

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Tootie Smith for Oregon

ADDRESS (number and street)

89358 Cranberry Lane

Check if different than previously reported. (ACC)

Bandon

OR

97411-8322

2. FEC IDENTIFICATION NUMBER ▼

C C00556415

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

OR

05

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y
07 / 01 / 2014

through

M M / D D / Y Y Y Y
09 / 30 / 2014

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 Carol A Russell

Signature of Treasurer Carol A Russell

[Electronically Filed]

Date

M M / D D / Y Y Y Y
10 / 15 / 2014

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

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Tootie Smith for Oregon

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2014 To: M M / D D / Y Y Y Y 09 / 30 / 2014

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	18852	50072
(b) Total Contribution Refunds (from Line 20(d))	0	1000
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	18852	49072
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	20605.32	49306.19
(b) Total Offsets to Operating Expenditures (from Line 14).....	0	0
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	20605.32	49306.19
8. Cash on Hand at Close of Reporting Period (from Line 27).....	3562.05	
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).....	12242.5	

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

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Tootie Smith for Oregon

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2014 To: M M / D D / Y Y Y Y 09 / 30 / 2014

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	11852	27732
(ii) Unitemized.....	0	11840
(iii) TOTAL of contributions from individuals ▶	11852	39572
(b) Political Party Committees.....	2000	2000
(c) Other Political Committees (such as PACs).....	5000	8500
(d) The Candidate.....	0	0
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	18852	50072
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0	0
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0	2500
(b) All Other Loans.....	0	800
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0	3300
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0	0
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0	496.24
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	18852	53868.24

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	20605.32	49306.19
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	0
(b) Of All Other Loans	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0	1000
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0	1000
21. OTHER DISBURSEMENTS	0	0
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	20605.32	50306.19

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	5315.37
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	18852
25. SUBTOTAL (add Line 23 and Line 24).....	24167.37
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	20605.32
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	3562.05

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 43
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Tootie Smith for Oregon

A. Full Name (Last, First, Middle Initial)
Lavay W Jeffries

Mailing Address 91 S 9th Street

City Independence State OR Zip Code 97351-1502

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

Name of Employer NIDCO Occupation School Bus Driver

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **20**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 15 / 2014

Transaction ID : A-CF213

Amount of Each Receipt this Period
 Contribution **10**

B. Full Name (Last, First, Middle Initial)
Larry Kirkpatrick

Mailing Address 89769 Green Hill Road

City Eugene State OR Zip Code 97402-9302

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **50**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 22 / 2014

Transaction ID : A-CF198

Amount of Each Receipt this Period
 Contribution **50**

C. Full Name (Last, First, Middle Initial)
Joyce Matthey

Mailing Address 2255 Nebraska Avenue NE

City Salem State OR Zip Code 97301-1504

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **40**

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 14 / 2014

Transaction ID : A-CF133

Amount of Each Receipt this Period
 Contribution **40**

SUBTOTAL of Receipts This Page (optional).....

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

100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 43
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tootie Smith for Oregon

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

Mailing Address 10190 N Umpqua Highway

City Roseburg State OR Zip Code 97470-7947

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **25**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 23 / 2014

Transaction ID : A-CF138

Amount of Each Receipt this Period
 Contribution **25**

B. Full Name (Last, First, Middle Initial)
Craig Danielson

Mailing Address PO Box 2200

City Oregon City State OR Zip Code 97045-5200

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

Name of Employer Parker Properties Occupation Real Estate Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 01 / 2014

Transaction ID : A-CF118

Amount of Each Receipt this Period
 contribution **500**

C. Full Name (Last, First, Middle Initial)
Shirley Lyons

Mailing Address 13230 S Union Hall Road

City Canby State OR Zip Code 97013-8738

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

Name of Employer S Clacamas Transit Dist Occupation PVBHC Transit MGR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **100**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 12 / 2014

Transaction ID : A-CF132

Amount of Each Receipt this Period
 contribution **100**

SUBTOTAL of Receipts This Page (optional).....

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

625.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 43
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tootie Smith for Oregon

A. Full Name (Last, First, Middle Initial)
Lawrence Sowa

Mailing Address 18438 Holly Lane

City Oregon City State OR Zip Code 97045-8530

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **50**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 01 / 2014

Transaction ID : A-CF113

Amount of Each Receipt this Period
 contribution **50**

B. Full Name (Last, First, Middle Initial)
Ann Rava

Mailing Address 8381 75th Avenue NE

City Salem State OR Zip Code 97305-9748

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

Name of Employer Seasonal Legislative Occupation Office Staff

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 11 / 2014

Transaction ID : A-CF165

Amount of Each Receipt this Period
 Contribution **200**

C. Full Name (Last, First, Middle Initial)
Ronald M Cameron

Mailing Address PO Box 21440

City Little Rock State AR Zip Code 72221-1440

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

Name of Employer Mounraire Corp Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 21 / 2014

Transaction ID : A-CF129

Amount of Each Receipt this Period
 Contribution **2600**

SUBTOTAL of Receipts This Page (optional).....

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

2850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 43
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tootie Smith for Oregon

Full Name (Last, First, Middle Initial) Brian King		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 11540 Finnegans Way		Transaction ID : A-CF200
City Oregon City	State OR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Contribution 250
Name of Employer Hals Construction Inc	Occupation Construction Worker	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

Full Name (Last, First, Middle Initial) Jean D Rice		Date of Receipt M M / D D / Y Y Y Y 09 / 11 / 2014
Mailing Address 29475 S Beaver Creek Road		Transaction ID : A-CF196
City Mulino	State OR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Contribution 15
Name of Employer N/A	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 15	

Full Name (Last, First, Middle Initial) Gary Stream		Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 10256 S Rosewood Way		Transaction ID : A-CF130
City Molalla	State OR	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period contribution 100
Name of Employer Or Dept of Corrections	Occupation Correctional Officer	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 100	

SUBTOTAL of Receipts This Page (optional).....	365.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 43
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tootie Smith for Oregon

A. Full Name (Last, First, Middle Initial)
Richard Akerman

Mailing Address 919 Westpoint Road

City Lake Oswego State OR Zip Code 97034-3748

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **50**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 03 / 2014

Transaction ID : A-CF172

Amount of Each Receipt this Period
50
 Contribution

B. Full Name (Last, First, Middle Initial)
Sandra L Sumner

Mailing Address 1442 Meadowlawn Place

City Molalla State OR Zip Code 97038-8333

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

Name of Employer Thrive Life Occupation Independent Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **62**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 08 / 2014

Transaction ID : A-CF205

Amount of Each Receipt this Period
37
 Contribution

C. Full Name (Last, First, Middle Initial)
Andrea M Raschio

Mailing Address 27875 S Highway 213

City Mulino State OR Zip Code 97042-8644

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

Name of Employer Shadownet Comm Concepts Occupation Business Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **100**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 01 / 2014

Transaction ID : A-CF112

Amount of Each Receipt this Period
100
 Contribution

SUBTOTAL of Receipts This Page (optional).....

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

187.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 43
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tootie Smith for Oregon

A. Full Name (Last, First, Middle Initial)
John Dalton

Mailing Address **PO Box 27**

City **Dallas** State **OR** Zip Code **97338-0027**

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

Name of Employer **N/A** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 26 / 2014

Transaction ID : A-CF188

Amount of Each Receipt this Period
 Contribution **5**

B. Full Name (Last, First, Middle Initial)
Stephen W Lewis

Mailing Address **1118 Lancaster Drive NE # 345**

City **Salem** State **OR** Zip Code **97301-2933**

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

Name of Employer **N/A** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 07 / 2014

Transaction ID : A-CF131

Amount of Each Receipt this Period
 Contribution **200**

C. Full Name (Last, First, Middle Initial)
C. Robert Rice

Mailing Address **29475 S Beaver Creek Road**

City **Mulino** State **OR** Zip Code **97042-8735**

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

Name of Employer **N/A** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **15**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 11 / 2014

Transaction ID : A-CF195

Amount of Each Receipt this Period
 Contribution **15**

SUBTOTAL of Receipts This Page (optional).....

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

220.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 43
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tootie Smith for Oregon

Full Name (Last, First, Middle Initial) A. Patricia L Veer		Date of Receipt M M / D D / Y Y Y Y 08 / 22 / 2014	
Mailing Address 1114 Karen Way NW		Transaction ID : A-CF191	
City Salem	State OR	Zip Code 97304-2915	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Contribution 50	
Name of Employer N/A	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date Contribution 50		

Full Name (Last, First, Middle Initial) B. Marvin Zuber		Date of Receipt M M / D D / Y Y Y Y 09 / 10 / 2014	
Mailing Address PO Box 40		Transaction ID : A-CF153	
City Ophir	State OR	Zip Code 97464-0040	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Contribution 75	
Name of Employer N/A	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date Contribution 75		

Full Name (Last, First, Middle Initial) C. Kathleen Hoch		Date of Receipt M M / D D / Y Y Y Y 09 / 09 / 2014	
Mailing Address 2444 SW Oakwood Court		Transaction ID : A-CF152	
City Dallas	State OR	Zip Code 97338-2100	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Contribution 100	
Name of Employer N/A	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date Contribution 100		

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 43
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tootie Smith for Oregon

A. Full Name (Last, First, Middle Initial)
Doris A Wehler

Mailing Address 6855 SW Boeckman Road

City Wilsonville State OR Zip Code 97070-6728

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **100**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 03 / 2014

Transaction ID : A-CF151

Amount of Each Receipt this Period
 Contribution **100**

B. Full Name (Last, First, Middle Initial)
F. Smith

Mailing Address PO Box 2005

City Salem State OR Zip Code 97308-2005

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **25**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 18 / 2014

Transaction ID : A-CF212

Amount of Each Receipt this Period
 Contribution **25**

C. Full Name (Last, First, Middle Initial)
Vic Gilliam

Mailing Address 219 S Center Street

City Silverton State OR Zip Code 97381-2209

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

Name of Employer Oregon State Legislature Occupation State Representative

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 23 / 2014

Transaction ID : A-CF137

Amount of Each Receipt this Period
 Contribution **250**

SUBTOTAL of Receipts This Page (optional).....

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

375.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 43
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tootie Smith for Oregon

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

Mailing Address 12985 101 S

City Tillamock State OR Zip Code 97141

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **50**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 19 / 2014

Transaction ID : A-CF179

Amount of Each Receipt this Period
 Contribution **50**

B. Full Name (Last, First, Middle Initial)
Tim Lussier

Mailing Address 1234 Alexander Street
Apt. 201

City Honolulu State HI Zip Code 96826-1231

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

Name of Employer Self Occupation Campaign Consulting

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **50**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 05 / 2014

Transaction ID : A-CF135

Amount of Each Receipt this Period
 Contribution **25**

C. Full Name (Last, First, Middle Initial)
Delma E Sprauer

Mailing Address PO Box 649

City Mount Angel State OR Zip Code 97362-0649

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **100**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 16 / 2014

Transaction ID : A-CF127

Amount of Each Receipt this Period
 Contribution **100**

SUBTOTAL of Receipts This Page (optional).....

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

175.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 43
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tootie Smith for Oregon

Full Name (Last, First, Middle Initial) A. Pamela Kirkpatrick		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 89769 Green Hill Road		Transaction ID : A-CF199
City Eugene	State OR	
Zip Code 97402-9302		Amount of Each Receipt this Period Contribution 50
FEC ID number of contributing federal political committee. C		
Name of Employer N/A	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date Contribution 50	

Full Name (Last, First, Middle Initial) B. Bruce Zuber		Date of Receipt M M / D D / Y Y Y Y 09 / 17 / 2014
Mailing Address PO Box 1481		Transaction ID : A-CF211
City Gold Beach	State OR	
Zip Code 97444-1481		Amount of Each Receipt this Period Contribution 100
FEC ID number of contributing federal political committee. C		
Name of Employer Zuber & Sons	Occupation Logger	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date Contribution 100	

Full Name (Last, First, Middle Initial) C. Richard Vial		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 12840 SW River Road		Transaction ID : A-CF202
City Hillsboro	State OR	
Zip Code 97123-9343		Amount of Each Receipt this Period Contribution 125
FEC ID number of contributing federal political committee. C		
Name of Employer Vialfotheringham LLP	Occupation Lawyer	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date Contribution 125	

SUBTOTAL of Receipts This Page (optional).....	275.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 43
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tootie Smith for Oregon

A. Full Name (Last, First, Middle Initial)
Pam Dalton

Mailing Address **PO Box 27**

City **Dallas** State **OR** Zip Code **97338-0027**

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

Name of Employer **N/A** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 26 / 2014

Transaction ID : A-CF190

Amount of Each Receipt this Period
 Contribution **5**

B. Full Name (Last, First, Middle Initial)
Terri B Moffett

Mailing Address **25990 Ferguson Road**

City **Junction City** State **OR** Zip Code **97448-9366**

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

Name of Employer **Tootie Smith For Oregon** Occupation **Campaign Staff**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **25**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 17 / 2014

Transaction ID : A-CF125

Amount of Each Receipt this Period
 contribution **25**

C. Full Name (Last, First, Middle Initial)
Ruth Sowa

Mailing Address **18438 Holly Lane**

City **Oregon City** State **OR** Zip Code **97045-8530**

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

Name of Employer **N/A** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **50**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 01 / 2014

Transaction ID : A-CF114

Amount of Each Receipt this Period
 contribution **50**

SUBTOTAL of Receipts This Page (optional).....

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

80.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 43
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Tootie Smith for Oregon

A. Full Name (Last, First, Middle Initial)
Kenneth E Everett

Mailing Address **PO Box 547**

City **Colton** State **OR** Zip Code **97017-0547**

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

Name of Employer **MAP,Inc** Occupation **Forester**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **50**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 09 / 2014

Transaction ID : A-CF123

Amount of Each Receipt this Period
 contribution **50**

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

Mailing Address **PO Box 5910**

City **Salem** State **OR** Zip Code **97304-0910**

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

Name of Employer **Dale Boese Construction Inc** Occupation **Building Contractor**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **50**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 25 / 2014

Transaction ID : A-CF194

Amount of Each Receipt this Period
 Contribution **50**

C. Full Name (Last, First, Middle Initial)
April King

Mailing Address **11540 Finnegans Way**

City **Oregon City** State **OR** Zip Code **97045-9770**

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

Name of Employer **Hals Construction Inc** Occupation **Construction**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 22 / 2014

Transaction ID : A-CF201

Amount of Each Receipt this Period
 Contribution **250**

SUBTOTAL of Receipts This Page (optional).....

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

350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 43
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Tootie Smith for Oregon

A. Full Name (Last, First, Middle Initial)
Jeffrey A Lampa

Mailing Address 211 Coolidge Street

City: Silverton State: OR Zip Code: 97381-2009

FEC ID number of contributing federal political committee: C

Name of Employer: RSG Forest Products Occupation: Timber Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 50

Date of Receipt: 07 / 02 / 2014

Transaction ID : A-CF115

Amount of Each Receipt this Period: 50 contribution

B. Full Name (Last, First, Middle Initial)
Pat Wildman

Mailing Address 2452 E Ellendale Avenue

City: Dallas State: OR Zip Code: 97338-9352

FEC ID number of contributing federal political committee: C

Name of Employer: Self Occupation: Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 50

Date of Receipt: 08 / 21 / 2014

Transaction ID : A-CF183

Amount of Each Receipt this Period: 50 Contribution

C. Full Name (Last, First, Middle Initial)
Herbert Koss

Mailing Address 22400 Salamo Road Suite 106

City: West Linn State: OR Zip Code: 97068-8269

FEC ID number of contributing federal political committee: C

Name of Employer: Koss Real Estate Development Occupation: Real Estate Developer & Investor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 250

Date of Receipt: 07 / 03 / 2014

Transaction ID : A-CF164

Amount of Each Receipt this Period: 250 Contribution

SUBTOTAL of Receipts This Page (optional).....

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

350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 43
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tootie Smith for Oregon

A. Full Name (Last, First, Middle Initial)
Dale Boese

Mailing Address PO Box 5910

City Salem State OR Zip Code 97304-0910

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

Name of Employer Dale Boese Construction Inc Occupation Building Contractor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **50**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 03 / 2014

Transaction ID : A-CF168

Amount of Each Receipt this Period
 Contribution **50**

B. Full Name (Last, First, Middle Initial)
Paula Vial

Mailing Address 12840 SW River Road

City Hillsboro State OR Zip Code 97123-9343

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **125**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 22 / 2014

Transaction ID : A-CF203

Amount of Each Receipt this Period
 Contribution **125**

C. Full Name (Last, First, Middle Initial)
Susan A Hurliman

Mailing Address 12985 Highway 101 S

City Tillamook State OR Zip Code 97141-8642

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **50**

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 19 / 2014

Transaction ID : A-CF181

Amount of Each Receipt this Period
 Contribution **50**

SUBTOTAL of Receipts This Page (optional).....

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

225.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 43
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tootie Smith for Oregon

A. Full Name (Last, First, Middle Initial)
Lavay W Jeffries

Mailing Address **91 S 9th Street**

City **Independence** State **OR** Zip Code **97351-1502**

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

Name of Employer **NIDCO** Occupation **School Bus Driver**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **20**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 21 / 2014

Transaction ID : A-CF185

Amount of Each Receipt this Period
 Contribution **10**

B. Full Name (Last, First, Middle Initial)
Peggy Akerman

Mailing Address **919 Westpoint Road**

City **Lake Oswego** State **OR** Zip Code **97034-3748**

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

Name of Employer **N/A** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **50**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 03 / 2014

Transaction ID : A-CF175

Amount of Each Receipt this Period
 Contribution **50**

C. Full Name (Last, First, Middle Initial)
Reusser G Gertrude

Mailing Address **3400 SE Hill Road**

City **Milwaukie** State **OR** Zip Code **97267-1571**

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

Name of Employer **N/A** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **10**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 08 / 2014

Transaction ID : A-CF206

Amount of Each Receipt this Period
 Contribution **10**

SUBTOTAL of Receipts This Page (optional).....

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

70.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 43
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Tootie Smith for Oregon

A. Full Name (Last, First, Middle Initial)
Jon Friesen

Mailing Address **PO Box 3525**

City **Portland** State **OR** Zip Code **97208-3525**

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

Name of Employer **Parr Lumber** Occupation **Manager**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 01 / 2014

Transaction ID : A-CF109

Amount of Each Receipt this Period
1000
 Contribution

B. Full Name (Last, First, Middle Initial)
George Detrick

Mailing Address **1378 Leigh Court**

City **West Linn** State **OR** Zip Code **97068-1865**

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

Name of Employer **Dale Boese Construction, Inc** Occupation **Building Contractor**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **100**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 08 / 2014

Transaction ID : A-CF217

Amount of Each Receipt this Period
100
 Contribution

C. Full Name (Last, First, Middle Initial)
Jim Sandberg

Mailing Address **13453 S Cayuse Court**

City **Molalla** State **OR** Zip Code **97038-9503**

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

Name of Employer **N/A** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **100**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 08 / 2014

Transaction ID : A-CF204

Amount of Each Receipt this Period
100
 Contribution

SUBTOTAL of Receipts This Page (optional).....

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

1200.00

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

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

FOR LINE NUMBER: PAGE 21 OF 43
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tootie Smith for Oregon

A. Full Name (Last, First, Middle Initial)
James J Welsh
 Mailing Address PO Box 185
 City State Zip Code
 Manzanita OR 97130-0185
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Manzanita Fresh Foods Grocer
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 250

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 15 / 2014
Transaction ID : A-CF134
 Amount of Each Receipt this Period
 Contribution 250

B. Full Name (Last, First, Middle Initial)
Froi E Otter
 Mailing Address 13343 S Warrick Road
 City State Zip Code
 Molalla OR 97038-9458
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 USPS Window Clerk
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 50

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 01 / 2014
Transaction ID : A-CF111
 Amount of Each Receipt this Period
 contribution 50

C. Full Name (Last, First, Middle Initial)
Sally A Down
 Mailing Address 159 Cottonwood Court N
 City State Zip Code
 Monmouth OR 97361-1804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 N/A Retired
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 10

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 18 / 2014
Transaction ID : A-CF161
 Amount of Each Receipt this Period
 Contribution 10

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

310.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 43
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tootie Smith for Oregon

Full Name (Last, First, Middle Initial) A. Sharon Zuber		Date of Receipt M M / D D / Y Y Y Y 09 / 10 / 2014
Mailing Address PO Box 40		Transaction ID : A-CF154
City Ophir	State OR	Zip Code 97464-0040
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period Contribution 75	
Name of Employer N/A	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 75	

Full Name (Last, First, Middle Initial) B. Linda S Yoshida		Date of Receipt M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address PO Box 100		Transaction ID : A-CF176
City Troutdale	State OR	Zip Code 97060-0100
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period Contribution 2000	
Name of Employer N/A	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000	

Full Name (Last, First, Middle Initial) C. Cindy Oedell		Date of Receipt M M / D D / Y Y Y Y 09 / 24 / 2014
Mailing Address 29655 S Molalla Avenue		Transaction ID : A-CF210
City Molalla	State OR	Zip Code 97038-9404
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period Contribution 110	
Name of Employer Interfore	Occupation Log Accountant	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 110	

SUBTOTAL of Receipts This Page (optional).....	2185.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 43
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Tootie Smith for Oregon

A. Full Name (Last, First, Middle Initial)
L. E. Tokarski

Mailing Address 201 Ferry Street SE
Suite 400

City Salem State OR Zip Code 97301-3775

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

Name of Employer Mountain West Investments Occupation Real Estate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 02 / 2014

Transaction ID : A-CF163

Amount of Each Receipt this Period
 Contribution **1000**

B. Full Name (Last, First, Middle Initial)
Kathleen Coffey

Mailing Address 6687 Rochester Street NE

City Salem State OR Zip Code 97305-9241

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **50**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 31 / 2014

Transaction ID : A-CF150

Amount of Each Receipt this Period
 Contribution **50**

C. Full Name (Last, First, Middle Initial)
Glenda Serex

Mailing Address 5386 Aster Street NW

City Salem State OR Zip Code 97304-3207

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 21 / 2014

Transaction ID : A-CF182

Amount of Each Receipt this Period
 Contribution **5**

SUBTOTAL of Receipts This Page (optional).....

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

1055.00

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

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

FOR LINE NUMBER: PAGE 25 OF 43
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Tootie Smith for Oregon

A. Full Name (Last, First, Middle Initial)
Marquitta B Foglesong

Mailing Address 1 Towers Lane
Apt. 2025

City Mount Angel State OR Zip Code 97362-2003

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 01 / 2014

Transaction ID : A-CF110

Amount of Each Receipt this Period
 contribution **500**

B. Full Name (Last, First, Middle Initial)
Donald Hickerson

Mailing Address 1800 N 10th Avenue

City Stayton State OR Zip Code 97383-1361

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **25**

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 09 / 2014

Transaction ID : A-CF193

Amount of Each Receipt this Period
 Contribution **25**

C. Full Name (Last, First, Middle Initial)
Earl G Down

Mailing Address 159 Cottonwood Court N

City Monmouth State OR Zip Code 97361-1804

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **10**

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 18 / 2014

Transaction ID : A-CF157

Amount of Each Receipt this Period
 Contribution **10**

SUBTOTAL of Receipts This Page (optional).....

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

535.00

11852.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 43
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tootie Smith for Oregon

A. Full Name (Last, First, Middle Initial)
New Pioneers Pac

Mailing Address 228 S Washington Street
Suite 115

City Alexandria State VA Zip Code 22314-5404

FEC ID number of contributing federal political committee. **C** C00459123

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 07 / 2014

Transaction ID : A-CF122

Amount of Each Receipt this Period
 contribution 2000

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

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

2000.00

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 43
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tootie Smith for Oregon

A. Full Name (Last, First, Middle Initial)
Value In Electing Woman Pac

Mailing Address 701 8th Street NW
Suite 500

City Washington State DC Zip Code 20001-3965

FEC ID number of contributing federal political committee. **C** C00327189

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7500

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2014

Transaction ID : A-CF209

Amount of Each Receipt this Period
 Contribution 5000

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

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

5000.00

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 43	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Tootie Smith for Oregon

Full Name (Last, First, Middle Initial) A. Oregon Republican Party		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2014
Mailing Address 25375 SW Parkway Avenue Suite 200		Amount of Each Disbursement this Period 400 Transaction ID : B-E-233
City Wilsonville State OR Zip Code 97070-7893	Purpose of Disbursement Office Rent Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ADP, LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address 1 Adp Drive Stop 600		Amount of Each Disbursement this Period 50 Transaction ID : B-E-243
City Augusta State GA Zip Code 30909-9373	Purpose of Disbursement ADP Payroll fees Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Designer Passport .Com		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2014
Mailing Address 2327 Clear Vue Lane		Amount of Each Disbursement this Period 920 Transaction ID : B-E-149
City Springfield State OR Zip Code 97477-1343	Purpose of Disbursement Web & email setup Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1370.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 43	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Tootie Smith for Oregon

Full Name (Last, First, Middle Initial) A. Kiwanda Community Center		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address PO Box 1111		Amount of Each Disbursement this Period 52.5 Transaction ID : B-E-143
City Pacific City	State OR	
Zip Code 97135-1111	Purpose of Disbursement Room rental	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ADP, LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 1 Adp Drive Stop 600		Amount of Each Disbursement this Period 119.6 Transaction ID : B-E-121
City Augusta	State GA	
Zip Code 30909-9373	Purpose of Disbursement Payroll services	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ADP, LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 1 Adp Drive Stop 600		Amount of Each Disbursement this Period 376.12 Transaction ID : B-E-167
City Augusta	State GA	
Zip Code 30909-9373	Purpose of Disbursement State payroll taxes	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	548.22
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 43		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Tootie Smith for Oregon

Full Name (Last, First, Middle Initial) A. Jennifer Thompson		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2014
Mailing Address 917 V Street		Amount of Each Disbursement this Period 1043.38 Transaction ID : B-E-230
City Springfield	State OR	
Zip Code 97477-2371	Purpose of Disbursement Payroll check	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Edonation.Com		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 117 N Saint Asaph Street		Amount of Each Disbursement this Period 76.76 Transaction ID : B-E-136
City Alexandria	State VA	
Zip Code 22314-3109	Purpose of Disbursement Credit card fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. Terri B Moffett		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 25990 Ferguson Road		Amount of Each Disbursement this Period 65.55 Transaction ID : B-E-144
City Junction City	State OR	
Zip Code 97448-9366	Purpose of Disbursement Parade candy	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1185.69
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 43			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Tootie Smith for Oregon

Full Name (Last, First, Middle Initial) A. Southwest Office Supply		Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2014
Mailing Address 3205 NW Yeon Avenue		Amount of Each Disbursement this Period 388 Transaction ID : B-E-148
City Portland	State OR	
Zip Code 97210-1538	Purpose of Disbursement Advertising: Bumper stickers/labels	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ADP, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2014
Mailing Address 1 Adp Drive Stop 600		Amount of Each Disbursement this Period 86.34 Transaction ID : B-E-229
City Augusta	State GA	
Zip Code 30909-9373	Purpose of Disbursement State payroll taxes	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Edonation.Com		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 117 N Saint Asaph Street		Amount of Each Disbursement this Period 36.14 Transaction ID : B-E-155
City Alexandria	State VA	
Zip Code 22314-3109	Purpose of Disbursement Merchant fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	510.48
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 43			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Tootie Smith for Oregon

Full Name (Last, First, Middle Initial) A. C&A Consulting		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 89358 Cranberry Lane		Amount of Each Disbursement this Period 1743.15 Transaction ID : B-E-178
City Bandon	State OR Zip Code 97411-8322	
Purpose of Disbursement Filing fee	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ADP, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2014
Mailing Address 1 Adp Drive Stop 600		Amount of Each Disbursement this Period 207.47 Transaction ID : B-E-228
City Augusta	State GA Zip Code 30909-9373	
Purpose of Disbursement Federal payroll taxes	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ADP, LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address 1 Adp Drive Stop 600		Amount of Each Disbursement this Period 94.6 Transaction ID : B-E-174
City Augusta	State GA Zip Code 30909-9373	
Purpose of Disbursement Payroll fee	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2045.22
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 43			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Tootie Smith for Oregon

Full Name (Last, First, Middle Initial) A. ADP, LLC		Date of Disbursement MM / DD / YYYY 08 / 03 / 2014
Mailing Address 1 Adp Drive Stop 600		Amount of Each Disbursement this Period 110 Transaction ID : B-E-231
City Augusta	State GA Zip Code 30909-9373	
Purpose of Disbursement Payroll fee	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Jennifer Thompson		Date of Disbursement MM / DD / YYYY 09 / 30 / 2014
Mailing Address 917 V Street		Amount of Each Disbursement this Period 1043.38 Transaction ID : B-E-170
City Springfield	State OR Zip Code 97477-2371	
Purpose of Disbursement Payroll checks	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Abc Sign Co.		Date of Disbursement MM / DD / YYYY 09 / 04 / 2014
Mailing Address 2361 12th Street SE		Amount of Each Disbursement this Period 557.25 Transaction ID : B-E-158
City Salem	State OR Zip Code 97302-2149	
Purpose of Disbursement Other: Campaign Sign Purchase	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1710.63
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 43			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Tootie Smith for Oregon

Full Name (Last, First, Middle Initial) A. Southwest Office Supply		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2014
Mailing Address 3205 NW Yeon Avenue		Amount of Each Disbursement this Period 388 Transaction ID : B-E-236
City Portland	State OR	
Zip Code 97210-1538	Purpose of Disbursement Office supplies	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Oregon Republican Party		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address 25375 SW Parkway Avenue Suite 200		Amount of Each Disbursement this Period 400 Transaction ID : B-E-141
City Wilsonville	State OR	
Zip Code 97070-7893	Purpose of Disbursement Administrative/Salary/Overhead: Aug Rent	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Terri B Moffett		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 25990 Ferguson Road		Amount of Each Disbursement this Period 559.35 Transaction ID : B-E-145
City Junction City	State OR	
Zip Code 97448-9366	Purpose of Disbursement Administrative/Salary/Overhead: mileage	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1347.35
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 43			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Tootie Smith for Oregon

Full Name (Last, First, Middle Initial) A. C&A Consulting		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 89358 Cranberry Lane		Amount of Each Disbursement this Period 1627.5 Transaction ID : B-E-146
City Bandon State OR Zip Code 97411-8322	Purpose of Disbursement management services- june 001 Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. C&A Consulting		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 89358 Cranberry Lane		Amount of Each Disbursement this Period 1000 Transaction ID : B-E-177
City Bandon State OR Zip Code 97411-8322	Purpose of Disbursement Professional Services-Primary Filings 001 Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ADP, LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 1 Adp Drive Stop 600		Amount of Each Disbursement this Period 953.22 Transaction ID : B-E-227
City Augusta State GA Zip Code 30909-9373	Purpose of Disbursement Federal payroll taxes 001 Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3580.72
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 43			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Tootie Smith for Oregon

Full Name (Last, First, Middle Initial) A. ADP, LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 1 Adp Drive Stop 600		Amount of Each Disbursement this Period 947.22 Transaction ID : B-E-166
City Augusta	State GA Zip Code 30909-9373	
Purpose of Disbursement Federal payroll taxes	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Third Century Solutions		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address 311 B Avenue Suite P		Amount of Each Disbursement this Period 1000 Transaction ID : B-E-140
City Lake Oswego	State OR Zip Code 97034-3071	
Purpose of Disbursement Primary Campain Cosulting	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ADP, LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 1 Adp Drive Stop 600		Amount of Each Disbursement this Period 376.12 Transaction ID : B-E-226
City Augusta	State GA Zip Code 30909-9373	
Purpose of Disbursement State payroll taxes	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2323.34
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 43			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Tootie Smith for Oregon

Full Name (Last, First, Middle Initial) A. Third Century Solutions		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2014
Mailing Address 311 B Avenue Suite P		Amount of Each Disbursement this Period 1000 Transaction ID : B-E-160
City Lake Oswego	State OR Zip Code 97034-3071	
Purpose of Disbursement Primary Campaign Consulting	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Terri B Moffett		Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2014
Mailing Address 25990 Ferguson Road		Amount of Each Disbursement this Period 667 Transaction ID : B-E-156
City Junction City	State OR Zip Code 97448-9366	
Purpose of Disbursement Other: Mileage	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Terri B Moffett		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 25990 Ferguson Road		Amount of Each Disbursement this Period 2307.61 Transaction ID : B-E-169
City Junction City	State OR Zip Code 97448-9366	
Purpose of Disbursement Payroll check	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3974.61
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 38 OF 43	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Tootie Smith for Oregon

Full Name (Last, First, Middle Initial) A. Edonation.Com		Date of Disbursement MM / DD / YYYY 08 / 31 / 2014
Mailing Address 117 N Saint Asaph Street		Amount of Each Disbursement this Period 40.69 Transaction ID : B-E-162
City Alexandria	State VA	
Zip Code 22314-3109	Purpose of Disbursement Merchant fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Model Progress Consulting		Date of Disbursement MM / DD / YYYY 08 / 04 / 2014
Mailing Address 1234 Alexander Street Apt. 201		Amount of Each Disbursement this Period 1000 Transaction ID : B-E-147
City Honolulu	State HI	
Zip Code 96826-1231	Purpose of Disbursement Replacement check	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Kiwanda Community Center		Date of Disbursement MM / DD / YYYY 07 / 24 / 2014
Mailing Address PO Box 1111		Amount of Each Disbursement this Period 250 Transaction ID : B-E-142
City Pacific City	State OR	
Zip Code 97135-1111	Purpose of Disbursement Security Deposit	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1290.69
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 43		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Tootie Smith for Oregon

Full Name (Last, First, Middle Initial) A. ADP, LLC		Date of Disbursement MM / DD / YYYY 07 / 03 / 2014
Mailing Address 1 Adp Drive Stop 600		Amount of Each Disbursement this Period 119.6
City Augusta	State GA Zip Code 30909-9373	
Purpose of Disbursement Payroll fee	Category/Type 001	Transaction ID : B-E-232
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	119.60
TOTAL This Period (last page this line number only).....	2006.55

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Tootie Smith for Oregon

Transaction ID : SC/10-L2

LOAN SOURCE Full Name (Last, First, Middle Initial)
C&A Consulting

Election: 2014
 Primary
 General
 Other (specify) ▼

Mailing Address
89358 Cranberry Lane

City State ZIP Code
Bandon OR 97411-8322

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
700 0 700

TERMS Date Incurred Date Due Interest Rate Secured:
M 03 / D 20 / Y 2014 M M / D D / On Demand 0.00 % (apr) Yes No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. 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)..... ▶ 700.00

TOTALS This Period (last page in this line only)..... ▶

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 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Tootie Smith for Oregon

Transaction ID : SC/10-L3

LOAN SOURCE Full Name (Last, First, Middle Initial)
Tootie Smith

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
29429 S Beaver Creek Road

City State ZIP Code
Mulino OR 97042-8735

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
2500 0 2500

TERMS

Date Incurred Date Due Interest Rate Secured:
M 03 / D 13 / Y 2014 M M / D D / On Demand 0.00 % (apr) Yes No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. 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)..... ▶ 2500.00

TOTALS This Period (last page in this line only)..... ▶

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 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Tootie Smith for Oregon

Transaction ID : SC/10-L4

LOAN SOURCE Full Name (Last, First, Middle Initial)
C&A Consulting

Election: 2014
 Primary
 General
 Other (specify) ▼

Mailing Address
89358 Cranberry Lane

City State ZIP Code
Bandon OR 97411-8322

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
100 0 100

TERMS Date Incurred Date Due Interest Rate Secured:
06 / 11 / 2013 M M / D D / On Demand 0.00 % (apr) Yes No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. 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)..... ▶ 100.00
TOTALS This Period (last page in this line only)..... ▶ 3300.00

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 3)

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)

Tootie Smith for Oregon

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Third Century Solutions

Nature of Debt (Purpose):
Administrative/Salary/Overhead: Primary Campaign Consulting

Mailing Address 311 B Avenue
Suite P

City State Zip Code
Lake Oswego OR 97034-3071

Outstanding Balance Beginning This Period
6000

Transaction ID : SD10-DEBT160

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0 2000 4000

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
C&A Consulting

Nature of Debt (Purpose):
Administrative/Salary/Overhead: Professional Services-Primary Filings

Mailing Address 89358 Cranberry Lane

City State Zip Code
Bandon OR 97411-8322

Outstanding Balance Beginning This Period
5942.5

Transaction ID : SD10-DEBT177

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0 1000 4942.5

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

- 1) **SUBTOTALS** This Period This Page (optional) ▶
- 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) ▶

8942.50
8942.50
3300.00
12242.50