federal Operating Expenditures..... | 19111.88 | 99607.31 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶ | 40116.07 | 245986.18 |
| 22. Transfers to Affiliated/Other Party Committees..... | 39000.00 | 71980.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 0.00 | 433.75 |
| 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 | 4445.00 |
| 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 | 38968.26 | 181993.64 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).... | 38968.26 | 181993.64 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. | 118084.33 | 504938.57 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)..... | 104641.66 | 411256.10 |

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) | 54300.20 | 648064.20 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 100.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 54300.20 | 647964.20 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 26673.40 | 152303.71 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 26673.40 | 152303.71 |

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> | 21000.00 | 26000.00 |
| b. Unitemized..... | 0.00 | 255.93 |
| c. Total..... | 21000.00 | 26255.93 |
| 2. OTHER RECEIPTS..... | 1300.00 | 81150.00 |
| 3. TOTAL RECEIPTS..... <small>(Add Lines 1c and 2)</small> | 22300.00 | 107405.93 |
| 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 | 209.48 |
| 6. TOTAL DISBURSEMENTS..... <small>(Add Lines 4e and 5)</small> | 0.00 | 209.48 |
| 7. BEGINNING CASH ON HAND..... <small>(for Column B, use cash as of January 1st)</small> | 84896.45 | 0.00 |
| 8. RECEIPTS..... <small>(from Line 3)</small> | 22300.00 | 107405.93 |
| 9. SUBTOTAL..... <small>(Add Lines 7 and 8)</small> | 107196.45 | 107405.93 |
| 10. DISBURSEMENTS..... <small>(From Line 6)</small> | 0.00 | 209.48 |
| 11. ENDING CASH ON HAND..... <small>(Subtract Line 10 From Line 9)</small> | | 107196.45 |

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

Use separate schedule(s) for each category of the Aggregation Page
 PAGE 7 / 64
 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. Janet Geary

Mailing Address 1211 SW 5th Ave., Suite 2980

City Portland State OR Zip Code 97204-

Name of Employer or Principal Place of Business Retired

Occupation Retired

Full Name (Last, First, Middle Initial)

B. Richard Geary

Mailing Address 1211 SW 5th Ave., Suite 2980

City Portland State OR Zip Code 97204-

Name of Employer or Principal Place of Business Retired

Occupation Retired

Full Name (Last, First, Middle Initial)

C. Donald Johnson

Mailing Address P.O. Box 66

City Riddle State OR Zip Code 97469-

Name of Employer or Principal Place of Business D.R. Johnson Lumber Co.

Occupation Owner

Transaction ID: SL71029.C93327

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 1 0 / 2 0 0 4

Amount of Each Receipt this Period
 10000.00

Aggregate Year-to-Date
 10000.00

Account: 8

Transaction ID: SL71029.C93321

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 1 0 / 2 0 0 4

Amount of Each Receipt this Period
 10000.00

Aggregate Year-to-Date
 10000.00

Account: 8

Transaction ID: SLC74219

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 2 9 / 2 0 0 4

Amount of Each Receipt this Period
 1000.00

Aggregate Year-to-Date
 1000.00

Account: 8

SUBTOTAL of Receipts This Page (optional) 21000.00
TOTAL This Period (last page this line number only) 21000.00

**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. Sid Linken for Mayor Committee

Mailing Address PO Box 847

City Springfield State OR Zip Code 97477-

Name of Employer or Principal Place of Business

Occupation

Transaction ID:SLC74160

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 8 / 2 0 0 4

Amount of Each Receipt this Period

300.00

Aggregate Year-to-Date

300.00

Account: 8

Full Name (Last, First, Middle Initial)

B. Wildish Sand & Gravel Co.

Mailing Address PO Box 7428

City Eugene State OR Zip Code 97401-

Name of Employer or Principal Place of Business

Occupation

Transaction ID:SL71025.C93284

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 4 / 2 0 0 4

Amount of Each Receipt this Period

1000.00

Aggregate Year-to-Date

1000.00

Account: 8

SUBTOTAL of Receipts This Page (optional)

1300.00

TOTAL This Period (last page this line number only)

1300.00

**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 / 64 |
| | <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)
Richard Adams

Mailing Address 27019 SW Ladd Hill Rd

City State Zip Code
Sherwood OR 97140

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
06 / 30 / 2004

Transaction ID: C74292

Amount of Each Receipt this Period
100.00

Receipt

B. Full Name (Last, First, Middle Initial)
June Anonymous

Mailing Address 2720 Commercial Street

City State Zip Code
Salem OR 97302

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 ▼ 16.12

Date of Receipt
MM / DD / YYYY
06 / 22 / 2004

Transaction ID: 71023.C93239

Amount of Each Receipt this Period
16.12

Receipt

C. Full Name (Last, First, Middle Initial)
Hawkin Au

Mailing Address PO Box 2775

City State Zip Code
Tualatin OR 97062-2775

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

Name of Employer Information Requested Occupation Information Requested
R.A. Gray & Company General Contractor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
MM / DD / YYYY
06 / 08 / 2004

Transaction ID: C73713

Amount of Each Receipt this Period
100.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 216.12

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 / 64 |
| | <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)
Dorothy Barger

Mailing Address 9335 Mill Creek Rd

City Tillamook State OR Zip Code 97141-9553

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 ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 08 / 2004

Transaction ID: C73718

Amount of Each Receipt this Period
150.00

Receipt

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

Mailing Address 6825 S.W. Raleighwood Ln.

City Portland State OR Zip Code 97225-1924

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 21 / 2004

Transaction ID: C74013

Amount of Each Receipt this Period
115.00

Receipt

C. Full Name (Last, First, Middle Initial)
Phyllis Gwen Burns

Mailing Address 6350 SW Richey Ln

City Portland State OR Zip Code 97223-7293

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

Name of Employer Burns Bros., Inc. Occupation Business Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 28 / 2004

Transaction ID: C74207

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **515.00**

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 / 64 |
| | <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)
Charles Carlson

Mailing Address 1311 Victorian Way

City Eugene State OR Zip Code 97401-7020

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 ▼ 400.00

Date of Receipt
06 / 08 / 2004

Transaction ID: C73725

Amount of Each Receipt this Period
100.00

Receipt

B. Full Name (Last, First, Middle Initial)
Philip Cash

Mailing Address 247 Pine Lake Dr

City Eagle Point State OR Zip Code 97524

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
06 / 08 / 2004

Transaction ID: C73728

Amount of Each Receipt this Period
100.00

Receipt

C. Full Name (Last, First, Middle Initial)
Ruby Chapman

Mailing Address 98009 Condon Creek Road

City Florence State OR Zip Code 97439

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
06 / 28 / 2004

Transaction ID: C74156

Amount of Each Receipt this Period
300.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ 500.00

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 / 64 |
| | <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)
Leroy Cheney

Mailing Address 1915 Westlake Lp

City State Zip Code
Newberg OR 97132

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 ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 10 / 2004

Transaction ID: C73773

Amount of Each Receipt this Period
200.00

Receipt

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

Mailing Address 19239 Green Lakes Loop

City State Zip Code
Bend OR 97702-1171

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
06 / 03 / 2004

Transaction ID: C73135

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address PO Box 2848

City State Zip Code
Seaside OR 97138-2848

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
06 / 09 / 2004

Transaction ID: C73600

Amount of Each Receipt this Period
250.00

Receipt

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional) | 700.00 |
| 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 / 64 |
| | <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)
Cecil Drinkward

Mailing Address 01920 SW Greenwood Rd.

City Portland State OR Zip Code 97219

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

Name of Employer Hoffman Corporation Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 4

Transaction ID: C74259

Amount of Each Receipt this Period
5000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Phyllis Feldkamp

Mailing Address 151 Rachel Lynn Wy

City Roseburg State OR Zip Code 97470-9254

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 ▼
850.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 5 / 2 0 0 4

Transaction ID: C74058

Amount of Each Receipt this Period
850.00

Receipt

C. Full Name (Last, First, Middle Initial)
Sue Galpin

Mailing Address 848 St. Andrews Way

City Eagle Point State OR Zip Code 97524

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

Name of Employer Galpin LLC Occupation Developer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 0 8 / 2 0 0 4

Transaction ID: C73662

Amount of Each Receipt this Period
500.00

Receipt

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 6350.00 |
| 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 / 64 |
| | <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. Mary Gerlinger | | Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 4 | |
| Mailing Address 2979 Dogwood Ct S | | Transaction ID: C74027 | |
| City Salem | State OR | Zip Code 97302-4082 | Amount of Each Receipt this Period 500.00 |
| FEC ID number of contributing federal political committee. C | | Receipt | |
| Name of Employer Salem School District | Occupation Speech Pathologist/teacher | | |
| 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) B. Aurelia Hunt | | Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 4 | |
| Mailing Address 22261 SW Stafford Rd. | | Transaction ID: C73943 | |
| City Tualatin | State OR | Zip Code 97062 | Amount of Each Receipt this Period 250.00 |
| FEC ID number of contributing federal political committee. C | | Receipt | |
| Name of Employer Brod & McClung - PACE Co. | Occupation President | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 550.00 | | |

| | | | |
|---|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) C. Eliot Jenkins | | Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 4 | |
| Mailing Address 13169 SE River Rd Apt 307T | | Transaction ID: C74024 | |
| City Portland | State OR | Zip Code 97222-9789 | Amount of Each Receipt this Period 500.00 |
| FEC ID number of contributing federal political committee. C | | Receipt | |
| Name of Employer Retired | Occupation Retired | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 500.00 | | |

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

**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 / 64 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 | |
| | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
James King

Mailing Address 2017 Riverknoll Ct

City State Zip Code
West Linn OR 97068-3637

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

Name of Employer Self Occupation Contractor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 21 / 2004

Transaction ID: C73948

Amount of Each Receipt this Period
100.00

Receipt

B. Full Name (Last, First, Middle Initial)
Kenneth 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 ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 21 / 2004

Transaction ID: C73954

Amount of Each Receipt this Period
500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Suzie Kriz

Mailing Address 3370 Lakeside Dr

City State Zip Code
Eugene OR 97401-1593

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 01 / 2004

Transaction ID: C73440

Amount of Each Receipt this Period
100.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **700.00**

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 / 64 |
| | <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)
Suzie Kriz

Mailing Address 3370 Lakeside Dr

City Eugene State OR Zip Code 97401-1593

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

Name of Employer Homemaker Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 2 5 / 2 0 0 4

Transaction ID: C74060

Amount of Each Receipt this Period
 850.00

Receipt

B. Full Name (Last, First, Middle Initial)
Lawrence Lahm

Mailing Address 3855 NW Van Buren Ave

City Corvallis State OR Zip Code 97330-4920

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 ▼ 1050.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 1 0 / 2 0 0 4

Transaction ID: C73792

Amount of Each Receipt this Period
 300.00

Receipt

C. Full Name (Last, First, Middle Initial)
William Lovelace

Mailing Address 802 NE Oregon Street

City Grants Pass State OR Zip Code 97526

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 0 8 / 2 0 0 4

Transaction ID: C73736

Amount of Each Receipt this Period
 100.00

Receipt

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 17 / 64 |
| | <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) Rex Millard | | Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 4 | |
| Mailing Address 6601 Oakridge Rd | | Transaction ID: C73621 | |
| City Gladstone | State OR | Amount of Each Receipt this Period 200.00 | |
| Zip Code 97027 | | Receipt | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Self | Occupation Investigator | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 200.00 | | |

| | | | |
|---|-------------------------------------|---|--|
| B. Full Name (Last, First, Middle Initial) Robert G. Miller | | Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 4 | |
| Mailing Address 1881 SW Naito Pkwy Ste 250 | | Transaction ID: C73497 | |
| City Portland | State OR | Amount of Each Receipt this Period 5000.00 | |
| Zip Code 97201-5193 | | Receipt | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Rite- Aid | Occupation CEO | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 5000.00 | | |

| | | | |
|---|------------------------------------|---|--|
| C. Full Name (Last, First, Middle Initial) Phyllis Moore | | Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 4 | |
| Mailing Address 130 White Oak Dr | | Transaction ID: C73738 | |
| City Medford | State OR | Amount of Each Receipt this Period 200.00 | |
| Zip Code 97504 | | Receipt | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Homemaker | Occupation Homemaker | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 400.00 | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) | 5400.00 |
| 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 18 / 64 |
| | <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)
Thomas ORourke

Mailing Address 742 Fairway Ct

City Ashland State OR Zip Code 97520-1435

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
06 / 14 / 2004

Transaction ID: C73870

Amount of Each Receipt this Period
100.00

Receipt

B. Full Name (Last, First, Middle Initial)
Elizabeth Orem

Mailing Address 3150 SW View Place

City Portland State OR Zip Code 97201-1862

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
06 / 09 / 2004

Transaction ID: C73590

Amount of Each Receipt this Period
100.00

Receipt

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

Mailing Address 4075 E 15th Ave

City Eugene State OR Zip Code 97403-2735

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

Name of Employer Rainbarrel Industries Occupation Wildland Firefighting Co/CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
06 / 22 / 2004

Transaction ID: C73808

Amount of Each Receipt this Period
150.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ 350.00

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 19 / 64 |
| | <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. William Pierce | | Date of Receipt M M / D D / Y Y Y Y 06 / 15 / 2004 | |
| Mailing Address 961 Glen Eden Ct NW | | Transaction ID: C73883 | |
| City State Zip Code Salem OR 97304 | Amount of Each Receipt this Period 1000.00 | | |
| FEC ID number of contributing federal political committee. C | | Receipt | |
| Name of Employer Occupation Self Employed Physician | Aggregate Year-to-Date ▼ 2000.00 | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|--|--|--|
| Full Name (Last, First, Middle Initial) B. Gary Pierpoint | | Date of Receipt M M / D D / Y Y Y Y 06 / 25 / 2004 | |
| Mailing Address PO Box 12027 | | Transaction ID: C74061 | |
| City State Zip Code Eugene OR 97440 | Amount of Each Receipt this Period 850.00 | | |
| FEC ID number of contributing federal political committee. C | | Receipt | |
| Name of Employer Occupation Umpqua Bank Banker | Aggregate Year-to-Date ▼ 890.00 | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|--|--|--|
| Full Name (Last, First, Middle Initial) C. Sally Plumley | | Date of Receipt M M / D D / Y Y Y Y 06 / 10 / 2004 | |
| Mailing Address 8530 Helmick Rd | | Transaction ID: C73766 | |
| City State Zip Code Monmouth OR 97361-9559 | Amount of Each Receipt this Period 100.00 | | |
| FEC ID number of contributing federal political committee. C | | Receipt | |
| Name of Employer Occupation Retired Retired | Aggregate Year-to-Date ▼ 200.00 | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 1950.00 |
| 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 20 / 64 |
| | <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. Harold Reed | | Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 5 / 2 0 0 4 |
| Mailing Address 85139 Appletree Dr | | Transaction ID: C74055 |
| City Eugene | State OR | Zip Code 97405-9702 |
| Amount of Each Receipt this Period 850.00 | | Receipt |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Retired | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 900.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Lloyd Rhinhart | | Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 0 4 |
| Mailing Address PO Box 658 | | Transaction ID: C74087 |
| City Pilot Rock | State OR | Zip Code 97868 |
| Amount of Each Receipt this Period 100.00 | | Receipt |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Self | Occupation Rancher | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 300.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Barbara Rose | | Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 4 |
| Mailing Address 24555 NW Oak Dr | | Transaction ID: C73873 |
| City Hillsboro | State OR | Zip Code 97124 |
| Amount of Each Receipt this Period 100.00 | | Receipt |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Hillsboro Union School Dist. | Occupation Substitute Teacher | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 200.00 | |

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 1050.00 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

**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 21 / 64 |
| | <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. Richard Rudisile | | Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 4 |
| Mailing Address 3531 Ross Lane | | Transaction ID: C74149 |
| City State Zip Code Central Point OR 97502-1177 | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C | Receipt | |
| Name of Employer Occupation Boise Cascade Area Manager | Aggregate Year-to-Date ▼ 1000.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Sean M. Smith | | Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 5 / 2 0 0 4 |
| Mailing Address PO Box 547 | | Transaction ID: C74059 |
| City State Zip Code Cottage Grove OR 97424 | Amount of Each Receipt this Period 300.00 | |
| FEC ID number of contributing federal political committee. C | Receipt | |
| Name of Employer Occupation Starfire Lumber Co. Vice-President | Aggregate Year-to-Date ▼ 300.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Loran Stewart | | Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 5 / 2 0 0 4 |
| Mailing Address P.O. Box 10293 | | Transaction ID: C74064 |
| City State Zip Code Eugene OR 97440-2293 | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C | Receipt | |
| Name of Employer Occupation Retired Retired | Aggregate Year-to-Date ▼ 1000.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 2300.00 |
| 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 22 / 64 |
| | <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)
Henry Swigert

Mailing Address 1425 SW 20th Ave Ste 104

City State Zip Code
Portland OR 97201-2485

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 ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 21 / 2004

Transaction ID: C73976

Amount of Each Receipt this Period
2000.00

Receipt

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

Mailing Address 3593 River Pointe Dr

City State Zip Code
Eugene OR 97408-5927

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

Name of Employer Occupation
Self Outdoor Advertising

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 25 / 2004

Transaction ID: C74057

Amount of Each Receipt this Period
150.00

Receipt

C. Full Name (Last, First, Middle Initial)
Kathleen Van Ballegooijen

Mailing Address PO Box 573

City State Zip Code
Florence OR 97439-0020

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 28 / 2004

Transaction ID: C74157

Amount of Each Receipt this Period
300.00

Receipt

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 2450.00 |
| 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 23 / 64 |
| | (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)
Parks Walker

Mailing Address 12705 SE River Road

City State Zip Code
Portland OR 97222

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 ▼ 250.00

Date of Receipt
MM / DD / YYYY
06 / 21 / 2004

Transaction ID: C73950

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 1115 Barrington Cir

City State Zip Code
Ashland OR 97520-9551

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

Name of Employer Self Occupation Real Estate Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
MM / DD / YYYY
06 / 08 / 2004

Transaction ID: C73740

Amount of Each Receipt this Period
100.00

Receipt

| | | |
|--|---|----------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 350.00 |
| TOTAL This Period (last page this line number only) | ▶ | 25331.12 |

**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 24 / 64

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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) Joe Alvernaz | | Transaction ID: E9679 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 4 |
| Mailing Address 3874 Azzlea Avenue | | Amount of Each Disbursement this Period 154.44 |
| City Albany State OR Zip Code 97322- | Purpose of Disbursement TRAVEL REIMB. | |
| 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) ▼ | TRAVEL REIMB. |

| | | |
|--|--|---|
| B. Full Name (Last, First, Middle Initial) Direct Mail Systems, Inc | | Transaction ID: E9671 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 7 / 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 | | 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) ▼ | DIRECT MAIL |

| | | |
|--|--|---|
| C. Full Name (Last, First, Middle Initial) Direct Mail Systems, Inc | | Transaction ID: E9686 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 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 | | 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) ▼ | DIRECT MAIL |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 2154.44 |
| 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 / 64

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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: E9717 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 4 |
| Mailing Address 12450 Automobile Boulevard | | Amount of Each Disbursement this Period 2000.00 |
| City Clearwater State FL Zip Code 34622- | Category/ Type DIRECT MAIL | |
| 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) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Doubletree Inn | | Transaction ID: E9728 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 5 / 2 0 0 4 |
| Mailing Address Janzen Beach | | Amount of Each Disbursement this Period 1000.00 |
| City Portland State OR Zip Code 97201- | Category/ Type AV EQUIPMENT RENTAL | |
| Purpose of Disbursement AV EQUIPMENT RENTAL | | |
| 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: E9688 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 1 / 2 0 0 4 |
| Mailing Address 7320 N Dreamy Draw Dr | | Amount of Each Disbursement this Period 2500.00 |
| 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) ▼ | |

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|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 5500.00 |
| 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 26 / 64

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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: E9727 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 5 / 2 0 0 4 |
| Mailing Address 7320 N Dreamy Draw Dr | | Amount of Each Disbursement this Period 1132.50 |
| City Phoenix State AZ Zip Code 85020-5212 | Amount of Each Disbursement this Period 1132.50 TELEMARKETING | |
| Purpose of Disbursement TELEMARKETING | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) B. Jackson County Central Com. #315 | | Transaction ID: E9639 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 4 |
| Mailing Address 226 Entrada Drive | | Amount of Each Disbursement this Period 500.00 |
| City Eagle Point State OR Zip Code 97524- | Amount of Each Disbursement this Period 500.00 JUNE HQ RENT | |
| Purpose of Disbursement JUNE HQ RENT | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Key Bank** | | Transaction ID: E9956 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 4 |
| Mailing Address 1500 Edgewater St NW | | Amount of Each Disbursement this Period 89.73 |
| City Salem State OR Zip Code 97304- | Amount of Each Disbursement this Period 89.73 BANK FEE | |
| Purpose of Disbursement BANK FEE | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 1722.23 |
| 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 27 / 64

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. Key Bank** | | Transaction ID: E9957 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 4 | |
| Mailing Address 1500 Edgewater St NW | | Amount of Each Disbursement this Period 103.00 | |
| City Salem State OR Zip Code 97304- | Purpose of Disbursement BANK FEE Candidate Name Category/Type | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

BANK FEE

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) B. John Koehn | | Transaction ID: E9637 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 4 | |
| Mailing Address 6210 SW Bonita Road Apt D203 | | Amount of Each Disbursement this Period 55.45 | |
| City Lake Oswego State OR Zip Code 97035- | Purpose of Disbursement TRAVEL EXPENSE REIMB. 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) ▼ | | |

TRAVEL EXPENSE REIMB.

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) C. Amy Langdon | | Transaction ID: E9674 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 4 | |
| Mailing Address 2830 Foxhaven Dr S | | Amount of Each Disbursement this Period 276.00 | |
| City Salem State OR Zip Code 97306- | Purpose of Disbursement TRAVEL EXPENSE REIMB. 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) ▼ | | |

TRAVEL EXPENSE REIMB.

SUBTOTAL of Disbursements This Page (optional) ▶

434.45

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 / 64

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. Amy Langdon | | Transaction ID: E9722 Date of Disbursement MM / DD / YYYY 06 / 23 / 2004 | |
| Mailing Address 2830 Foxhaven Dr S | | Amount of Each Disbursement this Period 489.74 | |
| City Salem State OR Zip Code 97306- | Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT | 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) ▼ | TRAVEL EXPENSE REIMBURSEMENT | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) B. LifeWise | | Transaction ID: E9669 Date of Disbursement MM / DD / YYYY 06 / 07 / 2004 | |
| Mailing Address 815 SW Bond St | | Amount of Each Disbursement this Period 1377.00 | |
| City Bend State OR Zip Code 97702- | Purpose of Disbursement HEALTH INSURANCE | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | HEALTH INSURANCE | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) C. Kevin Mannix | | Transaction ID: E9673 Date of Disbursement MM / DD / YYYY 06 / 07 / 2004 | |
| Mailing Address 375 18th St NE | | Amount of Each Disbursement this Period 236.44 | |
| City Salem State OR Zip Code 97301-4307 | Purpose of Disbursement TRAVEL EXPENSE REIMB. | 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) ▼ | TRAVEL EXPENSE REIMB. | |

| | |
|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 2103.18 |
| 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. Kevin Mannix | | Transaction ID: E9723 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 4 |
| Mailing Address 375 18th St NE | | Amount of Each Disbursement this Period 562.50 |
| City Salem State OR Zip Code 97301-4307 | Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT 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) ▼ | TRAVEL EXPENSE REIMBURSEMENT |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Oregon Employment Department | | Transaction ID: E9721 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 4 |
| Mailing Address PO Box 14010 | | Amount of Each Disbursement this Period 741.20 |
| City Salem State OR Zip Code 97309- | Purpose of Disbursement UNEMPLOYMENT 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) ▼ | UNEMPLOYMENT PAYROLL TAXES |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Anastasia Pannas | | Transaction ID: E9668 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 4 |
| Mailing Address 5225 Chapman St. S | | Amount of Each Disbursement this Period 82.75 |
| City Salem State OR Zip Code 97306- | Purpose of Disbursement TRAVEL EXPENSE REIMB. 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) ▼ | TRAVEL EXPENSE REIMB. |

| | |
|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 1386.45 |
| 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 / 64

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. Anastasia Pannas | | Transaction ID: E9725 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 4 | |
| Mailing Address 5225 Chapman St. S | | Amount of Each Disbursement this Period 67.58 | |
| City Salem State OR Zip Code 97306- | Purpose of Disbursement TRAVEL EXPENSE REIMB. | | |
| 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) ▼ | | |

TRAVEL EXPENSE REIMB.

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) B. Printistry Printing | | Transaction ID: E9795 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 4 | |
| Mailing Address 744 NE Third | | Amount of Each Disbursement this Period 312.62 | |
| City McMinnville State OR Zip Code 97128- | Purpose of Disbursement PRINTING-BUSINESS CARDS | | |
| 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) ▼ | | |

PRINTING-BUSINESS CARDS

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) C. Reed Harris Mailhouse | | Transaction ID: E9689 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 1 / 2 0 0 4 | |
| Mailing Address 322 NW 14th | | Amount of Each Disbursement this Period 2500.00 | |
| City Portland State OR Zip Code 97210- | Purpose of Disbursement POSTAGE | | |
| 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) ▼ | | |

POSTAGE

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 2880.20 |
| 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 / 64

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. Republican National Committee | | Transaction ID: E9806 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 4 |
| Mailing Address 310 First St SE | | Amount of Each Disbursement this Period 200.00 |
| City Washington State DC Zip Code 20003- | WORKSHOP REGISTRATION FEES | |
| Purpose of Disbursement WORKSHOP REGISTRATION FEES | | 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. Republican National Committee | | Transaction ID: E9712 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 4 |
| Mailing Address 310 First St SE | | Amount of Each Disbursement this Period 100.00 |
| City Washington State DC Zip Code 20003- | WORKSHOP REGISTRATION FEES | |
| Purpose of Disbursement WORKSHOP REGISTRATION FEES | | 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) C. Solomon Yue | | Transaction ID: E9724 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 4 |
| Mailing Address 265 50th Ave NW | | Amount of Each Disbursement this Period 768.72 |
| City Salem State OR Zip Code 97304-3221 | TRAVEL EXPENSE REIMBURSE- NT | |
| Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT | | 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) ▼ | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 1068.72 |
| TOTAL This Period (last page this line number only) ▶ | 17249.67 |

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)

| | | | | | |
|------------------------------|--|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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: 71030.E13194 Date of Disbursement 06 / 10 / 2004 |
| Mailing Address c/o Key Bank Levin Account 1500 Edgewater St NW | | Amount of Each Disbursement this Period 20000.00 |
| City Salem | State OR | |
| Zip Code 97302- | | Category/ Type |
| Purpose of Disbursement XFER TO LEVIN R. & J. GEARY | | |
| Candidate Name | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: District: | |

| | | |
|---|---------------------|--|
| Full Name (Last, First, Middle Initial) B. Oregon Republican Party | | Transaction ID: E9684 Date of Disbursement 06 / 10 / 2004 |
| Mailing Address Key Bank NonFederal Acct 1500 Edgewater St NW | | Amount of Each Disbursement this Period 19000.00 |
| City Salem | State OR | |
| Zip Code 97302- | | Category/ Type |
| Purpose of Disbursement GEARY FED TO NON-FED RE-ALLOCATION | | |
| Candidate Name | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: District: | |

| | | |
|--|---|----------|
| SUBTOTAL of Disbursements This Page (optional) | ▶ | 39000.00 |
| TOTAL This Period (last page this line number only) | ▶ | 39000.00 |

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 33 / 64

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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. Joe Alvernaz Full Name (Last, First, Middle Initial) Mailing Address 3874 Azzlea Avenue City Albany State OR Zip Code 97322- | | Transaction ID: E9624 Date of Disbursement 06 / 01 / 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 829.43 FEA PAYROLL |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type | | |

| | | |
|--|--|--|
| B. Joe Alvernaz Full Name (Last, First, Middle Initial) Mailing Address 3874 Azzlea Avenue City Albany State OR Zip Code 97322- | | Transaction ID: E9785 Date of Disbursement 06 / 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 1403.01 FEA PAYROLL |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type | | |

| | | |
|--|--|---|
| C. Michelle Ashenfelter Full Name (Last, First, Middle Initial) Mailing Address 2012 NE 15th City Portland State OR Zip Code 97212- | | Transaction ID: E9657 Date of Disbursement 06 / 01 / 2004 |
| Purpose of Disbursement FEA PAYROLL BONUS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | Amount of Each Disbursement this Period 1354.82 FEA PAYROLL BONUS |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type | | |

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|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 3587.26 |
| 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 34 / 64

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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: E9631 Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2004 | |
| Mailing Address 2012 NE 15th | | Amount of Each Disbursement this Period 2108.39 | |
| City Portland | State OR | Zip Code 97212- | Category/ Type |
| Purpose of Disbursement FEA PAYROLL BONUS | | | |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | FEA PAYROLL BONUS | | |

| | | | |
|--|---|--|-------------------|
| Full Name (Last, First, Middle Initial) B. Michelle Ashenfelter | | Transaction ID: E9625 Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2004 | |
| Mailing Address 2012 NE 15th | | Amount of Each Disbursement this Period 1554.88 | |
| City Portland | State OR | Zip Code 97212- | Category/ Type |
| Purpose of Disbursement FEA PAYROLL | | | |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | FEA PAYROLL | | |

| | | | |
|--|---|--|-------------------|
| Full Name (Last, First, Middle Initial) C. Michelle Ashenfelter | | Transaction ID: E9786 Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2004 | |
| Mailing Address 2012 NE 15th | | Amount of Each Disbursement this Period 1554.89 | |
| City Portland | State OR | Zip Code 97212- | Category/ Type |
| Purpose of Disbursement FEA PAYROLL | | | |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | FEA PAYROLL | | |

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|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 5218.16 |
| 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 35 / 64

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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. Creative Imprints | | Transaction ID: E9682 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 4 |
| Mailing Address 1732 Center St. NE | | Amount of Each Disbursement this Period 287.50 |
| City Salem State OR Zip Code 97301- | FEA T-SHIRTS | |
| Purpose of Disbursement FEA T-SHIRTS | | 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. Megan Deras | | Transaction ID: E9626 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 4 |
| Mailing Address 5150 SW Landing Drive Unit 201 | | Amount of Each Disbursement this Period 866.46 |
| City Portland State OR Zip Code 97238- | FEA PAYROLL | |
| Purpose of Disbursement FEA PAYROLL | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Megan Deras | | Transaction ID: E9787 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 4 |
| Mailing Address 5150 SW Landing Drive Unit 201 | | Amount of Each Disbursement this Period 866.47 |
| City Portland State OR Zip Code 97238- | FEA PAYROLL | |
| Purpose of Disbursement FEA PAYROLL | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 2020.43 |
| 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 36 / 64

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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. Stephen Fox Full Name (Last, First, Middle Initial) Mailing Address 25217 Herford Drive City Ramona State CA Zip Code 92065- 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) ▼ | | Transaction ID: E9627 Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2004 Amount of Each Disbursement this Period 866.47 FEA PAYROLL |
|--|--|---|

| | | |
|--|--|---|
| B. Stephen Fox Full Name (Last, First, Middle Initial) Mailing Address 25217 Herford Drive City Ramona State CA Zip Code 92065- 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) ▼ | | Transaction ID: E9788 Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2004 Amount of Each Disbursement this Period 866.46 FEA PAYROLL |
|--|--|---|

| | | |
|--|--|---|
| C. Kelly Fuller Full Name (Last, First, Middle Initial) Mailing Address 1025 15th Street NE City Salem State OR Zip Code 97301- 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) ▼ | | Transaction ID: E9628 Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2004 Amount of Each Disbursement this Period 162.57 FEA PAYROLL |
|--|--|---|

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|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 1895.50 |
| 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 37 / 64

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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. Kelly Fuller Full Name (Last, First, Middle Initial) Mailing Address 1025 15th Street NE City Salem State OR Zip Code 97301- | | Transaction ID: E9789 Date of Disbursement 06 / 15 / 2004 |
| Purpose of Disbursement FEA PAYROLL Candidate Name | | Amount of Each Disbursement this Period 228.29 |
| 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. Ron Herbison Full Name (Last, First, Middle Initial) Mailing Address 26991 Briggs Hill Road City Eugene State OR Zip Code 97405- | | Transaction ID: E9790 Date of Disbursement 06 / 15 / 2004 |
| Purpose of Disbursement FEA PAYROLL Candidate Name | | Amount of Each Disbursement this Period 842.47 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | FEA PAYROLL |

| | | |
|--|--|--|
| C. David Jaques Full Name (Last, First, Middle Initial) Mailing Address 800 Winston Section Road City Winston State OR Zip Code 97496- | | Transaction ID: E9791 Date of Disbursement 06 / 15 / 2004 |
| Purpose of Disbursement FEA PAYROLL Candidate Name | | Amount of Each Disbursement this Period 1233.78 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | FEA PAYROLL |

SUBTOTAL of Disbursements This Page (optional) ▶

2304.54

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 38 / 64

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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: E9632 Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2004 |
| Mailing Address 1500 Edgewater St NW | | Amount of Each Disbursement this Period 3202.62 |
| City Salem State OR Zip Code 97304- | 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. Key Bank** | | Transaction ID: E9661 Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2004 |
| Mailing Address 1500 Edgewater St NW | | Amount of Each Disbursement this Period 1947.70 |
| City Salem State OR Zip Code 97304- | 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. Key Bank** | | Transaction ID: E9670 Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2004 |
| Mailing Address 1500 Edgewater St NW | | Amount of Each Disbursement this Period 2709.72 |
| City Salem State OR Zip Code 97304- | 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 |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 7860.04 |
| 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 39 / 64

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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: E9796 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 4 |
| Mailing Address 1500 Edgewater St NW | | Amount of Each Disbursement this Period 2921.64 |
| City Salem State OR Zip Code 97304- | FEA PAYROLL TAXES | |
| Purpose of Disbursement FEA PAYROLL TAXES | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Key Bank** | | Transaction ID: E9714 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 4 |
| Mailing Address 1500 Edgewater St NW | | Amount of Each Disbursement this Period 1354.88 |
| City Salem State OR Zip Code 97304- | FEA PAYROLL TAXES | |
| Purpose of Disbursement FEA PAYROLL TAXES | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. John Koehn | | Transaction ID: E9629 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 4 |
| Mailing Address 6210 SW Bonita Road Apt D203 | | Amount of Each Disbursement this Period 866.47 |
| City Lake Oswego State OR Zip Code 97035- | FEA PAYROLL | |
| Purpose of Disbursement FEA PAYROLL | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 5142.99 |
| TOTAL This Period (last page this line number only) ▶ | |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 40 / 64

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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. John Koehn Full Name (Last, First, Middle Initial) | | Transaction ID: E9792 Date of Disbursement 06 / 15 / 2004 |
| Mailing Address 6210 SW Bonita Road Apt D203 | | Amount of Each Disbursement this Period 866.47 |
| City Lake Oswego State OR Zip Code 97035- | FEA PAYROLL | |
| Purpose of Disbursement FEA PAYROLL | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | | |

| | | |
|---|-------------|--|
| B. Amy Langdon Full Name (Last, First, Middle Initial) | | Transaction ID: E9658 Date of Disbursement 06 / 01 / 2004 |
| Mailing Address 2830 Foxhaven Dr S | | Amount of Each Disbursement this Period 2059.96 |
| City Salem State OR Zip Code 97306- | FEA PAYROLL | |
| Purpose of Disbursement FEA PAYROLL | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | | |

| | | |
|---|-------------|--|
| C. Amy Langdon Full Name (Last, First, Middle Initial) | | Transaction ID: E9690 Date of Disbursement 06 / 15 / 2004 |
| Mailing Address 2830 Foxhaven Dr S | | Amount of Each Disbursement this Period 2059.95 |
| City Salem State OR Zip Code 97306- | FEA PAYROLL | |
| Purpose of Disbursement FEA PAYROLL | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 4986.38 |
| 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 41 / 64

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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. Marc Lucca | | Transaction ID: E9630 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 4 |
| Mailing Address 170 W Ellendale Ave Ste 103 PMB 105 | | Amount of Each Disbursement this Period 792.47 |
| City Dallas State OR Zip Code 97338-1456 | FEA PAYROLL | |
| Purpose of Disbursement FEA PAYROLL | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Marc Lucca | | Transaction ID: E9793 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 4 |
| Mailing Address 170 W Ellendale Ave Ste 103 PMB 105 | | Amount of Each Disbursement this Period 792.47 |
| City Dallas State OR Zip Code 97338-1456 | FEA PAYROLL | |
| Purpose of Disbursement FEA PAYROLL | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Oregon Department of Revenue | | Transaction ID: E9633 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 4 |
| Mailing Address PO Box 14800 | | Amount of Each Disbursement this Period 798.00 |
| City Salem State OR Zip Code 97309- | FEA PAYROLL TAXES | |
| Purpose of Disbursement FEA PAYROLL TAXES | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|----------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 2382.94 |
| 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 42 / 64

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

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Oregon Department of Revenue | | Transaction ID: E9662 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 4 |
| Mailing Address PO Box 14800 | | Amount of Each Disbursement this Period 476.00 |
| 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. Oregon Department of Revenue | | Transaction ID: E9797 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 4 |
| Mailing Address PO Box 14800 | | Amount of Each Disbursement this Period 757.00 |
| 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: E9715 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 4 |
| Mailing Address PO Box 14800 | | Amount of Each Disbursement this Period 328.00 |
| 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) ▶ | 1561.00 |
| 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 43 / 64

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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. Anastasia Pannas | | Transaction ID: E9659 Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2004 | |
| Mailing Address 5225 Chapman St. S | | Amount of Each Disbursement this Period 784.51 | |
| City Salem State OR Zip Code 97306- | 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) B. Anastasia Pannas | | Transaction ID: E9691 Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2004 | |
| Mailing Address 5225 Chapman St. S | | Amount of Each Disbursement this Period 784.51 | |
| City Salem State OR Zip Code 97306- | 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. Reflections Inc | | Transaction ID: E9681 Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2004 | |
| Mailing Address 6408-P Seven Corners Pl | | Amount of Each Disbursement this Period 440.00 | |
| City Falls Church State VA Zip Code 22044- | Purpose of Disbursement FEA ROVE EVENT PHOTOS 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 ROVE EVENT PHOTOS

| | |
|--|----------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 2009.02 |
| TOTAL This Period (last page this line number only) ▶ | 38968.26 |

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 <input type="text" value="760.51"/> | Transaction ID: 1LS71015.E13094 | |
| 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="760.51"/> |

| | |
|--|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Aristotle | Nature of Debt (Purpose): Tech support |
| Mailing Address 205 Pennsylvania Ave SE | |
| City State ZIP Code Washington DC 20003- | |

| | | |
|--|--|---|
| Outstanding Balance Beginning This Period <input type="text" value="0.00"/> | Transaction ID: 6LSE9875 | |
| Amount Incurred This Period <input type="text" value="3150.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="3150.00"/> |

| | |
|--|--|
| 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 <input type="text" value="29671.24"/> | Transaction ID: 3LSE9688 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="3632.50"/> | Outstanding Balance at Close of This Period <input type="text" value="26038.74"/> |

| | |
|--|---------------------------------------|
| 1) SUBTOTALS This Period This Page (optional)..... | <input type="text" value="29949.25"/> |
| 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 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 35201.06 | Transaction ID: 14LSE9671 | |
| Amount Incurred This Period 0.00 | Payment This Period 4000.00 | Outstanding Balance at Close of This Period 31201.06 |

| | |
|--|--|
| B. 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: 13LS71002.E13089 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 2150.00 |

| | |
|--|---|
| C. 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 1289.82 | Transaction ID: 2LSE8828 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 1289.82 |

| | |
|--|-----------------|
| 1) SUBTOTALS This Period This Page (optional)..... | 34640.88 |
| 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 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 727.64 | Transaction ID: 12LSE9877 | |
| Amount Incurred This Period 1975.66 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 2703.30 |

| | |
|--|--|
| B. 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 4500.00 | Transaction ID: 11LS70929.E13085 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 4500.00 |

| | |
|---|---|
| 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: 8LSE11071 | |
| 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)..... | ▶ | 9353.30 |
| 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 Purchase Power | Nature of Debt (Purpose): postage |
| Mailing Address PO Box 856042 | |
| City State ZIP Code Louisville KY 40285- | |

| | | |
|--|----------------------------------|--|
| Outstanding Balance Beginning This Period 2061.79 | Transaction ID: 10LSE9719 | |
| Amount Incurred This Period 0.00 | Payment This Period 1999.80 | Outstanding Balance at Close of This Period 61.99 |

| | |
|---|---|
| B. 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: LS70929.E13084 | |
| 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)..... | 17914.71 |
| 2) TOTALS This Period (last page this line number only)..... | 91858.14 |
| 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 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) Stephen Fox | | | 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 25217 Herford Drive | | | Allocated Activity or Event Year-To-Date 122747.89 | | | | | | | | | | | | | | | | | | | | | | |
| City | State | Zip Code | Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>6</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>4</td></tr></table> Transaction ID: H4E9634 | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 6 | / | 0 | 2 | / | 2 | 0 | 0 | 4 |
| M | M | / | | | | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 0 | 6 | / | 0 | 2 | / | 2 | 0 | 0 | 4 | | | | | | | | | | | | | | | | |
| Ramona | CA | 92065- | | | | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement: Travel expense reimb. | | | Category/ Type | | | | | | | | | | | | | | | | | | | | | | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | | | | | | | | | | | | | | | | | | | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 6.66 | | 11.84 | | 18.50 |

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|-------|------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| B. Full Name (Last, First, Middle Initial) Marc Lucca | | | 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 170 W Ellendale Ave Ste 10BMB 105 | | | Allocated Activity or Event Year-To-Date 122729.39 | | | | | | | | | | | | | | | | | | | | | | |
| City | State | Zip Code | Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>6</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>4</td></tr></table> Transaction ID: H4E9635 | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 6 | / | 0 | 2 | / | 2 | 0 | 0 | 4 |
| M | M | / | | | | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 0 | 6 | / | 0 | 2 | / | 2 | 0 | 0 | 4 | | | | | | | | | | | | | | | | |
| Dallas | OR | 97338-1456 | | | | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement: Travel expense reimb. | | | Category/ Type | | | | | | | | | | | | | | | | | | | | | | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | | | | | | | | | | | | | | | | | | | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 28.56 | | 50.76 | | 79.32 |

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|-------|----------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| C. Full Name (Last, First, Middle Initial) Megan Deras | | | 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 5150 SW Landing Drive Unit 201 | | | Allocated Activity or Event Year-To-Date 122650.07 | | | | | | | | | | | | | | | | | | | | | | |
| City | State | Zip Code | Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>6</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>4</td></tr></table> Transaction ID: H4E9636 | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 6 | / | 0 | 2 | / | 2 | 0 | 0 | 4 |
| M | M | / | | | | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 0 | 6 | / | 0 | 2 | / | 2 | 0 | 0 | 4 | | | | | | | | | | | | | | | | |
| Portland | OR | 97238- | | | | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement: Travel expense reimb. | | | Category/ Type | | | | | | | | | | | | | | | | | | | | | | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | | | | | | | | | | | | | | | | | | | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 58.81 | | 104.54 | | 163.35 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 94.03 | | 167.14 | | 261.17 |

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) Dell Inc. | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address One Dell Way | | | Allocated Activity or Event Year-To-Date 139970.91 | | |
| City Round Rock | State TX | Zip Code 78682- | Date <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 28 / 2004 | | |
| Purpose of Disbursement: Victory Laptops | | | Transaction ID: H4E9647 | | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 1332.18 | | 2368.32 | | 3700.50 |

| | | | | | |
|---|-------------|--------------------|---|--|--|
| B. Full Name (Last, First, Middle Initial) Darryl Howard & Asso | | | 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 7514 Harley Way SE | | | Allocated Activity or Event Year-To-Date 125535.23 | | |
| City Salem | State OR | Zip Code 97301- | Date <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 03 / 2004 | | |
| Purpose of Disbursement: state & federal reporting services | | | Transaction ID: H4E9664 | | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 900.00 | | 1600.00 | | 2500.00 |

| | | | | | |
|---|-------------|--------------------|---|--|--|
| C. Full Name (Last, First, Middle Initial) Capitol Accounting Service | | | 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 1304 | | | Allocated Activity or Event Year-To-Date 122224.64 | | |
| City Silverton | State OR | Zip Code 97381- | Date <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 01 / 2004 | | |
| Purpose of Disbursement: CPA services | | | Transaction ID: H4E9665 | | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 187.20 | | 332.80 | | 520.00 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 2419.38 | | 4301.12 | | 6720.50 |

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

| | | | | |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT |
| | | | | |

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

| | | | | |
|--|-------------|--------------------|---|--|
| A. Full Name (Last, First, Middle Initial) US Postal Service | | | 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 Liberty St | | | Allocated Activity or Event Year-To-Date 125786.83 | |
| City Salem | State OR | Zip Code 97308- | Date <input type="text" value="06"/> / <input type="text" value="04"/> / <input type="text" value="2004"/> | |
| Purpose of Disbursement: stamps | | | Transaction ID: H4E9667 | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 90.58 | | 161.02 | | 251.60 |

| | | | | |
|---|-------------|--------------------|---|--|
| B. Full Name (Last, First, Middle Initial) Stafford Studios | | | 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 11594 SE Meadowgold | | | Allocated Activity or Event Year-To-Date 126195.97 | |
| City Clackamas | State OR | Zip Code 97015- | Date <input type="text" value="06"/> / <input type="text" value="07"/> / <input type="text" value="2004"/> | |
| Purpose of Disbursement: website maintenance | | | Transaction ID: H4E9672 | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | | |

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|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 90.00 | | 160.00 | | 250.00 |

| | | | | |
|--|-------------|------------------------|---|--|
| C. Full Name (Last, First, Middle Initial) Solomon Yue | | | 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 265 50th Ave NW | | | Allocated Activity or Event Year-To-Date 125945.97 | |
| City Salem | State OR | Zip Code 97304-3221 | Date <input type="text" value="06"/> / <input type="text" value="07"/> / <input type="text" value="2004"/> | |
| Purpose of Disbursement: Travel expense reimb. | | | Transaction ID: H4E9675 | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | | |

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|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 22.09 | | 39.28 | | 61.37 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 202.67 | | 360.30 | | 562.97 |

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) Amy Langdon | | | 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 2830 Foxhaven Dr S | | | Allocated Activity or Event Year-To-Date 125801.15 | | | | | | | | | | | | | | | | | | | | | | |
| City | State | Zip Code | Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>6</td><td>/</td><td>0</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>4</td></tr></table> Transaction ID: H4E9678 | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 6 | / | 0 | 7 | / | 2 | 0 | 0 | 4 |
| M | M | / | | | | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 0 | 6 | / | 0 | 7 | / | 2 | 0 | 0 | 4 | | | | | | | | | | | | | | | | |
| Salem | OR | 97306- | | | | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement: Travel/Parking exps | | | Category/ Type | | | | | | | | | | | | | | | | | | | | | | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | | | | | | | | | | | | | | | | | | | | | | | |

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|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 5.16 | | 9.16 | | 14.32 |

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|---|-------|------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| B. Full Name (Last, First, Middle Initial) Clackamas County Clerk | | | 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 825 Portland Avenue | | | Allocated Activity or Event Year-To-Date 125884.60 | | | | | | | | | | | | | | | | | | | | | | |
| City | State | Zip Code | Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>6</td><td>/</td><td>0</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>4</td></tr></table> Transaction ID: H4E9680 | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 6 | / | 0 | 7 | / | 2 | 0 | 0 | 4 |
| M | M | / | | | | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 0 | 6 | / | 0 | 7 | / | 2 | 0 | 0 | 4 | | | | | | | | | | | | | | | | |
| Gladstone | OR | 97027-2195 | | | | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement: voter file/lists OGOP | | | Category/ Type | | | | | | | | | | | | | | | | | | | | | | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | | | | | | | | | | | | | | | | | | | | | | | |

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|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 30.04 | | 53.41 | | 83.45 |

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|---|-------|----------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| C. Full Name (Last, First, Middle Initial) Eagle Teleconferencing | | | 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 207 West Washington Street | | | Allocated Activity or Event Year-To-Date 126578.76 | | | | | | | | | | | | | | | | | | | | | | |
| City | State | Zip Code | Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>6</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>4</td></tr></table> Transaction ID: H4E9687 | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 6 | / | 1 | 0 | / | 2 | 0 | 0 | 4 |
| M | M | / | | | | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 0 | 6 | / | 1 | 0 | / | 2 | 0 | 0 | 4 | | | | | | | | | | | | | | | | |
| Rushville | IL | 62681- | | | | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement: conference calls | | | Category/ Type | | | | | | | | | | | | | | | | | | | | | | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | | | | | | | | | | | | | | | | | | | | | | | |

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|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 137.80 | | 244.99 | | 382.79 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 173.00 | | 307.56 | | 480.56 |

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) Pfister Hotel | | | 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 424 East Wisconsin Ave | | | Allocated Activity or Event Year-To-Date 129114.15 | | | | | | | | | | | | | | | | | | | | | | |
| City | State | Zip Code | Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>6</td><td>/</td><td>1</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>4</td></tr></table> | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 6 | / | 1 | 8 | / | 2 | 0 | 0 | 4 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | | | |
| 0 | 6 | / | 1 | 8 | / | 2 | 0 | 0 | 4 | | | | | | | | | | | | | | | | |
| Milwaukee | WI | 53202- | Transaction ID: H4E9713 | | | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement: Facility fees/OGOP | | | Category/ Type | | | | | | | | | | | | | | | | | | | | | | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | | | | | | | | | | | | | | | | | | | | | | | |

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|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 164.20 | | 291.90 | | 456.10 |

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|---|-------|----------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| B. Full Name (Last, First, Middle Initial) Advanced Laser | | | 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 2915 22nd St SE | | | Allocated Activity or Event Year-To-Date 129218.54 | | | | | | | | | | | | | | | | | | | | | | |
| City | State | Zip Code | Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>6</td><td>/</td><td>2</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>4</td></tr></table> | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 6 | / | 2 | 3 | / | 2 | 0 | 0 | 4 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | | | |
| 0 | 6 | / | 2 | 3 | / | 2 | 0 | 0 | 4 | | | | | | | | | | | | | | | | |
| Salem | OR | 97302- | Transaction ID: H4E9716 | | | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement: office supplies/toner | | | Category/ Type | | | | | | | | | | | | | | | | | | | | | | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | | | | | | | | | | | | | | | | | | | | | | | |

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|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 35.98 | | 63.97 | | 99.95 |

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|---|-------|----------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 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 129888.72 | | | | | | | | | | | | | | | | | | | | | | |
| City | State | Zip Code | Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>6</td><td>/</td><td>2</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>4</td></tr></table> | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 6 | / | 2 | 3 | / | 2 | 0 | 0 | 4 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | | | |
| 0 | 6 | / | 2 | 3 | / | 2 | 0 | 0 | 4 | | | | | | | | | | | | | | | | |
| Salem | OR | 97306- | Transaction ID: H4E9718 | | | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement: office supplies | | | Category/ Type | | | | | | | | | | | | | | | | | | | | | | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | | | | | | | | | | | | | | | | | | | | | | | |

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|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 171.88 | | 305.57 | | 477.45 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 372.06 | | 661.44 | | 1033.50 |

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

| | | |
|---------------|------------------|--------------|
| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
| | | |

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

| | | | | | |
|--|-------------|--------------------|---|--|--|
| A. Full Name (Last, First, Middle Initial) 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 132151.85 | | |
| City Louisville | State KY | Zip Code 40285- | Date <input type="text" value="06"/> / <input type="text" value="23"/> / <input type="text" value="2004"/> | | |
| Purpose of Disbursement: postage | | | Transaction ID: H4E9719 | | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | | | |

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|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 719.93 | | 1279.87 | | 1999.80 |

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|---|-------------|--------------------|---|--|--|
| B. Full Name (Last, First, Middle Initial) X5 Solutions | | | 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 1520 4th Ave #500 | | | Allocated Activity or Event Year-To-Date 130152.05 | | |
| City Seattle | State WA | Zip Code 98101- | Date <input type="text" value="06"/> / <input type="text" value="23"/> / <input type="text" value="2004"/> | | |
| Purpose of Disbursement: phone bill | | | Transaction ID: H4E9720 | | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | | | |

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|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 94.80 | | 168.53 | | 263.33 |

| | | | | | |
|---|-------------|--------------------|---|--|--|
| C. Full Name (Last, First, Middle Initial) Computer Village | | | 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 4075 76th Ave NE | | | Allocated Activity or Event Year-To-Date 136270.41 | | |
| City Salem | State OR | Zip Code 97305- | Date <input type="text" value="06"/> / <input type="text" value="25"/> / <input type="text" value="2004"/> | | |
| Purpose of Disbursement: computer network maintenance | | | Transaction ID: H4E9726 | | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 720.00 | | 1280.00 | | 2000.00 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 1534.73 | | 2728.40 | | 4263.13 |

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) 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 127258.47 | | |
| City Salem | State OR | Zip Code 97306- | Date MM / DD / YYYY 06 / 14 / 2004 | | |
| Purpose of Disbursement: office supplies | | | Transaction ID: H4E9794 | | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 214.46 | | 381.25 | | 595.71 |

| | | | | | |
|--|-------------|--------------------|---|--|--|
| B. Full Name (Last, First, Middle Initial) Marion County Clerk | | | 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 4263 Commercial Street SE #300 | | | Allocated Activity or Event Year-To-Date 126662.76 | | |
| City Salem | State OR | Zip Code 97302- | Date MM / DD / YYYY 06 / 14 / 2004 | | |
| Purpose of Disbursement: maps | | | Transaction ID: H4E9798 | | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 7.20 | | 12.80 | | 20.00 |

| | | | | | |
|--|-------------|--------------------|---|--|--|
| C. Full Name (Last, First, Middle Initial) Polk County Clerk | | | 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 Courthouse Rm 201 | | | Allocated Activity or Event Year-To-Date 127268.47 | | |
| City Dallas | State OR | Zip Code 97338- | Date MM / DD / YYYY 06 / 14 / 2004 | | |
| Purpose of Disbursement: maps | | | Transaction ID: H4E9799 | | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 3.60 | | 6.40 | | 10.00 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 225.26 | | 400.45 | | 625.71 |

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) Clerk Yamhill County | | | 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 535 E. 5th Street | | | Allocated Activity or Event Year-To-Date 127280.47 | |
| City McMinnville | State OR | Zip Code 97128-4593 | Date <small>M M / D D / Y Y Y Y</small> 06 / 14 / 2004 | |
| Purpose of Disbursement: maps | | | Transaction ID: H4E9800 | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 1.44 | | 2.56 | | 4.00 |

| | | | | |
|---|-------------|--------------------|---|--|
| B. Full Name (Last, First, Middle Initial) Tillamook County Clerk | | | 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 201 Laurel Ave | | | Allocated Activity or Event Year-To-Date 127276.47 | |
| City Tillamook | State OR | Zip Code 97141- | Date <small>M M / D D / Y Y Y Y</small> 06 / 14 / 2004 | |
| Purpose of Disbursement: maps | | | Transaction ID: H4E9801 | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | | |

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|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 2.88 | | 5.12 | | 8.00 |

| | | | | |
|--|-------------|--------------------|---|--|
| C. Full Name (Last, First, Middle Initial) Linn County Clerk | | | 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 4th & Broadalbin | | | Allocated Activity or Event Year-To-Date 126642.76 | |
| City Albany | State OR | Zip Code 97321- | Date <small>M M / D D / Y Y Y Y</small> 06 / 14 / 2004 | |
| Purpose of Disbursement: maps | | | Transaction ID: H4E9803 | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 8.64 | | 15.36 | | 24.00 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 12.96 | | 23.04 | | 36.00 |

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) Benton County Clerk | | | 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 120 NW 4th St | | | Allocated Activity or Event Year-To-Date 126618.76 | | | | | | | | | | | | | | | | | | | | | | |
| City | State | Zip Code | Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>6</td><td>/</td><td>1</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>4</td></tr></table> Transaction ID: H4E9804 | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 6 | / | 1 | 4 | / | 2 | 0 | 0 | 4 |
| M | M | / | | | | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 0 | 6 | / | 1 | 4 | / | 2 | 0 | 0 | 4 | | | | | | | | | | | | | | | | |
| Corvallis | OR | 97330-4734 | | | | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement: maps | | | Category/ Type | | | | | | | | | | | | | | | | | | | | | | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | | | | | | | | | | | | | | | | | | | | | | | |

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|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 14.40 | | 25.60 | | 40.00 |

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|-------|----------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| B. Full Name (Last, First, Middle Initial) Wyndham Hotel | | | 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 427 N. 44th Street | | | Allocated Activity or Event Year-To-Date 127502.65 | | | | | | | | | | | | | | | | | | | | | | |
| City | State | Zip Code | Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>6</td><td>/</td><td>1</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>4</td></tr></table> Transaction ID: H4E9805 | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 6 | / | 1 | 6 | / | 2 | 0 | 0 | 4 |
| M | M | / | | | | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 0 | 6 | / | 1 | 6 | / | 2 | 0 | 0 | 4 | | | | | | | | | | | | | | | | |
| Phoenix | AZ | 85008- | | | | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement: Lodging | | | Category/ Type | | | | | | | | | | | | | | | | | | | | | | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | | | | | | | | | | | | | | | | | | | | | | | |

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|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 78.39 | | 139.35 | | 217.74 |

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|-------|----------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| C. Full Name (Last, First, Middle Initial) Pfister Hotel | | | 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 424 East Wisconsin Ave | | | Allocated Activity or Event Year-To-Date 128658.05 | | | | | | | | | | | | | | | | | | | | | | |
| City | State | Zip Code | Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>6</td><td>/</td><td>1</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>4</td></tr></table> Transaction ID: H4E9807 | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 6 | / | 1 | 8 | / | 2 | 0 | 0 | 4 |
| M | M | / | | | | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 0 | 6 | / | 1 | 8 | / | 2 | 0 | 0 | 4 | | | | | | | | | | | | | | | | |
| Milwaukee | WI | 53202- | | | | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement: Lodging | | | Category/ Type | | | | | | | | | | | | | | | | | | | | | | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | | | | | | | | | | | | | | | | | | | | | | | |

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|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 415.94 | | 739.46 | | 1155.40 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 508.73 | | 904.41 | | 1413.14 |

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) AT&T Wireless | | | 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 30459 | | | Allocated Activity or Event Year-To-Date 134270.41 | |
| City Los Angeles | State CA | Zip Code 90030- | Date <input type="text" value="06"/> / <input type="text" value="23"/> / <input type="text" value="2004"/> | |
| Purpose of Disbursement: cell phone bill | | | Transaction ID: H4E9808 | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 762.68 | | 1355.88 | | 2118.56 |

| | | | | |
|---|-------------|--------------------|---|--|
| B. Full Name (Last, First, Middle Initial) Anderson Group Intl. | | | 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 1010 Tyinn #24 | | | Allocated Activity or Event Year-To-Date 141098.05 | |
| City Eugene | State OR | Zip Code 97402- | Date <input type="text" value="06"/> / <input type="text" value="28"/> / <input type="text" value="2004"/> | |
| Purpose of Disbursement: sound equipment rental | | | Transaction ID: H4E9810 | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 36.00 | | 64.00 | | 100.00 |

| | | | | |
|---|-------------|--------------------|---|--|
| C. Full Name (Last, First, Middle Initial) Joe Alvernaz | | | 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 3874 Azzlea Avenue | | | Allocated Activity or Event Year-To-Date 140998.05 | |
| City Albany | State OR | Zip Code 97322- | Date <input type="text" value="06"/> / <input type="text" value="28"/> / <input type="text" value="2004"/> | |
| Purpose of Disbursement: Travel expense reimb. | | | Transaction ID: H4E9811 | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 369.77 | | 657.37 | | 1027.14 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 1168.45 | | 2077.25 | | 3245.70 |

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) Fast Signs | | | 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 2310 Commercial SE | | | Allocated Activity or Event Year-To-Date 141338.99 | |
| City Salem | State OR | Zip Code 97301- | Date <input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2004"/> | |
| Purpose of Disbursement: Office supplies/Banner | | | Transaction ID: H4E9813 | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | Category/ Type | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 69.12 | | 122.88 | | 192.00 |

| | | | | |
|--|-------------|--------------------|---|--|
| B. Full Name (Last, First, Middle Initial) Amy Langdon | | | 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 2830 Foxhaven Dr S | | | Allocated Activity or Event Year-To-Date 141146.99 | |
| City Salem | State OR | Zip Code 97306- | Date <input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2004"/> | |
| Purpose of Disbursement: Travel expense reimb. | | | Transaction ID: H4E9814 | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | Category/ Type | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 17.62 | | 31.32 | | 48.94 |

| | | | | |
|--|-------------|--------------------|---|--|
| C. Full Name (Last, First, Middle Initial) Paul R. Perkins | | | 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 19740 Wildwood Drive | | | Allocated Activity or Event Year-To-Date 142499.33 | |
| City West Linn | State OR | Zip Code 97068- | Date <input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2004"/> | |
| Purpose of Disbursement: Travel expense reimb. | | | Transaction ID: H4E9816 | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | Category/ Type | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 25.01 | | 44.47 | | 69.48 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 111.75 | | 198.67 | | 310.42 |

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) David Jaques | | | 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 800 Winston Section Road | | | Allocated Activity or Event Year-To-Date 142429.85 | |
| City Winston | State OR | Zip Code 97496- | Date M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 4 | |
| Purpose of Disbursement: Travel expense reimb. | | | Transaction ID: H4E9817 | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 140.57 | | 249.90 | | 390.47 |

| | | | | |
|---|-------------|------------------------|---|--|
| B. Full Name (Last, First, Middle Initial) Marc Lucca | | | 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 170 W Ellendale Ave Ste 10BMB 105 | | | Allocated Activity or Event Year-To-Date 142039.38 | |
| City Dallas | State OR | Zip Code 97338-1456 | Date M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 4 | |
| Purpose of Disbursement: Travel expense reimb. | | | Transaction ID: H4E9818 | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | | |

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|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 102.18 | | 181.64 | | 283.82 |

| | | | | |
|--|-------------|--------------------|---|--|
| C. Full Name (Last, First, Middle Initial) Megan Deras | | | 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 5150 SW Landing Drive Unit 201 | | | Allocated Activity or Event Year-To-Date 141755.56 | |
| City Portland | State OR | Zip Code 97238- | Date M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 4 | |
| Purpose of Disbursement: Travel expense reimb. | | | Transaction ID: H4E9822 | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 149.97 | | 266.60 | | 416.57 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 392.72 | | 698.14 | | 1090.86 |

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) Clerk Clatsop County | | | 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 749 Commercial St | | | Allocated Activity or Event Year-To-Date 142516.83 | |
| City Astoria | State OR | Zip Code 97103-4544 | Date <input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2004"/> | |
| Purpose of Disbursement: voter file/lists-OGOP | | | Transaction ID: H4E9823 | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 6.30 | | 11.20 | | 17.50 |

| | | | | |
|---|-------------|--------------------|---|--|
| B. Full Name (Last, First, Middle Initial) Scappoose Community Club | | | 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 933 | | | Allocated Activity or Event Year-To-Date 142591.83 | |
| City Scappoose | State OR | Zip Code 97056- | Date <input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2004"/> | |
| Purpose of Disbursement: voter reg. booth rental/OGOP | | | Transaction ID: H4E9825 | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 27.00 | | 48.00 | | 75.00 |

| | | | | |
|---|-------------|--------------------|---|--|
| C. Full Name (Last, First, Middle Initial) 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 122355.68 | |
| City Salem | State OR | Zip Code 97304- | Date <input type="text" value="06"/> / <input type="text" value="02"/> / <input type="text" value="2004"/> | |
| Purpose of Disbursement: Check purchase | | | Transaction ID: H4E9867 | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 47.17 | | 83.87 | | 131.04 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 80.47 | | 143.07 | | 223.54 |

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) 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 122759.83 | | |
| City State Zip Code Salem OR 97304- | Category/ Type | | Date M M / D D / Y Y Y Y 0 6 / 0 3 / 2 0 0 4 | | |
| Purpose of Disbursement: Bank fee | | | Transaction ID: H4E9868 | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 4.30 | | 7.64 | | 11.94 |

| | | | | | |
|--|-------------------|--|---|--|--|
| B. Full Name (Last, First, Middle Initial) 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 122891.56 | | |
| City State Zip Code Salem OR 97304- | Category/ Type | | Date M M / D D / Y Y Y Y 0 6 / 0 3 / 2 0 0 4 | | |
| Purpose of Disbursement: check order | | | Transaction ID: H4E9869 | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 47.42 | | 84.31 | | 131.73 |

| | | | | | |
|--|-------------------|--|---|--|--|
| C. Full Name (Last, First, Middle Initial) 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 129118.59 | | |
| City State Zip Code Salem OR 97304- | Category/ Type | | Date M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 4 | | |
| Purpose of Disbursement: Bank fee | | | Transaction ID: H4E9870 | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 1.60 | | 2.84 | | 4.44 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 53.32 | | 94.79 | | 148.11 |

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) 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 129308.27 | | | | | | | | | | | | | | | | | | | | | | |
| City Salem | State OR | Zip Code 97304- | Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>6</td><td>/</td><td>2</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>4</td></tr></table> | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 6 | / | 2 | 3 | / | 2 | 0 | 0 | 4 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | | | |
| 0 | 6 | / | 2 | 3 | / | 2 | 0 | 0 | 4 | | | | | | | | | | | | | | | | |
| Purpose of Disbursement: Bank fee | | | Transaction ID: H4E9873 | | | | | | | | | | | | | | | | | | | | | | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | | | | | | | | | | | | | | | | | | | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 32.30 | | 57.43 | | 89.73 |

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|-------------|--------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| B. Full Name (Last, First, Middle Initial) 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 129411.27 | | | | | | | | | | | | | | | | | | | | | | |
| City Salem | State OR | Zip Code 97304- | Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>6</td><td>/</td><td>2</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>4</td></tr></table> | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 6 | / | 2 | 3 | / | 2 | 0 | 0 | 4 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | | | |
| 0 | 6 | / | 2 | 3 | / | 2 | 0 | 0 | 4 | | | | | | | | | | | | | | | | |
| Purpose of Disbursement: Bank fee | | | Transaction ID: H4E9874 | | | | | | | | | | | | | | | | | | | | | | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | | | | | | | | | | | | | | | | | | | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 37.08 | | 65.92 | | 103.00 |

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|-------------|--------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| C. Full Name (Last, First, Middle Initial) 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 122486.72 | | | | | | | | | | | | | | | | | | | | | | |
| City Salem | State OR | Zip Code 97304- | Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>6</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>4</td></tr></table> | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 6 | / | 0 | 2 | / | 2 | 0 | 0 | 4 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | | | |
| 0 | 6 | / | 0 | 2 | / | 2 | 0 | 0 | 4 | | | | | | | | | | | | | | | | |
| Purpose of Disbursement: bank fee | | | Transaction ID: H4E9885 | | | | | | | | | | | | | | | | | | | | | | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | | | | | | | | | | | | | | | | | | | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 47.17 | | 83.87 | | 131.04 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 116.55 | | 207.22 | | 323.77 |

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) 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 122903.50 | | | | | | | | | | | | | | | | | | | | | | |
| City Salem | State OR | Zip Code 97304- | Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>6</td><td>/</td><td>0</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>4</td></tr></table> | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 6 | / | 0 | 3 | / | 2 | 0 | 0 | 4 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | | | |
| 0 | 6 | / | 0 | 3 | / | 2 | 0 | 0 | 4 | | | | | | | | | | | | | | | | |
| Purpose of Disbursement: bank fee | | | Transaction ID: H4E9886 | | | | | | | | | | | | | | | | | | | | | | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | | | | | | | | | | | | | | | | | | | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 4.30 | | 7.64 | | 11.94 |

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|-------------|--------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| B. Full Name (Last, First, Middle Initial) 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 123035.23 | | | | | | | | | | | | | | | | | | | | | | |
| City Salem | State OR | Zip Code 97304- | Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>6</td><td>/</td><td>0</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>4</td></tr></table> | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 6 | / | 0 | 3 | / | 2 | 0 | 0 | 4 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | | | |
| 0 | 6 | / | 0 | 3 | / | 2 | 0 | 0 | 4 | | | | | | | | | | | | | | | | |
| Purpose of Disbursement: bank fee | | | Transaction ID: H4E9887 | | | | | | | | | | | | | | | | | | | | | | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | | | | | | | | | | | | | | | | | | | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 47.42 | | 84.31 | | 131.73 |

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|-------------|--------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| C. Full Name (Last, First, Middle Initial) 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 127284.91 | | | | | | | | | | | | | | | | | | | | | | |
| City Salem | State OR | Zip Code 97304- | Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>6</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>4</td></tr></table> | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 6 | / | 1 | 5 | / | 2 | 0 | 0 | 4 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | | | |
| 0 | 6 | / | 1 | 5 | / | 2 | 0 | 0 | 4 | | | | | | | | | | | | | | | | |
| Purpose of Disbursement: bank fee | | | Transaction ID: H4E9888 | | | | | | | | | | | | | | | | | | | | | | |
| Activity or Event Identifier: ADMINISTRATION B 2111 | | | | | | | | | | | | | | | | | | | | | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 1.60 | | 2.84 | | 4.44 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 53.32 | | 94.79 | | 148.11 |

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)
Grant County Clerk

Mailing Address
Courthouse

City State Zip Code
Canyon City OR 97820-0039

Purpose of Disbursement:
voter file/lists-OGOP

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

3745.04

Activity or Event Identifier:
GV GÉNERICVOTER DRIVE

Date 06 / 24 / 2004

Transaction ID: H4E9809

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---------------|---|------------------|---|--------------|
| 27.00 | | 48.00 | | 75.00 |

B. Full Name (Last, First, Middle Initial)
Douglas County Clerk

Mailing Address
P.O. Box 10

City State Zip Code
Roseburg OR 97470-0004

Purpose of Disbursement:
voter file/lists OGOP

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

3787.04

Activity or Event Identifier:
GV GÉNERICVOTER DRIVE

Date 06 / 30 / 2004

Transaction ID: H4E9824

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---------------|---|------------------|---|--------------|
| 15.12 | | 26.88 | | 42.00 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---------------|---|------------------|---|--------------|
| 42.12 | | 74.88 | | 117.00 |

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

| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
|---------------|------------------|--------------|
| 7561.52 | 13442.67 | 21004.19 |