

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

SECRETARY OF THE SENATE 09 FEB -5 PM 1:08

Office Use Only

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

Jeff Merkley for Oregon

ADDRESS (number and street) 2236 SE 10th Ave.

Check if different than previously reported. (ACC) Portland OR 97214

2. FEC IDENTIFICATION NUMBER C00437277 CITY STATE ZIP CODE STATE DISTRICT

3. IS THIS REPORT NEW (N) OR AMENDED (A) OR

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) Termination Report (TER)

(b) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on in the State of (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on in the State of

5. Covering Period 11 25 2008 through 12 31 2008

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

Type or Print Name of Treasurer Kevin F. Neely

Signature of Treasurer Date 01 31 2009

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

Table with 10 columns and 1 row. Office Use Only. FEC FORM 3 (Revised 02/2003)

2 9 9 2 0 0 9 9 9 9 9

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Jeff Merkley for Oregon

Report Covering the Period: From:

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	27100.00	61947.20
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	1000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	27100.00	60947.20
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	62991.82	154910.54
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	62991.82	154910.54
8. Cash on Hand at Close of Reporting Period (from Line 27).....	11226.82	
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).....	514909.77	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

20020090809

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name
Jeff Merkley for Oregon

Report Covering the Period: From:

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	8

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1250.00	17950.00
(ii) Unitemized.....	100.00	2397.20
(iii) TOTAL of contributions from individuals..... ▶	1350.00	20347.20
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACS).....	25750.00	41600.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	27100.00	61947.20
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	39680.89	40081.48
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	66780.89	102028.68

29020090810

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	62991.82	154910.54
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	1000.00
(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 20(a), (b), and (c)).....	0.00	1000.00
21. OTHER DISBURSEMENTS.....	2300.00	2300.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) >	65291.82	158210.54

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	9737.75
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	66780.89
25. SUBTOTAL (add Line 23 and Line 24).....	76518.64
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	65291.82
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	11226.82

CONSOLIDATED REPORT OF GROSS RECEIPTS FOR AUTHORIZED COMMITTEES (11 CFR 104.19)
(Millionaires' Amendment)

Name of Candidate Jeff Merkley		Candidate ID Number S8OR00207
Name of Principal Campaign Committee Jeff Merkley for Oregon		Committee ID Number C C00437277
Committee Address 2236 SE 10th Ave.		
City Portland	State OR	ZIP 97214
Report Covering Period (check one) <input type="checkbox"/> through June 30, or <input checked="" type="checkbox"/> through December 31 of the year preceding the year of the general election		
	Primary	General
1. Gross receipts of authorized committees	5275.00	0.00
2. Aggregate amount of contributions from personal funds of the candidate	0.00	0.00
3. Gross receipts minus the candidate's personal contributions	5275.00	0.00

20020090812

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 20
(check only one)	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15

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)
Jeff Merkley for Oregon

A.

Full Name (Last, First, Middle Initial)
Robert Glennon

Mailing Address 3 Washington Cir NW #806

City Washington State DC Zip Code 20037-

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

Name of Employer Mayer Brown Occupation tax attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 12 / 12 / 2008

Transaction ID: CN121208123750Ro

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]
Conduit: 1 donor -- Laurie Michaels

B.

Full Name (Last, First, Middle Initial)
Robert Johnson

Mailing Address 1509 SW Sunset Blvd 1-H

City Portland State OR Zip Code 97239-

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

Name of Employer Steelport LLC Occupation Construction

Receipt For: 2014
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 11 / 29 / 2008

Transaction ID: CN120208002702Ro

Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Laurie Michaels

Mailing Address 301 Commerce St, Ste 3300

City Fort Worth State TX Zip Code 76102-

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

Name of Employer Self employed Occupation Psychologist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 12 / 12 / 2008

Transaction ID: CN121208123714La

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Earmarked from Robert Glennon

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

25020090313

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 / 20
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
		<input type="checkbox"/> 11d
		<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Jeff Merkley for Oregon

A.	Full Name (Last, First, Middle Initial) Bricklayers and Allied Craftworkers PAC	Date of Receipt MM / DD / YYYY 12 / 12 / 2008
	Mailing Address 620 F Street NW	Transaction ID: CN121608094733Br
	City Washington State DC Zip Code 20004-	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C C00373423	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation	
	Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ debt retirement	Election Cycle-to-Date ▼ 5000.00

B.	Full Name (Last, First, Middle Initial) Democrats for America's Future	Date of Receipt MM / DD / YYYY 12 / 12 / 2008
	Mailing Address 3304 O'Donnell St	Transaction ID: CN121608094521De
	City Baltimore State MD Zip Code 21224-	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C C00404293	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation	
	Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ debt reduction - GOR	Election Cycle-to-Date ▼ 250.00

C.	Full Name (Last, First, Middle Initial) National Air Traffic Controllers PAC	Date of Receipt MM / DD / YYYY 12 / 12 / 2008
	Mailing Address 1325 Massachusetts Ave NW	Transaction ID: CN121608094615Na
	City Washington State DC Zip Code 20005-	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C C00238725	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation	
	Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ debt retirement	Election Cycle-to-Date ▼ 5000.00

SUBTOTAL of Receipts This Page (optional)	10250.00
TOTAL This Period (last page this line number only)	

29820090014

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

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

FOR LINE NUMBER: PAGE 8 / 20
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Jeff Merkley for Oregon

A. Full Name (Last, First, Middle Initial)
Qwest PAC
Mailing Address 607 14th St NW, Ste 950
City State Zip Code
Washington DC 20005-
FEC ID number of contributing federal political committee. **C** C00237156
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼
debt reduction -
GOB Election Cycle-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
12 / 27 / 2008
Transaction ID: CN123008104401Qw
Amount of Each Receipt this Period
2500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Human Rights Campaign
Mailing Address 1640 Rhode Island Ave NW
City State Zip Code
Washington DC 20036-
FEC ID number of contributing federal political committee. **C** C00235853
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼
Debt reduction -
GOB Election Cycle-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
12 / 27 / 2008
Transaction ID: CN123008104536Hu
Amount of Each Receipt this Period
5000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Comcast PAC
Mailing Address 2001 Pennsylvania Av NW
Suite 500
City State Zip Code
Washington DC 20006-
FEC ID number of contributing federal political committee. **C** C00248716
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼
debt reduction -
GOB Election Cycle-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
12 / 27 / 2008
Transaction ID: CN123008104655Co
Amount of Each Receipt this Period
5000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 12500.00
TOTAL This Period (last page this line number only) ▶

20020090015

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 20
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jeff Merkley for Oregon

A.

Full Name (Last, First, Middle Initial) MGM Mirage PAC	Date of Receipt MM / DD / YYYY 12 / 27 / 2008
Mailing Address 3260 Industrial Rd	Transaction ID: CN123008104819MG
City State Zip Code Las Vegas NV 89109-	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C C00299321	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation	
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ debt reduction - G08	Election Cycle-to-Date ▼ 1000.00

B.

Full Name (Last, First, Middle Initial) Nat'l Committee to Preserve Social Security	Date of Receipt MM / DD / YYYY 12 / 27 / 2008
Mailing Address 10 G St NE, Ste 600	Transaction ID: CN123008104940Na
City State Zip Code Washington DC 20002-	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C C00172296	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation	
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ debt reduction - G08	Election Cycle-to-Date ▼ 2000.00

SUBTOTAL of Receipts This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	25750.00

2 902 00 908 16

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 20			
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	
<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Jeff Merkley for Oregon

A.

Full Name (Last, First, Middle Initial)
Voices for a Senate Majority

Mailing Address 120 Maryland Ave. NE

City Washington State DC Zip Code 20002-

FEC ID number of contributing federal political committee. **C** C00452219

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 480.89

Date of Receipt 12 / 12 / 2008

Transaction ID: CN121208123536Vo

Amount of Each Receipt this Period 480.89

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Joint fundraising proceeds. All donors reported on Pre and Post primary reports. Final payment.

B.

Full Name (Last, First, Middle Initial)
Oregon Victory 2008

Mailing Address 2236 SE 10th Ave

City Portland State OR Zip Code 97214-

FEC ID number of contributing federal political committee. **C** C00453258

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 39200.00

Date of Receipt 11 / 28 / 2008

Transaction ID: CN120208005331Or

Amount of Each Receipt this Period 39200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Joint fundraising transfer - all donors listed on previous reports

SUBTOTAL of Receipts This Page (optional)	39680.89
TOTAL This Period (last page this line number only)	39680.89

2 9 0 2 0 9 9 0 8 1 7

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Jeff Merkley for Oregon

A.

Full Name (Last, First, Middle Initial)
Leah Barbaree

Mailing Address 1023 Ne Webster St.

City Portland State OR Zip Code 97211-

Purpose of Disbursement
Wages

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: EX011709071919Le
Date of Disbursement

12 / 16 / 2008

Amount of Each Disbursement this Period

1273.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Leah Barbaree

Mailing Address 1023 Ne Webster St.

City Portland State OR Zip Code 97211-

Purpose of Disbursement
Wages

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: EX011709072214Le
Date of Disbursement

12 / 31 / 2008

Amount of Each Disbursement this Period

1273.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
David Dickey-Griffith

Mailing Address 10221 SW Terwilliger Pl

City Portland State OR Zip Code 97219-

Purpose of Disbursement
Lost paycheck

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: EX121008145710Da
Date of Disbursement

12 / 10 / 2008

Amount of Each Disbursement this Period

566.27

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

3112.27

TOTAL This Period (last page this line number only)

2 9 9 2 0 0 9 0 8 1 8

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Jeff Merkley for Oregon

A.

Full Name (Last, First, Middle Initial)
Jon Isaacs

Mailing Address 2812 SE 52nd Ave

City Portland State OR Zip Code 97206-

Purpose of Disbursement
Win bonus

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼
debt retirement

State: District:

Transaction ID: EX011709071706Jo
Date of Disbursement

12 / 16 / 2008

Amount of Each Disbursement this Period

3704.17

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Jon Isaacs

Mailing Address 2812 SE 52nd Ave

City Portland State OR Zip Code 97206-

Purpose of Disbursement
Win bonus

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼
debt retirement

State: District:

Transaction ID: EX011709072320Jo
Date of Disbursement

12 / 31 / 2008

Amount of Each Disbursement this Period

3704.17

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
American Express

Mailing Address PO Box 53852

City Phoenix State AZ Zip Code 85072-

Purpose of Disbursement
Merchant fee

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: EX011709071603Am
Date of Disbursement

12 / 07 / 2008

Amount of Each Disbursement this Period

977.45

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

8385.79

TOTAL This Period (last page this line number only)

25020000010

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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)
Jeff Merkley for Oregon

A.

Full Name (Last, First, Middle Initial)
Capital Strategies

Mailing Address 2211 Corinth Ave, Ste 300

City Los Angeles State CA Zip Code 90064-

Purpose of Disbursement
fundraising consulting

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: EX121108123001Ca
Date of Disbursement

MM / DD / YYYY
12 / 04 / 2008

Amount of Each Disbursement this Period

7500.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Capital Strategies

Mailing Address 2211 Corinth Ave, Ste 300

City Los Angeles State CA Zip Code 90064-

Purpose of Disbursement
catering reimbursement

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: EX121208103205Ca
Date of Disbursement

MM / DD / YYYY
12 / 12 / 2008

Amount of Each Disbursement this Period

375.22

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

reimbursement: Glendon

C.

Full Name (Last, First, Middle Initial)
Costco Inc.

Mailing Address 999 Lake Drive

City Issaquah State WA Zip Code 98124-

Purpose of Disbursement
Holiday invitation

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Transaction ID: EX121908151855Co
Date of Disbursement

MM / DD / YYYY
12 / 19 / 2008

Amount of Each Disbursement this Period

446.27

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

8321.49

TOTAL This Period (last page this line number only)

2 6 9 2 6 9 9 9 2 6

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Jeff Merkley for Oregon

A.

Full Name (Last, First, Middle Initial)
Doug Fir

Transaction ID: EX121108123746Do
Date of Disbursement

Mailing Address 830 E Burnside

M M / D D / Y Y Y Y
12 / 04 / 2008

City Portland State OR Zip Code 97214-

Amount of Each Disbursement this Period

Purpose of Disbursement
Event catering

007
Category/ Type

1000.00

Candidate Name

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼
State: District:

B.

Full Name (Last, First, Middle Initial)
IRS/Oregon Treasury/TriMet/payroll taxes

Transaction ID: EX120208005526IR
Date of Disbursement

Mailing Address c/o Paychex
7650 SW Beveland St. #100

M M / D D / Y Y Y Y
11 / 28 / 2008

City Tigard State OR Zip Code 97223-

Amount of Each Disbursement this Period

Purpose of Disbursement
wages/worker benefit fund/trimet taxes

001
Category/ Type

11318.62

Candidate Name

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼
State: District:

C.

Full Name (Last, First, Middle Initial)
IRS/Oregon Treasury/TriMet/payroll taxes

Transaction ID: EX011709071951IR
Date of Disbursement

Mailing Address c/o Paychex
7650 SW Beveland St. #100

M M / D D / Y Y Y Y
12 / 16 / 2008

City Tigard State OR Zip Code 97223-

Amount of Each Disbursement this Period

Purpose of Disbursement
wages/worker benefit fund/trimet taxes

001
Category/ Type

2013.54

Candidate Name

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional)

14332.16

TOTAL This Period (last page this line number only)

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2008090321

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Jeff Merkley for Oregon

A.

Full Name (Last, First, Middle Initial)
Paychex, Inc.

Mailing Address 7650 SW Beveland St.

City Tigard State OR Zip Code 97223-

Purpose of Disbursement
Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

001
Category/
Type

Transaction ID: EX011709071122Pa
Date of Disbursement

12 / 10 / 2008

Amount of Each Disbursement this Period

130.09

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
U.S. Postmaster

Mailing Address Central Station

City Portland State OR Zip Code 97240-

Purpose of Disbursement
postage

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

001
Category/
Type

Transaction ID: EX121908152114U.
Date of Disbursement

12 / 19 / 2008

Amount of Each Disbursement this Period

756.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

886.09

TOTAL This Period (last page this line number only)

62991.82

2 9 9 2 0 0 9 9 3 2 3

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input checked="" type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Jeff Merkley for Oregon

A.

Full Name (Last, First, Middle Initial)
Habitat for Humanity Oregon

Mailing Address PO Box 11869

City Portland State OR Zip Code 97211-

Purpose of Disbursement
charitable contribution (Madoff contrib)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Transaction ID: EX121608103053Ha
Date of Disbursement
MM / DD / YYYY
12 / 15 / 2008

Amount of Each Disbursement this Period
2300.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

012
Category/
Type

SUBTOTAL of Disbursements This Page (optional)	2300.00
TOTAL This Period (last page this line number only)	2300.00

2 9 9 2 0 9 9 9 9 2 4

SCHEDULE C (FEC Form 3)

LOANS

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

FOR LINE NUMBER:
(check only one) 13a
 13b

NAME OF COMMITTEE (In Full)
Jeff Merkley for Oregon

Transaction ID: DBDbt05040812260308

LOAN SOURCE Full Name (Last, First, Middle Initial) Jeffrey Merkley	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1351 SE 114th	
City Portland State OR ZIP Code 97216-	

Original Amount of Loan 250000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 250000.00
--------------------------------------	------------------------------------	--

TERMS

Date Incurred M M 04 D D 21 Y Y Y Y 2008	Date Due None	Interest Rate 0 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---	------------------	----------------------------	---

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

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

SUBTOTALS This Period This Page (optional)	250000.00
TOTALS This Period (last page in this line only)	250000.00
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

200209090825

SCHEDULE D (FEC Form 3)

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

DEBTS AND OBLIGATIONS

FOR LINE NUMBER: 9 10

Excluding Loans

NAME OF COMMITTEE (In Full)
Jeff Merkley for Oregon

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jon Isaacs			Nature of Debt (Purpose): salary/bonus
Mailing Address 2812 SE 52nd Ave			
City Portland	State OR	ZIP Code 97206-	

Outstanding Balance Beginning This Period 40000.00		Transaction ID: DBDbt01310907570008	
Amount Incurred This Period 0.00	Payment This Period 13500.00	Outstanding Balance at Close of This Period 26500.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Beth Foster Consultants			Nature of Debt (Purpose): Consulting
Mailing Address 2102 W 49th			
City Minneapolis	State MN	ZIP Code 55419-	

Outstanding Balance Beginning This Period 18000.00		Transaction ID: DBDbt01310907562211	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 18000.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor C & E Systems			Nature of Debt (Purpose): FEC compliance
Mailing Address 2236 SE 10th Ave.			
City Portland	State OR	ZIP Code 97214-	

Outstanding Balance Beginning This Period 4756.02		Transaction ID: DBDbt01310907552808	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4756.02	

1) SUBTOTALS This Period This Page (optional).....	▶	49256.02
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL 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)	▶	

29920099926

SCHEDULE D (FEC Form 3)

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

DEBTS AND OBLIGATIONS

FOR LINE NUMBER: (check only one) 9 10

Excluding Loans

NAME OF COMMITTEE (In Full)
Jeff Merkley for Oregon

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Demos Political Consulting LLC		Nature of Debt (Purpose): consulting
Mailing Address 1046 Fontaine Rd #4		
City Lexington	State KY	ZIP Code 40502-

Outstanding Balance Beginning This Period	Transaction ID: DBDbt01310907542607	
31904.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	31904.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Dixon Davis Media Group		Nature of Debt (Purpose): media production
Mailing Address 1028 33rd St NW, Suite 300		
City Washington	State DC	ZIP Code 20007-

Outstanding Balance Beginning This Period	Transaction ID: DBDbt01310907515010	
181178.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	181178.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Integram Communications		Nature of Debt (Purpose): printing/mailing
Mailing Address 8421 Hilltop Rd		
City Fairfax	State VA	ZIP Code 22031-

Outstanding Balance Beginning This Period	Transaction ID: DBDbt01310907495609	
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
2571.75	0.00	2571.75

1) SUBTOTALS This Period This Page (optional).....	215653.75
2) TOTALS This Period (last page this line number only).....	264909.77
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	250000.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	514909.77

20020090827

Senate



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United States Senate Post Office



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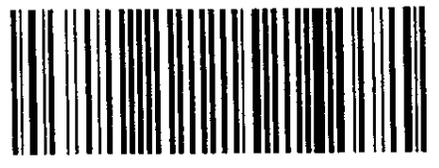
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Restrictions/restrictions Mail Manual (MMM)

CERTIFIED MAIL



PS Form 3800, 10/01

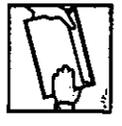
Enter strip to area right hand corner.

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United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

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01-31-09

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SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

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UPS _____

DHL _____

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Date of Receipt

POSTMARK ILLEGIBLE

NO POSTMARK

FAX _____

Date of Receipt

OTHER _____

Date of Receipt or Postmark

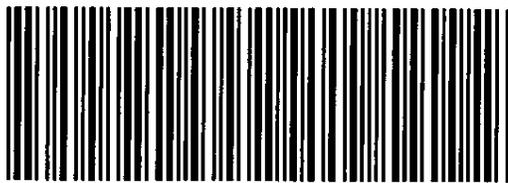
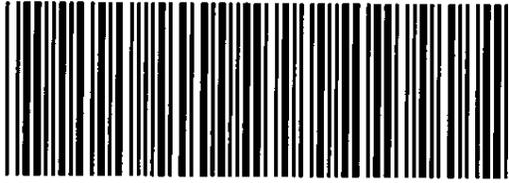
PREPARER

RD

DATE PREPARED

02-05-09

29020090829



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