

Right to Life/Oregon PAC

4335 River Road N

Salem

OR

97303

FEC ID No. C00141572

☒ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 1 / 2

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Right to Life/Oregon PAC

FEC IDENTIFICATION NUMBER

C C00141572

Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

Gateway Communications

Date

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Amount

7500.00

City

Portland

State

OR

Zip Code

97230

Purpose of Expenditure

Estimate Get out the
vote callsCategory/
Type

005

Office Sought: ☒ House

State: OR

☐ Senate

District: 05

☐ PresidentialCheck One: ☒ Support☐ OpposeDisbursement For: ☐ Primary☒ General 2010☐ Other (specify) : _____

Transaction ID: SE.8693

Calendar Year-To-Date Per Election

35669.22

for Office Sought

Full Name (Last, First, Middle, Initial) of Payee

Gateway Communications

Date

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Amount

7500.00

City

Portland

State

OR

Zip Code

97230

Purpose of Expenditure

Estimate get out the
vote callsCategory/
Type

005

Office Sought: ☒ House

State: OR

☐ Senate

District: 01

☐ PresidentialCheck One: ☒ Support☐ OpposeDisbursement For: ☐ Primary☒ General 2010☐ Other (specify) : _____

Transaction ID: SE.8694

Calendar Year-To-Date Per Election

29514.36

for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures

15000.00

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mrs. Gayle Atteberry

Signature

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 2 / 2

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
Right to Life/Oregon PAC

FEC IDENTIFICATION NUMBER

C C00141572

Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

US Post Office

Date

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount

370.48

City State Zip Code
Salem OR 97301Purpose of Expenditure
PostageCategory/
Type 006Office Sought: ☒ House State: OR
☐ Senate District: 05
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
LORENTZ 'SCOTT' Scott BRUUNDisbursement For: ☐ Primary ☒ General 2010☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 28169.22

Transaction ID: SE.8691

Full Name (Last, First, Middle, Initial) of Payee
US Post Office

Date

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount

337.07

City State Zip Code
Salem OR 97301Purpose of Expenditure
PostageCategory/
Type 007Office Sought: ☒ House State: OR
☐ Senate District: 01
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
ROBERT CORNILLESDisbursement For: ☐ Primary ☒ General 2010☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 22014.36

Transaction ID: SE.8692

(a) SUBTOTAL of Itemized Independent Expenditures

707.55

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures

15707.55

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mrs. Gayle Atteberry

Signature

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0