For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
Steel Rives Political Action Committee

ADDRESS (number and street) ☐ Check if different than previously reported
900 SW 5th Avenue, Suite 2300

CITY, STATE and ZIP CODE
Portland, OR 97204-1268

2. FEC IDENTIFICATION NUMBER
C00289165

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

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year End Report
☐ July 31 Mid Year Report (Non-election Year Only)
☐ Termination Report

Monthly Report Due On:
☐ February 20 ☐ June 20 ☐ October 20
☐ March 20 ☐ July 20 ☐ November 20
☐ April 20 ☐ August 20 ☐ December 20
☐ May 20 ☐ September 20 ☐ January 31

☐ Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____

☒ Thirtieth day report following the General Election on 11/8/94 in the State of Oregon

(b) Is this Report an Amendment? ☐ YES ☒ NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period October 20, 1994 through November 28, 1994		
6. (a) Cash on Hand January 1, 19 94		$ 0
(b) Cash on Hand at Beginning of Reporting Period	$ 4,500	
(c) Total Receipts (from Line 19)	$ 500	$ 10,000
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 5,000	$ 10,000
7. Total Disbursements (from Line 30)	$ 2,500	$ 7,500
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 2,500	$ 2,500
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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
E. Walter Van Valkenburg, Assistant Treasurer

Signature of Treasurer

Date 12/8/94

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

FEC FORM 3X
(revised 9/93)
FE4AN101

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE

REPORT COVERING PERIOD FROM 10/20/94 TO: 11/28/94

	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees	0	0	11(a)(i)
i. Itemized (use Schedule A)	500	10,000	11(a)(ii)
ii. Unitemized	500	10,000	11(a)(iii)
iii. Total (add i and ii) ➤	0	0	11(b)
b. Political Party Committees	0	0	11(c)
c. Other Political Committees (such as PACs)	500	10,000	11(d)
d. Total Contributions (add a iii, b and c) ➤	0	0	12
12. Transfers From Affiliated/Other Party Committees	0	0	13
13. All Loans Received	0	0	14
14. Loan Repayments Received	0	0	15
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0	0	16
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0	0	17
17. Other Federal Receipts (Dividends, Interest, etc.)	0	0	18
18. Transfers from Nonfederal Account for Joint Activity	500	10,000	19
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	500	10,000	20
20. Total Federal Receipts (subtract line 18 from line 19) ➤			
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)	0	0	21(a)(i)
i. Federal Share	0	0	21(a)(ii)
ii. Non-Federal Share	0	0	21(b)
b. Other Federal Operating Expenditures	0	0	21(c)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	0	0	22
22. Transfers to Affiliated/Other Party Committees	2,000	7,000	23
23. Contributions to Federal Candidates/Committees and Other Political Committees	0	0	24
24. Independent Expenditures (use Schedule E)	0	0	25
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0	0	26
26. Loan Repayments Made	0	0	27
27. Loans Made			
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	0	0	28(a)
b. Political Party Committees	0	0	28(b)
c. Other Political Committees (such as PACs)	0	0	28(c)
d. Total Contribution Refunds (add a, b and c) ➤	0	0	28(d)
29. Other Disbursements	500	500	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	2,500	7,500	30
31. Total Federal Disbursements (subtract line 21 a i from line 30) ➤	2,500	7,500	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	2,500	7,500	32
33. Total Contribution Refunds (from line 28d)	0	0	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	2,500	7,500	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	0	0	35
36. Offsets to Operating Expenditures (from line 15)	0	0	36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	0	0	37

FE4AH01

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER

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)

Stool Rives Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Robert D. Van Brocklin 6259 SE 32nd Avenue Portland, OR 97202 Receipt For: ☐ Primary ☐ General ☒ Other (specify): exempt legal services	Name of Employer: Stoel Rives Boley Jones & Grey Occupation: Attorney Aggregate Year-to-Date > $ 542.50	10/23/94	$155.00 (exempt legal services)
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Geraldine M. Johnson 12730 SW Barberry Drive Beaverton, OR 97005 Receipt For: ☐ Primary ☐ General ☒ Other (specify): exempt acctg. services	Name of Employer: Stoel Rives Boley Jones & Grey Occupation: Assistant Accounting Manager Aggregate Year-to-Date > $ 40.00	10/23/94	$10.00 (exempt accounting services)
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional) > $ 165.00

TOTAL This Period (last page this line number only) > $ 165.00

FEA/NH01

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

Stoel Rives Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ron Sims for U.S. Senate 233 6th Avenue, N. Seattle, WA 98109	Contribution to U.S. Senate Candidate Committee Disbursement for: [ ] Primary [X] General [ ] Other (specify)	10/29/94	$500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Norm Dicks for Congress PO Box 1663 Tacoma, WA 98401	Contribution to U.S. House Candidate Committee Disbursement for: [ ] Primary [X] General [ ] Other (specify)	10/29/94	$ 500.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Echohawk for Governor PO Box 548 Boise, ID 83701	Contribution to Idaho Governor Candidate Campaign Disbursement for: [ ] Primary [ ] General [X] Other (specify) Non-Federal	10/29/94	$500.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Hatch Election Committee 265 E 100 S, Suite 105 Salt Lake City, UT 84111	Contribution to U.S. Senate Candidate Committee Disbursement for: [ ] Primary [X] General [ ] Other (specify)	10/29/94	$ 1,000.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		

SUBTOTAL of Disbursements This Page (optional) ..... $ 2,500.00

TOTAL This Period (last page this line number only) ..... $ 2,500.00

FEC/N101

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	DATE OF RECEIPT
☐	First Class Mail	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED 12-8-94
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House Office of Records and Registration	DATE OF RECEIPT
☐	Received from the Senate Office of Public Records	DATE OF RECEIPT
☐	Other (Specify):	POSTMARKED and/or DATE OF RECEIPT

MMR
PREPARER

12-14-94
DATE PREPARED

FEC FORM 70-2 (12/92)