

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) PO Box 25406 Check if different than previously reported. (ACC) Portland OR 97298

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

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Report for the: Post-Election, General, Runoff, Special

5. Covering Period 06 01 2008 through 06 30 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 Dennis Morgan Signature of Treasurer Electronically Filed by Dennis Morgan Date 06 01 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.

Office Use Only FE6AN026 FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

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	8

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	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>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		7182.41
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	25443.26									
(c) Total Receipts (from Line 19)	85483.24	430264.70								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	110926.50	437447.11								
7. Total Disbursements (from Line 31)	65643.00	392163.61								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	45283.50	45283.50								
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)	251820.92									

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	8

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

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	15645.00	59115.00
(i) Itemized (use Schedule A)	24311.00	99453.60
(ii) Unitemized	39956.00	158568.60
(iii) TOTAL (add Lines 11(a)(i) and (ii) ▶	0.00	0.00
(b) Political Party Committees	0.00	11000.00
(c) Other Political Committees (such as PACs)	0.00	169568.60
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ▶	19000.00	143456.53
12. Transfers From Affiliated/Other Party Committees	0.00	40000.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	19221.99
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	118.75
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	26527.24	57898.83
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	26527.24	57898.83
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	85483.24	430264.70
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	58956.00	372365.87

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.....	8764.31	50257.07
(ii) Non-Federal Share.....	15580.99	89345.81
(b) Other Federal Operating Expenditures.....	23343.56	80691.66
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	47688.86	220294.54
22. Transfers to Affiliated/Other Party Committees.....	0.00	10287.72
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	1600.00	1600.00
(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))	1600.00	1600.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	16354.14	159981.35
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	16354.14	159981.35
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	65643.00	392163.61
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	50062.01	302817.80

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)	39956.00	169568.60
34. Total Contribution Refunds (from Line 28(d))	1600.00	1600.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	38356.00	167968.60
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	32107.87	130948.73
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	19221.99
38. Net Operating Expenditures (subtract Line 37 from Line 36)	32107.87	111726.74

Form/Schedule : **F3XA**

Transaction ID :

Memo: Note that on Schedule D, expense reimbursement payments in the amounts of \$856.37 to Carley Dillon, \$339.80 to Brianne Hyder, \$1,230 to Stacy Thomsen and a \$1,000 payment towards Discover Card debt are properly reflected in the Outstanding Balance at Close of This Period box, but, not in the Payment This Period box. The balance at the end of the period is correct. The Committees software contains an error that affects the proper disclosure of payments against debt when those payments require memo entries on Schedule B or H4. The Committee is working with the software vendor to resolve this issue.

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..... (Use Schedule L-A)	0.00	0.00
b. Unitemized.....	0.00	0.00
c. Total.....	0.00	0.00
2. OTHER RECEIPTS.....	0.00	3636.50
3. TOTAL RECEIPTS..... (Add Lines 1c and 2)	0.00	3636.50
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
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	3636.50
6. TOTAL DISBURSEMENTS..... (Add Lines 4e and 5)	0.00	3636.50
7. BEGINNING CASH ON HAND..... (for Column B, use cash as of January 1st)	3636.50	3636.50
8. RECEIPTS..... (from Line 3)	0.00	3636.50
9. SUBTOTAL..... (Add Lines 7 and 8)	3636.50	7273.00
10. DISBURSEMENTS..... (From Line 6)	0.00	3636.50
11. ENDING CASH ON HAND..... (Subtract Line 10 From Line 9)	3636.50	3636.50

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 76

(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)
Wayne Brady

Mailing Address 4742 Liberty Rd South PMB 280

City Salem State OR Zip Code 97302-5000

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 ▼ 210.00

Date of Receipt 06 / 02 / 2008

Transaction ID: 90219.C95786

Amount of Each Receipt this Period 50.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Wayne Brady

Mailing Address 4742 Liberty Rd South PMB 280

City Salem State OR Zip Code 97302-5000

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 ▼ 240.00

Date of Receipt 06 / 04 / 2008

Transaction ID: 90219.C96223

Amount of Each Receipt this Period 30.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Stephan A. Brodhead

Mailing Address 7456 SW Baseline Road, PMB 110

City Hillsboro State OR Zip Code 97123

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 ▼ 155.00

Date of Receipt 06 / 02 / 2008

Transaction ID: 90219.C95780

Amount of Each Receipt this Period 50.00

Receipt

SUBTOTAL of Receipts This Page (optional) 130.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 76
	<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) Stephan A. Brodhead		Date of Receipt
	Mailing Address 7456 SW Baseline Road, PMB 110		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 13 / 2008
	City Hillsboro	State OR	Zip Code 97123
	FEC ID number of contributing federal political committee. C		Transaction ID: 90219.C96337
	Amount of Each Receipt this Period		<input type="text"/> 50.00
Name of Employer Retired		Occupation Retired	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 205.00	

B.	Full Name (Last, First, Middle Initial) Rozelyn Brown		Date of Receipt
	Mailing Address 787 Airport Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 04 / 2008
	City Cave Junction	State OR	Zip Code 97523
	FEC ID number of contributing federal political committee. C		Transaction ID: 90219.C96207
	Amount of Each Receipt this Period		<input type="text"/> 270.00
Name of Employer Self		Occupation Consultant	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 270.00	

C.	Full Name (Last, First, Middle Initial) Rozelyn Brown		Date of Receipt
	Mailing Address 787 Airport Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 13 / 2008
	City Cave Junction	State OR	Zip Code 97523
	FEC ID number of contributing federal political committee. C		Transaction ID: 90219.C96311
	Amount of Each Receipt this Period		<input type="text"/> 50.00
Name of Employer Self		Occupation Consultant	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 320.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 370.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 76
(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)
Donna Cain

Mailing Address 6580 E Evans Creek Rd

City State Zip Code
Rogue River OR 97537-9605

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
06 / 02 / 2008

Transaction ID: 90219.C95785

Amount of Each Receipt this Period
50.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Esther Conklin

Mailing Address 14270 NW Jackson School Rd

City State Zip Code
North Plains OR 97133-8363

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

Name of Employer Occupation
Self Shadybrook Lumber

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
06 / 17 / 2008

Transaction ID: 90219.C96119

Amount of Each Receipt this Period
250.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Charlene A. Crocker

Mailing Address 4081 Alderbrook Ave SE

City State Zip Code
Salem OR 97302-3847

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
06 / 11 / 2008

Transaction ID: 90219.C95949

Amount of Each Receipt this Period
25.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **325.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 76
	<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) Charlene A. Crocker		Date of Receipt
	Mailing Address 4081 Alderbrook Ave SE		<input type="text" value="06"/> / <input type="text" value="17"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Salem	OR	97302-3847
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Homemaker		Occupation Homemaker	Transaction ID: 90219.C96349
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="215.00"/>	<input type="text" value="5.00"/>
Receipt			

B.	Full Name (Last, First, Middle Initial) William Curtright		Date of Receipt
	Mailing Address PO Box 1350		<input type="text" value="06"/> / <input type="text" value="04"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Jefferson	OR	97352-1350
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Ames Research Laboratories		Occupation CEO	Transaction ID: 90219.C96183
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="135.00"/>	<input type="text" value="135.00"/>
Receipt			

C.	Full Name (Last, First, Middle Initial) William Curtright		Date of Receipt
	Mailing Address PO Box 1350		<input type="text" value="06"/> / <input type="text" value="17"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Jefferson	OR	97352-1350
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Ames Research Laboratories		Occupation CEO	Transaction ID: 90219.C96347
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="185.00"/>	<input type="text" value="50.00"/>
Receipt			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="190.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 76
(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)
William Curtright

Mailing Address PO Box 1350

City State Zip Code
Jefferson OR 97352-1350

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

Name of Employer Occupation
Ames Research Laboratories CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
2685.00

Date of Receipt
MM / DD / YYYY
06 / 19 / 2008

Transaction ID: 90219.C96362

Amount of Each Receipt this Period
2500.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Vance Day

Mailing Address PO Box 546

City State Zip Code
Salem OR 97308-0546

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

Name of Employer Occupation
Adams, Day, Hill Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
MM / DD / YYYY
06 / 05 / 2008

Transaction ID: 90219.C96237

Amount of Each Receipt this Period
195.00

Receipt

C.

Full Name (Last, First, Middle Initial)
David Eaton

Mailing Address 1507 SE Riviera Dr., PO Box 5934

City State Zip Code
Bend OR 97708

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

Name of Employer Occupation
ProDx Computer programmer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
06 / 19 / 2008

Transaction ID: 90219.C96357

Amount of Each Receipt this Period
500.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **3195.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 76
	<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) Andrew Ferguson		Date of Receipt
	Mailing Address 1188 Cherry Circle		<input type="text" value="06"/> / <input type="text" value="19"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Lake Oswego	OR	97034-6209
	FEC ID number of contributing federal political committee. C		Transaction ID: 90219.C96359
Name of Employer Self Employed		Occupation Businessman	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="500.00"/>
		<input type="text" value="500.00"/>	Receipt

B.	Full Name (Last, First, Middle Initial) Kerry Ferguson		Date of Receipt
	Mailing Address 2588 Ridgmont Drive		<input type="text" value="06"/> / <input type="text" value="13"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Eugene	OR	97405
	FEC ID number of contributing federal political committee. C		Transaction ID: 90219.C96289
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="50.00"/>
		<input type="text" value="280.00"/>	Receipt

C.	Full Name (Last, First, Middle Initial) Bonnie J. Ford		Date of Receipt
	Mailing Address PO Box 1183		<input type="text" value="06"/> / <input type="text" value="19"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Roseburg	OR	97470
	FEC ID number of contributing federal political committee. C		Transaction ID: 90219.C96133
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="250.00"/>
		<input type="text" value="450.00"/>	Receipt

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="800.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 14 / 76
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
William Gander
 Mailing Address 5240 SE 82nd Ave.
 City Portland State OR Zip Code 97266
 Date of Receipt 06 / 19 / 2008
 Transaction ID: 90219.C96363
 Amount of Each Receipt this Period 2500.00
 Receipt
 FEC ID number of contributing federal political committee. C
 Name of Employer Standard TV & Appliance Occupation Business Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

B. Full Name (Last, First, Middle Initial)
Fred Granum
 Mailing Address 13585 NW Lariat Court
 City Portland State OR Zip Code 97229
 Date of Receipt 06 / 19 / 2008
 Transaction ID: 90219.C96354
 Amount of Each Receipt this Period 500.00
 Receipt
 FEC ID number of contributing federal political committee. C
 Name of Employer Co-Operations, Inc. Occupation Chief Operating Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

C. Full Name (Last, First, Middle Initial)
June Hartley
 Mailing Address PO Box 2643
3149 Shay Way
 City Nyssa State OR Zip Code 97913-0643
 Date of Receipt 06 / 09 / 2008
 Transaction ID: 90219.C96268
 Amount of Each Receipt this Period 125.00
 Receipt
 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 ▼ 225.00

SUBTOTAL of Receipts This Page (optional) ► 3125.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 76
(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)
Linda Hellenthal

Mailing Address 10190 N. Umpqua Hwy

City State Zip Code
Roseburg OR 97470-7947

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

Name of Employer Occupation
D. Sutton, DDS Dental Hygienist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
MM / DD / YYYY
06 / 04 / 2008

Transaction ID: 90219.C96212

Amount of Each Receipt this Period
270.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Cari Herber

Mailing Address 8640 SE Causey Ave Apt. V105

City State Zip Code
Portland OR 97086-8557

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

Name of Employer Occupation
Landcorp Construction Office Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
MM / DD / YYYY
06 / 04 / 2008

Transaction ID: 90219.C96217

Amount of Each Receipt this Period
125.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Pii S. Hwang

Mailing Address 2661 NW 128th Court

City State Zip Code
Portland OR 97229

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

Name of Employer Occupation
Phillips and Company financial advisor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
06 / 25 / 2008

Transaction ID: 90219.C96365

Amount of Each Receipt this Period
500.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **895.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 76
(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)
Jamie Jackson

Mailing Address 496 13th St NE

City Salem State OR Zip Code 97301-2650

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 ▼ 100.00

Date of Receipt: 06 / 05 / 2008
Transaction ID: 90219.C96255
Amount of Each Receipt this Period: 100.00
Receipt

B.

Full Name (Last, First, Middle Initial)
Jamie Jackson

Mailing Address 496 13th St NE

City Salem State OR Zip Code 97301-2650

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 ▼ 235.00

Date of Receipt: 06 / 09 / 2008
Transaction ID: 90219.C96262
Amount of Each Receipt this Period: 135.00
Receipt

C.

Full Name (Last, First, Middle Initial)
Jamie Jackson

Mailing Address 496 13th St NE

City Salem State OR Zip Code 97301-2650

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 ▼ 285.00

Date of Receipt: 06 / 13 / 2008
Transaction ID: 90219.C96313
Amount of Each Receipt this Period: 50.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 285.00

TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 17 / 76
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Anthony Lopez

Mailing Address 4145 Rice Valley Road

City State Zip Code
Oakland OR 97462

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

Name of Employer Self Occupation Real Estate Investor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 06 / 13 / 2008
Transaction ID: 90219.C96287
Amount of Each Receipt this Period: 50.00
Receipt

B. Full Name (Last, First, Middle Initial)
Warren Merz

Mailing Address 4020 Little Applegate Rd

City State Zip Code
Jacksonville OR 97530-9303

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 ▼ 120.00

Date of Receipt: 06 / 03 / 2008
Transaction ID: 90219.C95798
Amount of Each Receipt this Period: 80.00
Receipt

C. Full Name (Last, First, Middle Initial)
Warren Merz

Mailing Address 4020 Little Applegate Rd

City State Zip Code
Jacksonville OR 97530-9303

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 ▼ 255.00

Date of Receipt: 06 / 04 / 2008
Transaction ID: 90219.C96187
Amount of Each Receipt this Period: 135.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 265.00

TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 76
	<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) Warren Merz	Date of Receipt MM / DD / YYYY 06 / 04 / 2008
	Mailing Address 4020 Little Applegate Rd	Transaction ID: 90219.C96189
	City State Zip Code Jacksonville OR 97530-9303	Amount of Each Receipt this Period 55.00
	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 310.00	

B.	Full Name (Last, First, Middle Initial) Warren Merz	Date of Receipt MM / DD / YYYY 06 / 04 / 2008
	Mailing Address 4020 Little Applegate Rd	Transaction ID: 90219.C96186
	City State Zip Code Jacksonville OR 97530-9303	Amount of Each Receipt this Period 55.00
	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 365.00	

C.	Full Name (Last, First, Middle Initial) Dennis Morgan	Date of Receipt MM / DD / YYYY 06 / 04 / 2008
	Mailing Address 36249 Peel Ln	Transaction ID: 90219.C96204
	City State Zip Code Springfield OR 97478-9772	Amount of Each Receipt this Period 135.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Forest Products Research Lab Occupation Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 135.00	

SUBTOTAL of Receipts This Page (optional)	245.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 76
	<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) Dennis Morgan	Date of Receipt MM / DD / YYYY 06 / 19 / 2008
	Mailing Address 36249 Peel Ln	Transaction ID: 90219.C96358
	City State Zip Code Springfield OR 97478-9772	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer: Forest Products Research Lab Occupation: Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 635.00	

B.	Full Name (Last, First, Middle Initial) Tari Morse	Date of Receipt MM / DD / YYYY 06 / 11 / 2008
	Mailing Address 33080 SE Peoria Rd	Transaction ID: 90219.C95936
	City State Zip Code Corvallis OR 97333-2543	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer: Information Requested Occupation: Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Tim Nashif	Date of Receipt MM / DD / YYYY 06 / 13 / 2008
	Mailing Address 4035 NE 91st Ave	Transaction ID: 90219.C96294
	City State Zip Code Portland OR 97220-5052	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer: Gateway Communications Occupation: CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 50.00	

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 76
(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) Tim Nashif		Date of Receipt MM / DD / YYYY 06 / 19 / 2008
Mailing Address 4035 NE 91st Ave		Transaction ID: 90219.C96360
City Portland	State OR	Zip Code 97220-5052
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Gateway Communications	Occupation CEO	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

B.

Full Name (Last, First, Middle Initial) Robert Neighbor		Date of Receipt MM / DD / YYYY 06 / 16 / 2008
Mailing Address 2130 SW Jefferson St Ste 315		Transaction ID: 90219.C96087
City Portland	State OR	Zip Code 97201-7711
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer RW Neighbor and Co.	Occupation Insurance Agent	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

C.

Full Name (Last, First, Middle Initial) John Newhouse		Date of Receipt MM / DD / YYYY 06 / 05 / 2008
Mailing Address 1120 SW 1st St		Transaction ID: 90219.C96253
City Dundee	State OR	Zip Code 97115-9502
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 130.00
Name of Employer Self	Occupation Pilot	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 145.00	

SUBTOTAL of Receipts This Page (optional)	1130.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 76
	<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) John Newhouse		Date of Receipt
	Mailing Address 1120 SW 1st St		<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 / 09 / 2008
	City	State	Zip Code
	Dundee	OR	97115-9502
	FEC ID number of contributing federal political committee. C		Transaction ID: 90219.C96263
Name of Employer Self		Occupation Pilot	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 100.00
		<input type="text"/> 245.00	Receipt

B.	Full Name (Last, First, Middle Initial) Helen Scott		Date of Receipt
	Mailing Address 346 Bickford Dr		<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 / 04 / 2008
	City	State	Zip Code
	Grants Pass	OR	97527-9603
	FEC ID number of contributing federal political committee. C		Transaction ID: 90219.C96228
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 220.00
		<input type="text"/> 220.00	Receipt

C.	Full Name (Last, First, Middle Initial) Sarah Seale		Date of Receipt
	Mailing Address 12691 SE 137th Dr		<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 / 05 / 2008
	City	State	Zip Code
	Clackamas	OR	97086-5875
	FEC ID number of contributing federal political committee. C		Transaction ID: 90219.C96236
Name of Employer Providence Medical Center		Occupation Registered Nurse	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00
		<input type="text"/> 450.00	Receipt

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 370.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 76
(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)
Marylin Shannon

Mailing Address 7955 Portland Rd NE

City State Zip Code
Brooks OR 97305-9401

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 ▼ 415.00

Date of Receipt
MM / DD / YYYY
06 / 03 / 2008

Transaction ID: 90219.C95805

Amount of Each Receipt this Period
125.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Marylin Shannon

Mailing Address 7955 Portland Rd NE

City State Zip Code
Brooks OR 97305-9401

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 ▼ 440.00

Date of Receipt
MM / DD / YYYY
06 / 04 / 2008

Transaction ID: 90219.C96222

Amount of Each Receipt this Period
25.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Marylin Shannon

Mailing Address 7955 Portland Rd NE

City State Zip Code
Brooks OR 97305-9401

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 ▼ 575.00

Date of Receipt
MM / DD / YYYY
06 / 09 / 2008

Transaction ID: 90219.C96269

Amount of Each Receipt this Period
135.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 285.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 76
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

<p>A. Full Name (Last, First, Middle Initial) Marylin Shannon</p> <p>Mailing Address 7955 Portland Rd NE</p> <p>City State Zip Code Brooks OR 97305-9401</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired Occupation Retired</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 625.00</p>	<p>Date of Receipt 06 / 13 / 2008</p> <p>Transaction ID: 90219.C96307</p> <p>Amount of Each Receipt this Period 50.00</p> <p>Receipt</p>
--	---

<p>B. Full Name (Last, First, Middle Initial) Elaine Smith</p> <p>Mailing Address 30597 N. River Road</p> <p>City State Zip Code Prairie City OR 97869</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired Occupation Retired</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 300.00</p>	<p>Date of Receipt 06 / 13 / 2008</p> <p>Transaction ID: 90219.C96293</p> <p>Amount of Each Receipt this Period 50.00</p> <p>Receipt</p>
--	---

<p>C. Full Name (Last, First, Middle Initial) Peter Stott</p> <p>Mailing Address 2896 SW Patton Road</p> <p>City State Zip Code Portland OR 97204-3701</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Crown Pacific Occupation President & CEO</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 500.00</p>	<p>Date of Receipt 06 / 11 / 2008</p> <p>Transaction ID: 90219.C96276</p> <p>Amount of Each Receipt this Period 500.00</p> <p>Receipt</p>
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SUBTOTAL of Receipts This Page (optional)	600.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 24 / 76
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Nancy Stout

Mailing Address 1425 NE Sommer Drive

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 ▼ 135.00

Date of Receipt: 06 / 03 / 2008
Transaction ID: 90219.C95815
Amount of Each Receipt this Period: 135.00
Receipt

B. Full Name (Last, First, Middle Initial)
Nancy Stout

Mailing Address 1425 NE Sommer Drive

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 ▼ 270.00

Date of Receipt: 06 / 03 / 2008
Transaction ID: 90219.C95814
Amount of Each Receipt this Period: 135.00
Receipt

C. Full Name (Last, First, Middle Initial)
Nancy Stout

Mailing Address 1425 NE Sommer Drive

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 ▼ 320.00

Date of Receipt: 06 / 13 / 2008
Transaction ID: 90219.C96304
Amount of Each Receipt this Period: 50.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **320.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 76
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Nancy Stout

Mailing Address 1425 NE Sommer Drive

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 ▼ 370.00

Date of Receipt: 06 / 13 / 2008
Transaction ID: 90219.C96302
Amount of Each Receipt this Period: 50.00
Receipt

B. Full Name (Last, First, Middle Initial)
Nancy Stout

Mailing Address 1425 NE Sommer Drive

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 ▼ 420.00

Date of Receipt: 06 / 13 / 2008
Transaction ID: 90219.C96303
Amount of Each Receipt this Period: 50.00
Receipt

C. Full Name (Last, First, Middle Initial)
Karl Thatcher

Mailing Address 1724 Chemawa Rd. NE

City Keizer State OR Zip Code 97303

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

Name of Employer Highway Specialties Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 06 / 19 / 2008
Transaction ID: 90219.C96355
Amount of Each Receipt this Period: 500.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ 600.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 76
(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)
Karl Thatcher

Mailing Address 1724 Chemawa Rd. NE

City State Zip Code
Keizer OR 97303

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Highway Specialties President

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 9 / 2 0 0 8

Transaction ID: 90219.C96356

Amount of Each Receipt this Period

500.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Dennis Tooley

Mailing Address 2440 NW Williams Loop

City State Zip Code
Redmond OR 97756-9198

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 ▼
285.00

Date of Receipt

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

Transaction ID: 90219.C96214

Amount of Each Receipt this Period

185.00

Receipt

C.

Full Name (Last, First, Middle Initial)
J. Williamson

Mailing Address 233 Rogue River Highway No. 271

City State Zip Code
Grants Pass OR 97527-5429

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
135.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 3 / 2 0 0 8

Transaction ID: 90219.C95804

Amount of Each Receipt this Period

135.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶

820.00

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

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

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

FOR LINE NUMBER: PAGE 27 / 76
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
J. Williamson

Mailing Address 233 Rogue River Highway No. 271

City Grants Pass State OR Zip Code 97527-5429

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 ▼ 270.00

Date of Receipt 06 / 03 / 2008
Transaction ID: 90219.C95813
Amount of Each Receipt this Period 135.00
Receipt

B. Full Name (Last, First, Middle Initial)
J. Williamson

Mailing Address 233 Rogue River Highway No. 271

City Grants Pass State OR Zip Code 97527-5429

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 ▼ 405.00

Date of Receipt 06 / 03 / 2008
Transaction ID: 90219.C95800
Amount of Each Receipt this Period 135.00
Receipt

C. Full Name (Last, First, Middle Initial)
J. Williamson

Mailing Address 233 Rogue River Highway No. 271

City Grants Pass State OR Zip Code 97527-5429

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 ▼ 540.00

Date of Receipt 06 / 03 / 2008
Transaction ID: 90219.C95803
Amount of Each Receipt this Period 135.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ 405.00

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

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

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

FOR LINE NUMBER: PAGE 28 / 76
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
J. Williamson
 Mailing Address 233 Rogue River Highway No. 271
 City Grants Pass State OR Zip Code 97527-5429
 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 ▼ 675.00
 Date of Receipt 06 / 03 / 2008
Transaction ID: 90219.C95801
 Amount of Each Receipt this Period 135.00
 Receipt

B. Full Name (Last, First, Middle Initial)
J. Williamson
 Mailing Address 233 Rogue River Highway No. 271
 City Grants Pass State OR Zip Code 97527-5429
 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 ▼ 810.00
 Date of Receipt 06 / 03 / 2008
Transaction ID: 90219.C95802
 Amount of Each Receipt this Period 135.00
 Receipt

C. Full Name (Last, First, Middle Initial)
Greg Wooldridge
 Mailing Address 1221 SW 10th Avenue, #1210
 City Portland State OR Zip Code 97205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Federal Express Occupation Flight Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00
 Date of Receipt 06 / 05 / 2008
Transaction ID: 90219.C96241
 Amount of Each Receipt this Period 270.00
 Receipt

SUBTOTAL of Receipts This Page (optional) ► 540.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 29 / 76
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
Greg Wooldridge

Mailing Address 1221 SW 10th Avenue, #1210

City State Zip Code
Portland OR 97205

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

Name of Employer Occupation
Federal Express Flight Engineer

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	3	/	2	0	0	8

Transaction ID: 90219.C96328

Amount of Each Receipt this Period
50.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	50.00
TOTAL This Period (last page this line number only)	▶	15645.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 30 / 76
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" 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) Republican National Committee		Date of Receipt
	Mailing Address 310 First St SE		<input type="text" value="06"/> / <input type="text" value="11"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Washington	DC	20003-
	FEC ID number of contributing federal political committee.		Transaction ID: 90219.C96275
	<input type="text" value="C"/> <input type="text" value="C00003418"/>		Amount of Each Receipt this Period
Name of Employer		Occupation	<input type="text" value="19000.00"/>
Receipt For:		Aggregate Year-to-Date ▼	Transfers From Affil./Auth.
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="19000.00"/>	
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="19000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="19000.00"/>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) Key Bank	Transaction ID: 90219.E14039 Date of Disbursement 06 / 10 / 2008
	Mailing Address PO Box 22114	Amount of Each Disbursement this Period 220.64
	City Albany State NY Zip Code 12201-	
	Purpose of Disbursement Bank Fees 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 FEES

B.	Full Name (Last, First, Middle Initial) Benson Hotel	Transaction ID: 90219.E13862 Date of Disbursement 06 / 04 / 2008
	Mailing Address 309 SW Broadway	Amount of Each Disbursement this Period 671.64
	City Portland State OR Zip Code 97205-3725	
	Purpose of Disbursement Facility Rental - OR GOP 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) ▼
		FACILITY RENTAL - OR GOP

C.	Full Name (Last, First, Middle Initial) Carley Dillon	Transaction ID: 90219.E13840 Date of Disbursement 06 / 03 / 2008
	Mailing Address 14511 Pfeifer Dr	Amount of Each Disbursement this Period 856.37
	City Lake Oswego State OR Zip Code 97035-2419	
	Purpose of Disbursement Reimbursement--See below 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) ▼
		REIMBURSEMENT--SEE BELOW

SUBTOTAL of Disbursements This Page (optional)	▶	1748.65
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 32 / 76

<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

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

A.	Full Name (Last, First, Middle Initial) Costco Tigard	Transaction ID: 90219.E13894 Date of Disbursement 06 / 03 / 2008
	Mailing Address 7855 SW Dartmouth Rd	Amount of Each Disbursement this Period 578.98
	City Tigard State OR Zip Code 97223-8401	
	Purpose of Disbursement Food	[MEMO ITEM] MEMO: FOOD
	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.	Full Name (Last, First, Middle Initial) Costco Tigard	Transaction ID: 90219.E13895 Date of Disbursement 06 / 03 / 2008
	Mailing Address 7855 SW Dartmouth Rd	Amount of Each Disbursement this Period 47.50
	City Tigard State OR Zip Code 97223-8401	
	Purpose of Disbursement Food	[MEMO ITEM] MEMO: FOOD
	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.	Full Name (Last, First, Middle Initial) Carley Dillon	Transaction ID: 90219.E13888 Date of Disbursement 06 / 09 / 2008
	Mailing Address 14511 Pfeifer Dr	Amount of Each Disbursement this Period 43.50
	City Lake Oswego State OR Zip Code 97035-2419	
	Purpose of Disbursement Food - OR GOP	FOOD - OR GOP
	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)	▶	43.50
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 33 / 76

<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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Direct Mail Systems, Inc</p> <p>Mailing Address 12450 Automobile Boulevard</p> <p>City Clearwater State FL Zip Code 34622-</p> <p>Purpose of Disbursement List rental - OR GOP</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90219.E13832</p> <p>Date of Disbursement 06 / 03 / 2008</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>LIST RENTAL - OR GOP</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Direct Mail Systems, Inc</p> <p>Mailing Address 12450 Automobile Boulevard</p> <p>City Clearwater State FL Zip Code 34622-</p> <p>Purpose of Disbursement List rental - OR GOP</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90219.E13925</p> <p>Date of Disbursement 06 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>LIST RENTAL - OR GOP</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Direct Mail Systems, Inc</p> <p>Mailing Address 12450 Automobile Boulevard</p> <p>City Clearwater State FL Zip Code 34622-</p> <p>Purpose of Disbursement List rental - OR GOP</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90219.E13927</p> <p>Date of Disbursement 06 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 3715.76</p> <p>LIST RENTAL - OR GOP</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4215.76

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

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

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

FOR LINE NUMBER: (check only one)

<input 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) FLS Connect	Transaction ID: 90219.E13877 Date of Disbursement
	Mailing Address 7320 N Dreamy Draw Dr	<input type="text" value="06"/> <input type="text" value="09"/> / <input type="text" value="2008"/>
	City Phoenix State AZ Zip Code 85020-5212	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraising Phone Calls - OR GOP	<input type="text" value="620.00"/>
	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) ▼
		FUNDRAISING PHONE CALLS - OR GOP

B.	Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: 90219.E13875 Date of Disbursement
	Mailing Address 7320 N Dreamy Draw Dr	<input type="text" value="06"/> <input type="text" value="09"/> / <input type="text" value="2008"/>
	City Phoenix State AZ Zip Code 85020-5212	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraising Phone Calls - OR GOP	<input type="text" value="125.00"/>
	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) ▼
		FUNDRAISING PHONE CALLS - OR GOP

C.	Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: 90219.E13876 Date of Disbursement
	Mailing Address 7320 N Dreamy Draw Dr	<input type="text" value="06"/> <input type="text" value="09"/> / <input type="text" value="2008"/>
	City Phoenix State AZ Zip Code 85020-5212	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraising Phone Calls - OR GOP	<input type="text" value="1956.00"/>
	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) ▼
		FUNDRAISING PHONE CALLS - OR GOP

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2701.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) FLS Connect</p> <p>Mailing Address 7320 N Dreamy Draw Dr</p> <p>City Phoenix State AZ Zip Code 85020-5212</p> <p>Purpose of Disbursement Fundraising Phone Calls - OR GOP</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90219.E13933</p> <p>Date of Disbursement MM / DD / YYYY 06 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 4716.00</p> <p>Category/Type FUNDRAISING PHONE CALLS - OR GOP</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) FLS Connect</p> <p>Mailing Address 7320 N Dreamy Draw Dr</p> <p>City Phoenix State AZ Zip Code 85020-5212</p> <p>Purpose of Disbursement Fundraising Phone Calls - OR GOP</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90219.E13931</p> <p>Date of Disbursement MM / DD / YYYY 06 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 2005.00</p> <p>Category/Type FUNDRAISING PHONE CALLS - OR GOP</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) FLS Connect</p> <p>Mailing Address 7320 N Dreamy Draw Dr</p> <p>City Phoenix State AZ Zip Code 85020-5212</p> <p>Purpose of Disbursement Fundraising Phone Calls - OR GOP</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90219.E13929</p> <p>Date of Disbursement MM / DD / YYYY 06 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 240.00</p> <p>Category/Type FUNDRAISING PHONE CALLS - OR GOP</p>

SUBTOTAL of Disbursements This Page (optional) ▶

6961.00

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)

<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) FLS Connect	Transaction ID: 90219.E13939 Date of Disbursement
	Mailing Address 7320 N Dreamy Draw Dr	<input type="text" value="06"/> / <input type="text" value="27"/> / <input type="text" value="2008"/>
	City Phoenix State AZ Zip Code 85020-5212	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraising Phone Calls - OR GOP	<input type="text" value="680.00"/>
	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) ▼
		FUNDRAISING PHONE CALLS - OR GOP

B.	Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: 90219.E13937 Date of Disbursement
	Mailing Address 7320 N Dreamy Draw Dr	<input type="text" value="06"/> / <input type="text" value="27"/> / <input type="text" value="2008"/>
	City Phoenix State AZ Zip Code 85020-5212	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraising Phone Calls - OR GOP	<input type="text" value="160.00"/>
	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) ▼
		FUNDRAISING PHONE CALLS - OR GOP

C.	Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: 90219.E13935 Date of Disbursement
	Mailing Address 7320 N Dreamy Draw Dr	<input type="text" value="06"/> / <input type="text" value="27"/> / <input type="text" value="2008"/>
	City Phoenix State AZ Zip Code 85020-5212	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraising Phone Calls - OR GOP	<input type="text" value="40.00"/>
	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) ▼
		FUNDRAISING PHONE CALLS - OR GOP

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="880.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 / 76

<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) Brienne Hyder	Transaction ID: 90219.E13836 Date of Disbursement 06 / 03 / 2008
	Mailing Address 7068 SW Valenta Ct	
	City Portland State OR Zip Code 97223-2260	Amount of Each Disbursement this Period 211.16
	Purpose of Disbursement Reimbursement--See below Candidate Name	REIMBURSEMENT--SEE BELOW
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) AT&T Wireless	Transaction ID: 90219.E14000 Date of Disbursement 06 / 03 / 2008
	Mailing Address PO Box 30459	
	City Los Angeles State CA Zip Code 90030-	Amount of Each Disbursement this Period 211.16
	Purpose of Disbursement Phone service Candidate Name	[MEMO ITEM] MEMO: PHONE SERVICE
	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) ▼	

C.	Full Name (Last, First, Middle Initial) Brienne Hyder	Transaction ID: 90219.E13881 Date of Disbursement 06 / 09 / 2008
	Mailing Address 7068 SW Valenta Ct	
	City Portland State OR Zip Code 97223-2260	Amount of Each Disbursement this Period 128.64
	Purpose of Disbursement Printing/Food OR GOP Candidate Name	PRINTING/FOOD OR GOP
	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)	339.80
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 / 76

<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) Key Merchants Mailing Address 7300 Chapman Highway City Knoxville State TN Zip Code 37920- Purpose of Disbursement Credit card fee 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: 90219.E14036 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 8
	Amount of Each Disbursement this Period 516.57 CREDIT CARD FEE

B. Full Name (Last, First, Middle Initial) Andrew Over Mailing Address 1485 SW 134th Ave City Beaverton State OR Zip Code 97005-0986 Purpose of Disbursement Reimbursement--See below 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: 90219.E14768 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 7 / 2 0 0 8
	Amount of Each Disbursement this Period 1381.32 REIMBURSEMENT--SEE BELOW

C. Full Name (Last, First, Middle Initial) Expedia, Inc. Mailing Address 3150 139th Avenue SE City Bellevue State WA Zip Code 98005- Purpose of Disbursement Travel 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: 90219.E13982 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 7 / 2 0 0 8
	Amount of Each Disbursement this Period 283.69 [MEMO ITEM] MEMO: TRAVEL

SUBTOTAL of Disbursements This Page (optional) ▶	1897.89
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 / 76

<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) Hyatt Regency Tamaya	Transaction ID: 90219.E13974 Date of Disbursement 06 / 27 / 2008
	Mailing Address 1300 Tuyuna Trail	Amount of Each Disbursement this Period 17.05
	City Bernalillo State NM Zip Code 87004-	
	Purpose of Disbursement Travel	[MEMO ITEM] MEMO: TRAVEL
	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.	Full Name (Last, First, Middle Initial) Hyatt Regency Tamaya	Transaction ID: 90219.E13975 Date of Disbursement 06 / 27 / 2008
	Mailing Address 1300 Tuyuna Trail	Amount of Each Disbursement this Period 17.31
	City Bernalillo State NM Zip Code 87004-	
	Purpose of Disbursement Travel	[MEMO ITEM] MEMO: TRAVEL
	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.	Full Name (Last, First, Middle Initial) Hyatt Regency Tamaya	Transaction ID: 90219.E13983 Date of Disbursement 06 / 27 / 2008
	Mailing Address 1300 Tuyuna Trail	Amount of Each Disbursement this Period 510.75
	City Bernalillo State NM Zip Code 87004-	
	Purpose of Disbursement Travel	[MEMO ITEM] MEMO: TRAVEL
	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)	0.00
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 40 / 76

<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) Kinkos Salem	Transaction ID: 90219.E14958 Date of Disbursement 06 / 27 / 2008
	Mailing Address 2595 Commercial St SE	Amount of Each Disbursement this Period 50.15
	City Salem State OR Zip Code 97302-4448	
	Purpose of Disbursement Office supplies 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) ▼
		[MEMO ITEM] MEMO: OFFICE SUPPLIES

B.	Full Name (Last, First, Middle Initial) Office Depot	Transaction ID: 90219.E13964 Date of Disbursement 06 / 27 / 2008
	Mailing Address 10520 SW Cascade Ave	Amount of Each Disbursement this Period 33.99
	City Portland State OR Zip Code 97223-4302	
	Purpose of Disbursement Office supplies 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) ▼
		[MEMO ITEM] MEMO: OFFICE SUPPLIES

C.	Full Name (Last, First, Middle Initial) Office Depot	Transaction ID: 90219.E13976 Date of Disbursement 06 / 27 / 2008
	Mailing Address 10520 SW Cascade Ave	Amount of Each Disbursement this Period 31.99
	City Portland State OR Zip Code 97223-4302	
	Purpose of Disbursement Office supplies 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) ▼
		[MEMO ITEM] MEMO: OFFICE SUPPLIES

SUBTOTAL of Disbursements This Page (optional)	0.00
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)

<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) Pitney Bowes Purchase Power	Transaction ID: 90219.E13833 Date of Disbursement
	Mailing Address PO Box 856042	<input type="text" value="06"/> / <input type="text" value="03"/> / <input type="text" value="2008"/>
	City Louisville State KY Zip Code 40285-6042	Amount of Each Disbursement this Period
	Purpose of Disbursement Postage - OR GOP	<input type="text" value="1000.00"/>
	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 - OR GOP

B.	Full Name (Last, First, Middle Initial) Pitney Bowes Purchase Power	Transaction ID: 90219.E13873 Date of Disbursement
	Mailing Address PO Box 856042	<input type="text" value="06"/> / <input type="text" value="09"/> / <input type="text" value="2008"/>
	City Louisville State KY Zip Code 40285-6042	Amount of Each Disbursement this Period
	Purpose of Disbursement Postage - OR GOP	<input type="text" value="293.00"/>
	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 - OR GOP

C.	Full Name (Last, First, Middle Initial) Gary Schmidt	Transaction ID: 90219.E13955 Date of Disbursement
	Mailing Address 14462 SE Bridgeton St	<input type="text" value="06"/> / <input type="text" value="18"/> / <input type="text" value="2008"/>
	City Clackamas State OR Zip Code 97015-6270	Amount of Each Disbursement this Period
	Purpose of Disbursement Reimbursement--See below	<input type="text" value="166.94"/>
	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) ▼
		REIMBURSEMENT--SEE BELOW

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1459.94"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

A. Full Name (Last, First, Middle Initial) Office Depot Mailing Address 10520 SW Cascade Ave City Portland State OR Zip Code 97223-4302 Purpose of Disbursement Office supplies 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: 90219.E13957 Date of Disbursement 06 / 18 / 2008
	Category/Type Amount of Each Disbursement this Period 64.96 [MEMO ITEM] MEMO: OFFICE SUPPLIES	

B. Full Name (Last, First, Middle Initial) Tiffany Stark Mailing Address PO Box 13470 City Portland State OR Zip Code 97213- Purpose of Disbursement Finance consulting 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: 90219.E13922 Date of Disbursement 06 / 27 / 2008
	Category/Type Amount of Each Disbursement this Period 1708.88 FINANCE CONSULTING	

C. Full Name (Last, First, Middle Initial) Stacy Thomsen Mailing Address 4949 Meadows Road, Ste. 625 City Lake Oswego State OR Zip Code 97035- Purpose of Disbursement Reimbursement--See below 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: 90219.E13841 Date of Disbursement 06 / 03 / 2008
	Category/Type Amount of Each Disbursement this Period 1230.00 REIMBURSEMENT--SEE BELOW	

SUBTOTAL of Disbursements This Page (optional) ▶	2938.88
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 / 76

<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)
BustersTexas Style BBQ

Mailing Address 2840 Commercial Street SE

City State Zip Code
Salem OR 97302-

Purpose of Disbursement
Food

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 90219.E16465
Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]
MEMO: FOOD

B.

Full Name (Last, First, Middle Initial)
Stacy Thomsen

Mailing Address 4949 Meadows Road, Ste. 625

City State Zip Code
Lake Oswego OR 97035-

Purpose of Disbursement
Postage - OR GOP

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 90219.E13953
Date of Disbursement

/ /

Amount of Each Disbursement this Period

POSTAGE - OR GOP

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 44 / 76

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

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
Richard Geary

Transaction ID: 90219.E13904
Date of Disbursement

Mailing Address 1211 SW 5th Ave Ste 2980

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	0	8

City State Zip Code
Portland OR 97204-3729

Amount of Each Disbursement this Period

1600.00

Purpose of Disbursement
Refund of Contribution Refund

010
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

1600.00

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

1600.00

**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 45 / 76

<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

<p>A. Full Name (Last, First, Middle Initial) Brienne Hyder</p> <p>Mailing Address 7068 SW Valenta Ct</p> <p>City Portland State OR Zip Code 97223-2260</p> <p>Purpose of Disbursement FEA Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90219.E13882</p> <p>Date of Disbursement 06 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 1870.93</p> <p>FEA PAYROLL</p>
<p>B. Full Name (Last, First, Middle Initial) Brienne Hyder</p> <p>Mailing Address 7068 SW Valenta Ct</p> <p>City Portland State OR Zip Code 97223-2260</p> <p>Purpose of Disbursement FEA Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90219.E13944</p> <p>Date of Disbursement 06 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 1870.93</p> <p>FEA PAYROLL</p>
<p>C. Full Name (Last, First, Middle Initial) Internal Revenue Svc-Payroll Tax Dept.</p> <p>Mailing Address c/o Key Bank 1500 Edgewater St NW</p> <p>City Salem State OR Zip Code 97304-</p> <p>Purpose of Disbursement FEA Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90219.E13887</p> <p>Date of Disbursement 06 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 1901.63</p> <p>FEA PAYROLL TAXES</p>

SUBTOTAL of Disbursements This Page (optional)	5643.49
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 46 / 76

<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.	Full Name (Last, First, Middle Initial) LifeWise	Transaction ID: 90219.E13907
	Mailing Address 815 SW Bond St	Date of Disbursement 06 / 18 / 2008
	City Bend State OR Zip Code 97702-	Amount of Each Disbursement this Period 708.90
	Purpose of Disbursement Insurance	INSURANCE
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Oregon Department of Revenue	Transaction ID: 90219.E14739
	Mailing Address P.O. Box 14800	Date of Disbursement 06 / 16 / 2008
	City Salem State OR Zip Code 97309-0920	Amount of Each Disbursement this Period 676.19
	Purpose of Disbursement FEA Payroll Taxes	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) ▼

C.	Full Name (Last, First, Middle Initial) Andrew Over	Transaction ID: 90219.E14766
	Mailing Address 1485 SW 134th Ave	Date of Disbursement 06 / 16 / 2008
	City Beaverton State OR Zip Code 97005-0986	Amount of Each Disbursement this Period 2378.11
	Purpose of Disbursement FEA Payroll	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) ▼

SUBTOTAL of Disbursements This Page (optional)	3763.20
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 47 / 76

<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

<p>A. Full Name (Last, First, Middle Initial) Andrew Over</p> <p>Mailing Address 1485 SW 134th Ave</p> <p>City Beaverton State OR Zip Code 97005-0986</p> <p>Purpose of Disbursement FEA Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90219.E14767</p> <p>Date of Disbursement 06 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 2378.11</p> <p>FEA PAYROLL</p>
<p>B. Full Name (Last, First, Middle Initial) Gary Schmidt</p> <p>Mailing Address 14462 SE Bridgeton St</p> <p>City Clackamas State OR Zip Code 97015-6270</p> <p>Purpose of Disbursement FEA Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90219.E13940</p> <p>Date of Disbursement 06 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 1885.53</p> <p>FEA PAYROLL</p>
<p>C. Full Name (Last, First, Middle Initial) Smith Barney Investments</p> <p>Mailing Address 121 SW Morrison St Ste 1600</p> <p>City Portland State OR Zip Code 97204-3146</p> <p>Purpose of Disbursement FEA IRA Contributions</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90219.E13885</p> <p>Date of Disbursement 06 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 443.75</p> <p>FEA IRA CONTRIBUTIONS</p>

SUBTOTAL of Disbursements This Page (optional)	4707.39
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 48 / 76

<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

A.	Full Name (Last, First, Middle Initial) Smith Barney Investments	Transaction ID: 90219.E13943 Date of Disbursement 06 / 30 / 2008
	Mailing Address 121 SW Morrison St Ste 1600	Amount of Each Disbursement this Period 443.75
	City Portland State OR Zip Code 97204-3146	
	Purpose of Disbursement FEA IRA Contributions 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 IRA CONTRIBUTIONS

B.	Full Name (Last, First, Middle Initial) Janice Williamson	Transaction ID: 90219.E13883 Date of Disbursement 06 / 16 / 2008
	Mailing Address 4065 Mandy Ave SE	Amount of Each Disbursement this Period 898.15
	City Salem State OR Zip Code 97302-1712	
	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

C.	Full Name (Last, First, Middle Initial) Janice Williamson	Transaction ID: 90219.E13941 Date of Disbursement 06 / 30 / 2008
	Mailing Address 4065 Mandy Ave SE	Amount of Each Disbursement this Period 898.16
	City Salem State OR Zip Code 97302-1712	
	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

SUBTOTAL of Disbursements This Page (optional)	2240.06
TOTAL This Period (last page this line number only)	16354.14

SCHEDULE C (FEC Form 3X)

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

LOANS

NAME OF COMMITTEE (In Full)
Oregon Republican Party

Transaction ID: LS90219.C93909

LOAN SOURCE Full Name (Last, First, Middle Initial) F. Douglas Day	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 4386 Rowan Ave N	
City Keizer State OR ZIP Code 97303-5824	

Original Amount of Loan 10000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 10000.00
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TERMS

Date Incurred MM DD YY YY 02 04 2008	Date Due 20091231	Interest Rate 8.00 % (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 style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional)	<input style="width: 100%;" type="text" value="10000.00"/>
TOTALS This Period (last page in this line only)	<input style="width: 100%;" type="text" value=".00"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)

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

LOANS

NAME OF COMMITTEE (In Full)
Oregon Republican Party

Transaction ID: LS90219.C93964

LOAN SOURCE Full Name (Last, First, Middle Initial) Michael Scheel	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 3951 Croisan Creek Rd S	
City Salem State OR ZIP Code 97302-9474	

Original Amount of Loan 10000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 10000.00
-------------------------------------	------------------------------------	---

TERMS

Date Incurred MM DD YY YY 01 31 2008	Date Due 20091231	Interest Rate 8.00 % (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 style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional)	<input style="width: 100%;" type="text" value="10000.00"/>
TOTALS This Period (last page in this line only)	<input style="width: 100%;" type="text" value=".00"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)

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

FOR LINE 13 OF FORM 3X

LOANS

NAME OF COMMITTEE (In Full)
Oregon Republican Party

Transaction ID: LS90219.C93966

LOAN SOURCE Full Name (Last, First, Middle Initial)
Donald Malarkey

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 2495 E Nob Hill St SE

City Salem State OR ZIP Code 97302-3733

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
10000.00	0.00	10000.00

TERMS

Date Incurred: MM DD YYYY 01 30 2008
 Date Due: 20091231
 Interest Rate: 8.00 % (apr)
 Secured: Yes 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: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)	▶	10000.00
TOTALS This Period (last page in this line only)	▶	.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)

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

LOANS

NAME OF COMMITTEE (In Full)
Oregon Republican Party

Transaction ID: LS90219.C93965

LOAN SOURCE Full Name (Last, First, Middle Initial) Julie Scheel	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 3951 Croisan Creek Rd S	
City Salem State OR ZIP Code 97302-9474	

Original Amount of Loan 10000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 10000.00
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TERMS

Date Incurred MM DD YY YY 01 31 2008	Date Due 20091231	Interest Rate 8.00 % (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 style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional)	<input style="width: 100%;" type="text" value="10000.00"/>
TOTALS This Period (last page in this line only)	<input style="width: 100%;" type="text" value="40000.00"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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 Aristotle International			Nature of Debt (Purpose): Computer Support
Mailing Address 205 Pennsylvania Ave SE			
City Washington	State DC	ZIP Code 20003-1182	

Outstanding Balance Beginning This Period <input type="text" value="1950.00"/>		Transaction ID: LS90219.E13863	
Amount Incurred This Period <input type="text" value="1950.00"/>	Payment This Period <input type="text" value="1950.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1950.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Amy Langdon			Nature of Debt (Purpose): Travel/Phone Expense
Mailing Address 2830 Foxhaven Dr SE			
City Salem	State OR	ZIP Code 97306-2526	

Outstanding Balance Beginning This Period <input type="text" value="2894.40"/>		Transaction ID: LS90219.E16625	
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="2894.40"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor FLS Connect			Nature of Debt (Purpose): Fundraising Phone Calls - OR GOP
Mailing Address 7320 N Dreamy Draw Dr			
City Phoenix	State AZ	ZIP Code 85020-5212	

Outstanding Balance Beginning This Period <input type="text" value="47593.24"/>		Transaction ID: LS90219.E13875	
Amount Incurred This Period <input type="text" value="9862.00"/>	Payment This Period <input type="text" value="10542.00"/>	Outstanding Balance at Close of This Period <input type="text" value="46913.24"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="51757.64"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL 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): List rental - OR GOP
Mailing Address 12450 Automobile Boulevard	
City State ZIP Code Clearwater FL 34622-	

Outstanding Balance Beginning This Period 23393.77	Transaction ID: LS90219.E13832	
Amount Incurred This Period 3715.76	Payment This Period 4215.76	Outstanding Balance at Close of This Period 22893.77

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor June Hartley	Nature of Debt (Purpose): Travel
Mailing Address PO Box 2643 3149 Shay Way	
City State ZIP Code Nyssa OR 97913-0643	

Outstanding Balance Beginning This Period 4654.70	Transaction ID: LS90219.E16664	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4654.70

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Wes Lematta	Nature of Debt (Purpose): Contribution Refund
Mailing Address 800 NE Tenney Rd Ste 110	
City State ZIP Code Vancouver WA 98685-2899	

Outstanding Balance Beginning This Period 2500.00	Transaction ID: LS90219.E16256	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2500.00

1) SUBTOTALS This Period This Page (optional).....	▶	30048.47
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)	▶	

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 Washington Co. Republican Central Comm	Nature of Debt (Purpose): Facility Rental - OR GOP
Mailing Address PO Box 122	
City State ZIP Code Beaverton OR 97075-0122	

Outstanding Balance Beginning This Period <input type="text" value="75.00"/>	Transaction ID: LS90219.E16713	
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="75.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Donna Woolley	Nature of Debt (Purpose): Contribution Refund
Mailing Address PO Box 43	
City State ZIP Code Drain OR 97435-0043	

Outstanding Balance Beginning This Period <input type="text" value="6000.00"/>	Transaction ID: LS90219.E15765	
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="6000.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Joan Austin	Nature of Debt (Purpose): Contribution Refund
Mailing Address PO Box 209	
City State ZIP Code Newberg OR 97132-0209	

Outstanding Balance Beginning This Period <input type="text" value="2500.00"/>	Transaction ID: LS90219.E15760	
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="2500.00"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="8575.00"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL 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)	PAGE 56 / 76
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 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 - OR GOP
Mailing Address PO Box 856042	
City State ZIP Code Louisville KY 40285-6042	

Outstanding Balance Beginning This Period 7432.44	Transaction ID: LS90219.E13833	
Amount Incurred This Period 2011.20	Payment This Period 2293.00	Outstanding Balance at Close of This Period 7150.64

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor AT&T Wireless	Nature of Debt (Purpose): Phone service
Mailing Address PO Box 30459	
City State ZIP Code Los Angeles CA 90030-	

Outstanding Balance Beginning This Period 67180.90	Transaction ID: LS90219.E11336	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 67180.90

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Pacific Northwest Telco	Nature of Debt (Purpose): Phone Service
Mailing Address 10200 Greenburg Road, Suite 340	
City State ZIP Code Portland OR 97223-	

Outstanding Balance Beginning This Period 0.00	Transaction ID: LS90219.E16733	
Amount Incurred This Period 695.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 695.00

1) SUBTOTALS This Period This Page (optional).....	▶	75026.54
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)	▶	

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 Integra Telecom			Nature of Debt (Purpose): Phone service
Mailing Address PO Box 34988			
City Seattle	State WA	ZIP Code 98124-1988	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: LS90219.E13924	
Amount Incurred This Period <input type="text" value="577.63"/>	Payment This Period <input type="text" value="324.13"/>	Outstanding Balance at Close of This Period <input type="text" value="253.50"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Carley Dillon			Nature of Debt (Purpose): Food/Beverage/Office Supplies
Mailing Address 14511 Pfeifer Dr			
City Lake Oswego	State OR	ZIP Code 97035-2419	

Outstanding Balance Beginning This Period <input type="text" value="856.37"/>		Transaction ID: LS90219.E16725	
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="0.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ricoh Customer Finance Corp.			Nature of Debt (Purpose): Equipment Lease
Mailing Address PO Box 310010273			
City Pasadena	State CA	ZIP Code 91110-0001	

Outstanding Balance Beginning This Period <input type="text" value="736.91"/>		Transaction ID: LS90219.E16728	
Amount Incurred This Period <input type="text" value="358.76"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1095.67"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="1349.17"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL 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 Robert Freres			Nature of Debt (Purpose): Excess Levin Contribution Refund
Mailing Address PO Box 276			
City Lyons	State OR	ZIP Code 97358-0276	

Outstanding Balance Beginning This Period <input type="text" value="2500.00"/>		Transaction ID: LS90219.E13313	
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="2500.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Barbs Professional Bookkeeping &Tax			Nature of Debt (Purpose): Payroll Service
Mailing Address 3295 Triangle Dr SE Ste 112			
City Salem	State OR	ZIP Code 97302-4566	

Outstanding Balance Beginning This Period <input type="text" value="962.50"/>		Transaction ID: LS90219.E13914	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="962.50"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Andrew Frazier			Nature of Debt (Purpose): Facility Rental - ORGOP
Mailing Address 6400 NE 30th Ave 812 SW Washington St, 3rd floor 9			
City Portland	State OR	ZIP Code 97211-6607	

Outstanding Balance Beginning This Period <input type="text" value="774.48"/>		Transaction ID: LS90219.E16657	
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="774.48"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="3274.48"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL 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 Discover Corporate Card	Nature of Debt (Purpose): Travel/office supplies
Mailing Address PO Box 30423	
City State ZIP Code Salt Lake City UT 84130-0423	

Outstanding Balance Beginning This Period 8733.67	Transaction ID: LS90219.E16293	
Amount Incurred This Period 220.87	Payment This Period 0.00	Outstanding Balance at Close of This Period 8454.54

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor IN Compliance Inc.	Nature of Debt (Purpose): Compliance Consulting
Mailing Address PO Box 751271	
City State ZIP Code Las Vegas NV 89131-	

Outstanding Balance Beginning This Period 18441.30	Transaction ID: LS90219.E13874	
Amount Incurred This Period 0.00	Payment This Period 3000.00	Outstanding Balance at Close of This Period 15441.30

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Lynx Group Inc.	Nature of Debt (Purpose): Printing - OR GOP
Mailing Address 2746 Front St Ne	
City State ZIP Code Salem OR 97301-	

Outstanding Balance Beginning This Period 493.00	Transaction ID: LS90219.E13828	
Amount Incurred This Period 0.00	Payment This Period 493.00	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional).....	23895.84
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)	

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 D.R. Johnson Lumber Co.			Nature of Debt (Purpose): Excess Levin Contribution Refund
Mailing Address PO Box 66			
City Riddle	State OR	ZIP Code 97469-	

Outstanding Balance Beginning This Period <input type="text" value="10000.00"/>		Transaction ID: LS90219.E13314	
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="10000.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor World Trade Center & Catering			Nature of Debt (Purpose): Catering/ORGOP
Mailing Address PO Box 3340			
City Portland	State OR	ZIP Code 97208-	

Outstanding Balance Beginning This Period <input type="text" value="5761.04"/>		Transaction ID: LS90219.E13834	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1000.00"/>	Outstanding Balance at Close of This Period <input type="text" value="4761.04"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Brienne Hyder			Nature of Debt (Purpose): Phone Expense
Mailing Address 7068 SW Valenta Ct			
City Portland	State OR	ZIP Code 97223-2260	

Outstanding Balance Beginning This Period <input type="text" value="211.16"/>		Transaction ID: LS90219.E13881	
Amount Incurred This Period <input type="text" value="285.38"/>	Payment This Period <input type="text" value="128.64"/>	Outstanding Balance at Close of This Period <input type="text" value="156.74"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="14917.78"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL 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)	PAGE 61 / 76
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Complete Campaigns	Nature of Debt (Purpose): Computer Support
Mailing Address 3635 Ruffin Rd Fl 3	
City San Diego State CA ZIP Code 92123-1880	

Outstanding Balance Beginning This Period 1250.00	Transaction ID: LS90219.E13839	
Amount Incurred This Period 72.25	Payment This Period 822.25	Outstanding Balance at Close of This Period 500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Donald Malarkey	Nature of Debt (Purpose): Contribution Refund
Mailing Address 2495 E Nob Hill St SE	
City Salem State OR ZIP Code 97302-3733	

Outstanding Balance Beginning This Period 100.00	Transaction ID: LS90219.E16910	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 100.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Meridian LLC	Nature of Debt (Purpose): Printing
Mailing Address 914 164th St SE # 343	
City Bothell State WA ZIP Code 98012-6385	

Outstanding Balance Beginning This Period 0.00	Transaction ID: LS90219.E16734	
Amount Incurred This Period 1826.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1826.00

1) SUBTOTALS This Period This Page (optional).....	2426.00
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)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 62 / 76
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Oregon Federation of College Republicans	Nature of Debt (Purpose): Contribution Refund
Mailing Address PO Box 808	
City State ZIP Code Corvallis OR 97339-0808	

Outstanding Balance Beginning This Period 550.00	Transaction ID: LS90219.E16376	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 550.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Stacy Thomsen	Nature of Debt (Purpose): Food/Beverage/Office Supplies
Mailing Address 4949 Meadows Road, Ste. 625	
City State ZIP Code Lake Oswego OR 97035-	

Outstanding Balance Beginning This Period 1230.00	Transaction ID: LS90219.E16726	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional).....	550.00
2) TOTALS This Period (last page this line number only).....	211820.92
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	40000.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	251820.92

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Oregon Republican Party

NAME OF ACCOUNT OREGON NON-FED STA- TE ACCT c/o Key Ba- nk	DATE OF RECEIPT M M / D D / Y Y Y Y 0 6 / 1 8 / 2 0 0 8	TOTAL AMOUNT TRANSFERRED 1642.24
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BREAKDOWN OF TRANSFER RECEIVED		1642.24
i) Total Administrative		Transaction ID: H390219.C96145
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		
		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED	
TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Oregon Republican Party

NAME OF ACCOUNT OREGON NON-FED STA- TE ACCT c/o Key Ba- nk	DATE OF RECEIPT M M / D D / Y Y Y Y 0 6 / 2 7 / 2 0 0 8	TOTAL AMOUNT TRANSFERRED 24885.00
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BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	24885.00	Transaction ID: H390219.C96170
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	26527.24
TOTAL This Period (Generic Voter Drive)	0.00
TOTAL This Period (Exempt Activities)	0.00
TOTAL This Period (Direct Fundraising)	0.00
TOTAL This Period (Direct Candidate Support)	0.00
TOTAL This Period (Public Communications Referring Only to Party)	0.00
TOTAL This Period (Total Amount Transferred)	26527.24

**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) Lynx Group 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 2746 Front St Ne			Allocated Activity or Event Year-To-Date 122250.58		
City Salem	State OR	Zip Code 97301-	Date <input type="text" value="06"/> / <input type="text" value="03"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Printing - OR GOP			Transaction ID: H490219.E13828		
Activity or Event Identifier: ADMINISTRATION B 21					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
177.48		315.52		493.00

B. Full Name (Last, First, Middle Initial) World Trade Center & Catering			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 3340			Allocated Activity or Event Year-To-Date 122500.58		
City Portland	State OR	Zip Code 97208-	Date <input type="text" value="06"/> / <input type="text" value="03"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Catering/ORGOP			Transaction ID: H490219.E13834		
Activity or Event Identifier: ADMINISTRATION B 21					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
90.00		160.00		250.00

C. Full Name (Last, First, Middle Initial) Red Lion 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 3301 Market Street NE			Allocated Activity or Event Year-To-Date 121257.58		
City Salem	State OR	Zip Code 97301-	Date <input type="text" value="06"/> / <input type="text" value="03"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Facility Rental--OR GOP			Transaction ID: H490219.E13835		
Activity or Event Identifier: ADMINISTRATION B 21					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2160.00		3840.00		6000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2427.48		4315.52		6743.00

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)
Complete Campaigns

Mailing Address
3635 Ruffin Rd Fl 3

City State Zip Code
San Diego CA 92123-1880

Purpose of Disbursement:
Computer Support

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

122750.58

Activity or Event Identifier:
ADMINISTRATION B 21

Date 06 / 03 / 2008

Transaction ID: H490219.E13839

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
90.00		160.00		250.00

B. Full Name (Last, First, Middle Initial)
Red Lion Hotel

Mailing Address
3301 Market Street NE

City State Zip Code
Salem OR 97301-

Purpose of Disbursement:
Facility Rental--OR GOP

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

127074.51

Activity or Event Identifier:
ADMINISTRATION B 21

Date 06 / 09 / 2008

Transaction ID: H490219.E13860

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1533.39		2726.04		4259.43

C. Full Name (Last, First, Middle Initial)
World Trade Center & Catering

Mailing Address
PO Box 3340

City State Zip Code
Portland OR 97208-

Purpose of Disbursement:
Catering/ORGOP

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

131324.51

Activity or Event Identifier:
ADMINISTRATION B 21

Date 06 / 09 / 2008

Transaction ID: H490219.E13870

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
90.00		160.00		250.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1713.39		3046.04		4759.43

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) Warren Wilson			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 962 62nd Court NE			Allocated Activity or Event Year-To-Date 131684.51	
City State Zip Code Salem OR 97317-	Category/ Type		Date M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 8	
Purpose of Disbursement: Computer support			Transaction ID: H490219.E13871	
Activity or Event Identifier: ADMINISTRATION B 21				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
129.60		230.40		360.00

B. Full Name (Last, First, Middle Initial) IN Compliance 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 PO Box 751271			Allocated Activity or Event Year-To-Date 131074.51	
City State Zip Code Las Vegas NV 89131-	Category/ Type		Date M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 8	
Purpose of Disbursement: Compliance Consulting			Transaction ID: H490219.E13874	
Activity or Event Identifier: ADMINISTRATION B 21				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1080.00		1920.00		3000.00

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 133556.66	
City State Zip Code Rushville IL 62681-	Category/ Type		Date M M / D D / Y Y Y Y 0 6 / 1 8 / 2 0 0 8	
Purpose of Disbursement: Phone service			Transaction ID: H490219.E13908	
Activity or Event Identifier: ADMINISTRATION B 21				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.67		66.98		104.65

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1247.27		2217.38		3464.65

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) First United Methodist Church			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 600 State St			Allocated Activity or Event Year-To-Date 139602.88		
City Salem	State OR	Zip Code 97301-3848	Date <input type="text" value="06"/> / <input type="text" value="27"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Rent			Transaction ID: H490219.E13909		
Activity or Event Identifier: ADMINISTRATION B 21					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
468.00		832.00		1300.00

B. Full Name (Last, First, Middle Initial) U.S. Postmaster			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 410 Mill St SE			Allocated Activity or Event Year-To-Date 133756.66		
City Salem	State OR	Zip Code 97301-	Date <input type="text" value="06"/> / <input type="text" value="18"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Postage--OR GOP			Transaction ID: H490219.E13910		
Activity or Event Identifier: ADMINISTRATION B 21					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
72.00		128.00		200.00

C. Full Name (Last, First, Middle Initial) U.S. Postmaster			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 410 Mill St SE			Allocated Activity or Event Year-To-Date 133840.66		
City Salem	State OR	Zip Code 97301-	Date <input type="text" value="06"/> / <input type="text" value="18"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Postage--OR GOP			Transaction ID: H490219.E13911		
Activity or Event Identifier: ADMINISTRATION B 21					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.24		53.76		84.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
570.24		1013.76		1584.00

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)
South Salem Mini Storage

Mailing Address
5585 SE Commercial St

City Salem	State OR	Zip Code 97306-	Category/ Type
Purpose of Disbursement: Facility Rental - OR GOP			

Activity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
133452.01

Date / /
Transaction ID: H490219.E13912

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
54.00		96.00		150.00

B. Full Name (Last, First, Middle Initial)
Complete Campaigns

Mailing Address
3635 Ruffin Rd Fl 3

City San Diego	State CA	Zip Code 92123-1880	Category/ Type
Purpose of Disbursement: Computer Support			

Activity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
138302.88

Date / /
Transaction ID: H490219.E13913

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
180.00		320.00		500.00

C. Full Name (Last, First, Middle Initial)
Barbs Professional Bookkeeping & Tax

Mailing Address
3295 Triangle Dr SE Ste 112

City Salem	State OR	Zip Code 97302-4566	Category/ Type
Purpose of Disbursement: Payroll Service			

Activity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
137552.88

Date / /
Transaction ID: H490219.E13914

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
346.50		616.00		962.50

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
580.50		1032.00		1612.50

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) 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 10520 SW Cascade Ave			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%;">136071.65</div>	
City	State	Zip Code	Category/ Type	
Portland	OR	97223-4302		
Purpose of Disbursement: Office supplies			Date M M / D D / Y Y Y Y 06 / 27 / 2008	
Activity or Event Identifier: ADMINISTRATION B 21			Transaction ID: H490219.E13917	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.16		19.83		30.99

B. Full Name (Last, First, Middle Initial) Aristotle International			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 205 Pennsylvania Ave SE			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%;">136040.66</div>	
City	State	Zip Code	Category/ Type	
Washington	DC	20003-1182		
Purpose of Disbursement: Computer Support			Date M M / D D / Y Y Y Y 06 / 27 / 2008	
Activity or Event Identifier: ADMINISTRATION B 21			Transaction ID: H490219.E13919	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
702.00		1248.00		1950.00

C. Full Name (Last, First, Middle Initial) World Trade Center & Catering			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 3340			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%;">134090.66</div>	
City	State	Zip Code	Category/ Type	
Portland	OR	97208-		
Purpose of Disbursement: Catering/ORGOP			Date M M / D D / Y Y Y Y 06 / 18 / 2008	
Activity or Event Identifier: ADMINISTRATION B 21			Transaction ID: H490219.E13920	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
90.00		160.00		250.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
803.16		1427.83		2230.99

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) World Trade Center & Catering			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 3340			Allocated Activity or Event Year-To-Date 137802.88	
City Portland	State OR	Zip Code 97208-	Date <input type="text" value="06"/> / <input type="text" value="27"/> / <input type="text" value="2008"/>	
Purpose of Disbursement: Catering/ORGOP			Transaction ID: H490219.E13921	
Activity or Event Identifier: ADMINISTRATION B 21				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
90.00		160.00		250.00

B. Full Name (Last, First, Middle Initial) Dell Financial			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 120001			Allocated Activity or Event Year-To-Date 136266.25	
City Dallas	State TX	Zip Code 75312-	Date <input type="text" value="06"/> / <input type="text" value="27"/> / <input type="text" value="2008"/>	
Purpose of Disbursement: Equipment Lease			Transaction ID: H490219.E13923	
Activity or Event Identifier: ADMINISTRATION B 21				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
70.06		124.54		194.60

C. Full Name (Last, First, Middle Initial) Integra Telecom			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 34988			Allocated Activity or Event Year-To-Date 136590.38	
City Seattle	State WA	Zip Code 98124-1988	Date <input type="text" value="06"/> / <input type="text" value="27"/> / <input type="text" value="2008"/>	
Purpose of Disbursement: Phone service			Transaction ID: H490219.E13924	
Activity or Event Identifier: ADMINISTRATION B 21				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
116.69		207.44		324.13

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
276.75		491.98		768.73

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) Complete Campaigns			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 3635 Ruffin Rd Fl 3			Allocated Activity or Event Year-To-Date 122757.33		
City San Diego	State CA	Zip Code 92123-1880	Date 06 / 04 / 2008 Transaction ID: H490219.E14041		
Purpose of Disbursement: Computer Support		Category/ Type			
Activity or Event Identifier: ADMINISTRATION B 21					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.43		4.32		6.75

B. Full Name (Last, First, Middle Initial) Complete Campaigns			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 3635 Ruffin Rd Fl 3			Allocated Activity or Event Year-To-Date 122815.08		
City San Diego	State CA	Zip Code 92123-1880	Date 06 / 06 / 2008 Transaction ID: H490219.E14043		
Purpose of Disbursement: Computer Support		Category/ Type			
Activity or Event Identifier: ADMINISTRATION B 21					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.79		36.96		57.75

C. Full Name (Last, First, Middle Initial) Complete Campaigns			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 3635 Ruffin Rd Fl 3			Allocated Activity or Event Year-To-Date 131692.26		
City San Diego	State CA	Zip Code 92123-1880	Date 06 / 11 / 2008 Transaction ID: H490219.E14045		
Purpose of Disbursement: Computer Support		Category/ Type			
Activity or Event Identifier: ADMINISTRATION B 21					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.79		4.96		7.75

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
26.01		46.24		72.25

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 128074.51		
City Louisville	State KY	Zip Code 40285-6042	Date MM / DD / YYYY 06 / 09 / 2008		
Purpose of Disbursement: Postage - OR GOP			Transaction ID: H490219.E14063		
Activity or Event Identifier: ADMINISTRATION B 21					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
360.00		640.00		1000.00

B. Full Name (Last, First, Middle Initial) Discover Corporate Card			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 30423			Allocated Activity or Event Year-To-Date 121757.58		
City Salt Lake City	State UT	Zip Code 84130-0423	Date MM / DD / YYYY 06 / 03 / 2008		
Purpose of Disbursement: Credit Card Payment: See below			Transaction ID: H490219.E15035		
Activity or Event Identifier: ADMINISTRATION B 21					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
180.00		320.00		500.00

C. Full Name (Last, First, Middle Initial) Alaska Airlines			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 530 SW Madison St			Allocated Activity or Event Year-To-Date 169.80		
City Portland	State OR	Zip Code 97204-1021	Date MM / DD / YYYY 06 / 03 / 2008		
Purpose of Disbursement: Travel			Transaction ID: H490219.E13845		
Activity or Event Identifier: ADMINISTRATION B 21 [MEMO ITEM]Travel					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
61.13		108.67		169.80

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
540.00		960.00		1500.00

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)
Office Depot

Mailing Address
10520 SW Cascade Ave

City	State	Zip Code
Portland	OR	97223-4302

Purpose of Disbursement:
Office supplies

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

119.98

Activity or Event Identifier:
ADMINISTRATION B 21

[MEMO ITEM] Office supplies

Date / /

Transaction ID: H490219.E13849

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
43.19		76.79		119.98

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

Mailing Address
410 Mill St SE

City	State	Zip Code
Salem	OR	97301-

Purpose of Disbursement:
Postage--OR GOP

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

131.59

Activity or Event Identifier:
ADMINISTRATION B 21

[MEMO ITEM] Postage--OR GOP

Date / /

Transaction ID: H490219.E13848

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
47.37		84.22		131.59

C. Full Name (Last, First, Middle Initial)
Discover Corporate Card

Mailing Address
PO Box 30423

City	State	Zip Code
Salt Lake City	UT	84130-0423

Purpose of Disbursement:
Credit Card Fees

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

7.52

Activity or Event Identifier:
ADMINISTRATION B 21

[MEMO ITEM] Credit Card Fees

Date / /

Transaction ID: H490219.E16350

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.71		4.81		7.52

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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) Ram Restaurant and Brewery			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 515 12th Street			Allocated Activity or Event Year-To-Date 17.00		
City Salem	State OR	Zip Code 97301-	Date <input type="text" value="06"/> / <input type="text" value="03"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Food - OR GOP			Transaction ID: H490219.E13844		
Activity or Event Identifier: ADMINISTRATION B 21 [MEMO ITEM] Food - OR GOP					
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT					
6.12 10.88 17.00					

B. Full Name (Last, First, Middle Initial) Vonage Telephone			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 23 Main St			Allocated Activity or Event Year-To-Date 54.11		
City Holmdel	State NJ	Zip Code 07733-2136	Date <input type="text" value="06"/> / <input type="text" value="03"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Phone service			Transaction ID: H490219.E14354		
Activity or Event Identifier: ADMINISTRATION B 21 [MEMO ITEM] Phone service					
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT					
19.48 34.63 54.11					

C. Full Name (Last, First, Middle Initial) WB Adams Insurance Co			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 9900 SW Greenburg Rd Ste 270			Allocated Activity or Event Year-To-Date 133234.01		
City Portland	State OR	Zip Code 97223-5474	Date <input type="text" value="06"/> / <input type="text" value="18"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Insurance			Transaction ID: H490219.E16488		
Activity or Event Identifier: ADMINISTRATION B 21					
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT					
555.03 986.72 1541.75					

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
555.03		986.72		1541.75

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)
WB Adams Insurance Co

Mailing Address
9900 SW Greenburg Rd Ste 270

City State Zip Code
Portland OR 97223-5474

Purpose of Disbursement:
Insurance

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

133302.01

Activity or Event Identifier:
ADMINISTRATION B 21

Date 06 / 18 / 2008

Transaction ID: H490219.E16489

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.48		43.52		68.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.48		43.52		68.00

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
8764.31	15580.99	24345.30