

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

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

12FE4M5

Progress for Oregon

ADDRESS (number and street)

PO Box 14172

Check if different  
than previously  
reported. (ACC)

Portland

OR

97293

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00470765

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 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)July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y

in the  
State of(d) 30-Day  
POST-Election  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y

07

01

2023

through

M M M /

D D D /

Y Y Y Y Y Y

12

31

2023

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

Janelli, Steven, , ,

Signature of Treasurer

Janelli, Steven, , ,

Date

M M M /

D D D /

Y Y Y Y Y Y

01

31

2024

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Progress for OregonReport Covering the Period: From: 

|     |     |           |
|-----|-----|-----------|
| M M | D D | Y Y Y Y Y |
| 07  | 01  | 2023      |

 To: 

|     |     |           |
|-----|-----|-----------|
| M M | D D | Y Y Y Y Y |
| 12  | 31  | 2023      |

|                                                                                                                  | COLUMN A<br>This Period                   | COLUMN B<br>Calendar Year-to-Date         |
|------------------------------------------------------------------------------------------------------------------|-------------------------------------------|-------------------------------------------|
| 6. (a) Cash on Hand<br>January 1, <div><div>Y Y Y Y Y</div><div>2023</div></div>                                 |                                           | <div><div></div><div>3021.45</div></div>  |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....                                                        | <div><div></div><div>31368.51</div></div> |                                           |
| (c) Total Receipts (from Line 19) .....                                                                          | <div><div></div><div>62420.00</div></div> | <div><div></div><div>91918.00</div></div> |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | <div><div></div><div>93788.51</div></div> | <div><div></div><div>94939.45</div></div> |
| 7. Total Disbursements (from Line 31).....                                                                       | <div><div></div><div>86496.60</div></div> | <div><div></div><div>87647.54</div></div> |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | <div><div></div><div>7291.91</div></div>  | <div><div></div><div>7291.91</div></div>  |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | <div><div></div><div>0.00</div></div>     |                                           |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | <div><div></div><div>0.00</div></div>     |                                           |



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

For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov)

DETAILED SUMMARY PAGE  
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Progress for Oregon

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
07 01 2023

To:

M M / D D / Y Y Y Y  
12 31 2023

## I. Receipts

COLUMN A  
Total This PeriodCOLUMN B  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

## (i) Itemized (use Schedule A).....

55699.00

84798.00

## (ii) Unitemized .....

6221.00

6620.00

## (iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

61920.00

91418.00

## (b) Political Party Committees .....

0.00

0.00

## (c) Other Political Committees

(such as PACs).....

0.00

0.00

## (d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

61920.00

91418.00

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

500.00

500.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

## (a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

## (b) Levin Funds (from Schedule H5) .....

0.00

0.00

## (c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c)) .....

62420.00

91918.00

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

62420.00

91918.00

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

| II. Disbursements                                                                              | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|------------------------------------------------------------------------------------------------|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:                                                                    |                               |                                   |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4)                                  |                               |                                   |
| (i) Federal Share .....                                                                        | 0.00                          | 0.00                              |
| (ii) Non-Federal Share.....                                                                    | 0.00                          | 0.00                              |
| (b) Other Federal Operating Expenditures .....                                                 | 26496.60                      | 27647.54                          |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 26496.60                      | 27647.54                          |
| 22. Transfers to Affiliated/Other Party Committees.....                                        | 60000.00                      | 60000.00                          |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 0.00                          | 0.00                              |
| 24. Independent Expenditures (use Schedule E) .....                                            | 0.00                          | 0.00                              |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....                | 0.00                          | 0.00                              |
| 26. Loan Repayments Made.....                                                                  | 0.00                          | 0.00                              |
| 27. Loans Made.....                                                                            | 0.00                          | 0.00                              |
| 28. Refunds of Contributions To:                                                               |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                  | 0.00                          | 0.00                              |
| (b) Political Party Committees .....                                                           | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....                                             | 0.00                          | 0.00                              |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....                            | 0.00                          | 0.00                              |
| 29. Other Disbursements (Including Non-Federal Donations).....                                 | 0.00                          | 0.00                              |
| 30. Federal Election Activity (52 U.S.C. § 30101(20))                                          |                               |                                   |
| (a) Allocated Federal Election Activity (from Schedule H6)                                     |                               |                                   |
| (i) Federal Share .....                                                                        | 0.00                          | 0.00                              |
| (ii) "Levin" Share.....                                                                        | 0.00                          | 0.00                              |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                           | 0.00                          | 0.00                              |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....            | 0.00                          | 0.00                              |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..      | 86496.60                      | 87647.54                          |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 86496.60                      | 87647.54                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

| III. Net Contributions/<br>Operating Expenditures                                    | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--------------------------------------------------------------------------------------|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | 61920.00                      | 91418.00                          |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | 61920.00                      | 91418.00                          |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 26496.60                      | 27647.54                          |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                 | 500.00                        | 500.00                            |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....              | 25996.60                      | 27147.54                          |

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 6 OF 38  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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)

**Progress for Oregon**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Jacobson, Jeanne, , ,**

Mailing Address 2210 SW Broadway Dr

City  
PortlandState  
ORZip Code  
97201-1605FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 30 / 2023**Transaction ID : 16124500**

Amount of Each Receipt this Period

300.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/30/2023

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Barton, Brent, , ,**

Mailing Address 2454 SW Sherwood Dr

City  
PortlandState  
ORZip Code  
97201-1614FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Barton Law FirmOccupation (for Individual)  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 08 / 2023**Transaction ID : 15993820**

Amount of Each Receipt this Period

750.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/09/2023

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Walker, David, , ,**

Mailing Address 2025 SE 10th Ave

City  
PortlandState  
ORZip Code  
97214-4646FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 09 / 2023**Transaction ID : 15993830**

Amount of Each Receipt this Period

500.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/09/2023**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1550.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 7 OF 38  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Progress for Oregon**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Polishuk, Sandra, , ,**Mailing Address 1610 NE Tillamook St  
Apt 3City  
PortlandState  
ORZip Code  
97212-4464FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 17 / 2023**Transaction ID : 16075440**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Christianson, Rose, , ,**

Mailing Address 3223 NW 60th St

City  
CorvallisState  
ORZip Code  
97330-3100FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
G. Christianson Construction Inc.Occupation (for Individual)  
Office Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 12 / 2023**Transaction ID : 16079150**

Amount of Each Receipt this Period

1000.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/16/2023

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Lewis, Ramona, , ,**

Mailing Address 115 SE 52nd Ave

City  
PortlandState  
ORZip Code  
97215-1129FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 25 / 2023**Transaction ID : 16124470**

Amount of Each Receipt this Period

1000.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/30/2023**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 8 OF 38  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Progress for Oregon**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Rosenhaft, Richard, , ,**

Mailing Address 2335 NE 24th Ave

City  
PortlandState  
ORZip Code  
97212-4827FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 19 / 2023

Transaction ID : 16079170

Amount of Each Receipt this Period

1000.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/23/2023

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Dutton, Donald, , ,**

Mailing Address 6 Hotspur St

City  
Lake OswegoState  
ORZip Code  
97035-1904FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 09 / 2023

Transaction ID : 15993831

Amount of Each Receipt this Period

500.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/09/2023

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Pulvers, Roy, , ,**

Mailing Address 3250 SW Donner Way Ct

City  
PortlandState  
ORZip Code  
97239-1541FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 10 / 2023

Transaction ID : 16079141

Amount of Each Receipt this Period

500.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/16/2023

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

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

2000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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Detailed Summary PageFOR LINE NUMBER: PAGE 9 OF 38  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Progress for Oregon**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Esmonde, Joseph, Robert, ,**

Mailing Address 3558 SW Hume St

City  
PortlandState  
ORZip Code  
97219-3758FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 25 / 2023

Transaction ID : 16124471

Amount of Each Receipt this Period

550.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/30/2023

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Wiewel, Marinus, , ,**

Mailing Address 2010 SW Palatine Hill Rd

City  
PortlandState  
ORZip Code  
97219-7983FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Lewis & Clark CollegeOccupation (for Individual)  
President Emeritus

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 19 / 2023

Transaction ID : 16079171

Amount of Each Receipt this Period

500.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/23/2023

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Mackworth, Hugh, F., ,**

Mailing Address 701 Terrace Dr

City  
Lake OswegoState  
ORZip Code  
97034-4631FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-EmployedOccupation (for Individual)  
Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
08 / 04 / 2023

Transaction ID : 16183671

Amount of Each Receipt this Period

2000.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
08/06/2023

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

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

3050.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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Detailed Summary PageFOR LINE NUMBER: PAGE 10 OF 38  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Progress for Oregon**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Young, Sherilynn, , ,**

Mailing Address 6189 SW Delker Rd

City  
TualatinState  
ORZip Code  
97062-7754FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Silver Leaf Farms LLCOccupation (for Individual)  
Property Management & Land Use

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 03 / 2023

Transaction ID : 15993812

Amount of Each Receipt this Period

500.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/09/2023

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Kelly, Tom, , ,**

Mailing Address 173 NE Bridgeton Rd

City  
PortlandState  
ORZip Code  
97211-1074FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Neil KellyOccupation (for Individual)  
Contractor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 08 / 2023

Transaction ID : 15993822

Amount of Each Receipt this Period

1000.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/09/2023

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Pearson, Nena, , ,**

Mailing Address 834 SW Westwood Dr

City  
PortlandState  
ORZip Code  
97239-2743FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 26 / 2023

Transaction ID : 16201632

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

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

1700.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 11 OF 38  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Progress for Oregon**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Stout, Carol, R., ,**

Mailing Address 5440 Southwood Dr

City  
Lake OswegoState  
ORZip Code  
97035-5779FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 09 / 2023

Transaction ID : 15993832

Amount of Each Receipt this Period

550.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/09/2023

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Foster, Bernard, V., ,**

Mailing Address 7000 NE Airport Way

City  
PortlandState  
ORZip Code  
97218-1009FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
The Skanner NewspaperOccupation (for Individual)  
Publisher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
08 / 01 / 2023

Transaction ID : 16201642

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Cohen, Marguerite, , ,**

Mailing Address 620 SE 55th Ave

City  
PortlandState  
ORZip Code  
97215-1818FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Cascade Women's HealthOccupation (for Individual)  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 17 / 2023

Transaction ID : 16075442

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

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

2050.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 12 OF 38  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Progress for Oregon**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Stacchi, Gale, , ,**

Mailing Address 6320 SW Hamilton Way

City  
PortlandState  
ORZip Code  
97221-1134FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
Columbia SportswearOccupation (for Individual)  
Retail

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 17 / 2023**Transaction ID : 16075452**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Rothrock, Philip, , ,**

Mailing Address 2228 NE 22nd Ave

City  
PortlandState  
ORZip Code  
97212-4711FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 17 / 2023**Transaction ID : 16079162**

Amount of Each Receipt this Period

500.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/23/2023

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Pearson, Nena, , ,**

Mailing Address 834 SW Westwood Dr

City  
PortlandState  
ORZip Code  
97239-2743FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 26 / 2023**Transaction ID : 16124472**

Amount of Each Receipt this Period

50.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/30/2023**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

800.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 13 OF 38  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Progress for Oregon**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Prichard, Herbert, , ,**

Mailing Address 2029 SE Cypress Ave

City  
PortlandState  
ORZip Code  
97214-5407FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Mac's ListOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 20 / 2023

Transaction ID : 16079172

Amount of Each Receipt this Period

1000.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/23/2023

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Graham, Bruce, , ,**

Mailing Address PO Box 356

City  
Trout LakeState  
WAZip Code  
98650-0356FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-EmployedOccupation (for Individual)  
Rentals

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
08 / 04 / 2023

Transaction ID : 16183672

Amount of Each Receipt this Period

500.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
08/06/2023

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Swindells, Charles, , ,**

Mailing Address 451 NW Skyline Blvd

City  
PortlandState  
ORZip Code  
97229-6846FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-EmployedOccupation (for Individual)  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 30 / 2023

Transaction ID : 16124503

Amount of Each Receipt this Period

2500.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/30/2023

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

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

4000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 14 OF 38  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Progress for Oregon**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Mazzara, Frances, , ,**

Mailing Address 25901 E Highview Dr

City  
WelchesState  
ORZip Code  
97067-9745FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 08 2023

Transaction ID : 15993823

Amount of Each Receipt this Period

500.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/09/2023

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Heppner, Bonnie, J., ,**

Mailing Address 190 Miller St S

City  
SalemState  
ORZip Code  
97302-4216FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 26 2023

Transaction ID : 16201633

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Denheyer, Brian, , ,**

Mailing Address 6520 SW 36th Ave

City  
PortlandState  
ORZip Code  
97221-3376FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TeradyneOccupation (for Individual)  
Electrical Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 13 2023

Transaction ID : 16079153

Amount of Each Receipt this Period

1000.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/16/2023**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1900.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 15 OF 38  
(check only one)

|                                                |                              |                              |                             |                             |                             |                             |                             |                             |
|------------------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="checked" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**Progress for Oregon**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Curtis, Marsha, F., ,**

Mailing Address 3303 NE 31st Ave

City  
PortlandState  
ORZip Code  
97212-2620FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 17 / 2023

Transaction ID : 16075453

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Hayes, Kenneth, , ,**

Mailing Address 2500 NW Phillips Rd

City  
GastonState  
ORZip Code  
97119-8246FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-EmployedOccupation (for Individual)  
Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 17 / 2023

Transaction ID : 16079163

Amount of Each Receipt this Period

1000.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/23/2023

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Keane, Gordon, , ,**

Mailing Address 6805 SE Milwaukie Ave

City  
PortlandState  
ORZip Code  
97202-5619FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Digital Vision Inc.Occupation (for Individual)  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1099.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 26 / 2023

Transaction ID : 16124473

Amount of Each Receipt this Period

1099.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/30/2023**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2599.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 16 OF 38  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Progress for Oregon**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Russo, Nancy, , ,**

Mailing Address 2840 NW Glenwood Dr

City  
CorvallisState  
ORZip Code  
97330-3138FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 20 / 2023

Transaction ID : 16079173

Amount of Each Receipt this Period

500.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/23/2023

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Briggs, Craig, Matthew, ,**

Mailing Address 305 G Ave

City  
Lake OswegoState  
ORZip Code  
97034-2331FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Deep Green FilmsOccupation (for Individual)  
Film Maker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
08 / 04 / 2023

Transaction ID : 16183673

Amount of Each Receipt this Period

500.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
08/06/2023

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Lewis, Kathleen, , ,**

Mailing Address 1200 SW 61st Dr

City  
PortlandState  
ORZip Code  
97221-1512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-EmployedOccupation (for Individual)  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 27 / 2023

Transaction ID : 16124483

Amount of Each Receipt this Period

500.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/30/2023

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

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

1500.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 17 OF 38  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Progress for Oregon**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Wulff, Maria, , ,**

Mailing Address 2331 NE Brazee St

City  
PortlandState  
ORZip Code  
97212-4860FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 05 / 2023**Transaction ID : 15993814**

Amount of Each Receipt this Period

1000.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/09/2023

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Morrison, Michael, W., ,**

Mailing Address 2434 NE 43rd Ave

City  
PortlandState  
ORZip Code  
97213-1335FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 17 / 2023**Transaction ID : 16075444**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Weber, Patricia, , ,**

Mailing Address 2785 NW Marshall Dr

City  
CorvallisState  
ORZip Code  
97330-9719FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Marquess & Associates Inc.Occupation (for Individual)  
Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 13 / 2023**Transaction ID : 16079154**

Amount of Each Receipt this Period

500.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/16/2023**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 18 OF 38  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Progress for Oregon**

|                                                                                                                                 |             |                                        |                                                                                         |  |
|---------------------------------------------------------------------------------------------------------------------------------|-------------|----------------------------------------|-----------------------------------------------------------------------------------------|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>A. Stubbs, Marilyn, L., ,</b>             |             |                                        | Date of Receipt<br>MM / DD / YYYY<br>07 / 17 / 2023<br><b>Transaction ID : 16075454</b> |  |
| Mailing Address 7032 SW 3rd Ave                                                                                                 |             |                                        | Amount of Each Receipt this Period<br>5000.00                                           |  |
| City<br>Portland                                                                                                                | State<br>OR | Zip Code<br>97219-2214                 | <input type="checkbox"/> Memo Item                                                      |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |             |                                        |                                                                                         |  |
| Name of Employer (for Individual)<br>Not Employed                                                                               |             | Occupation (for Individual)<br>Retired |                                                                                         |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Aggregate Year-to-Date ▼<br>5000.00    |                                                                                         |  |
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>B. Benson, Carol, , ,</b>                 |             |                                        | Date of Receipt<br>MM / DD / YYYY<br>07 / 17 / 2023<br><b>Transaction ID : 16079164</b> |  |
| Mailing Address 1260 NW Naito Pkwy<br>Unit 701                                                                                  |             |                                        | Amount of Each Receipt this Period<br>500.00                                            |  |
| City<br>Portland                                                                                                                | State<br>OR | Zip Code<br>97209-3154                 | <input type="checkbox"/> Memo Item                                                      |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |             |                                        |                                                                                         |  |
| Name of Employer (for Individual)<br>Not Employed                                                                               |             | Occupation (for Individual)<br>Retired |                                                                                         |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Aggregate Year-to-Date ▼<br>500.00     |                                                                                         |  |
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>C. Dedrick, Mark, , ,</b>                 |             |                                        | Date of Receipt<br>MM / DD / YYYY<br>07 / 26 / 2023<br><b>Transaction ID : 16124474</b> |  |
| Mailing Address 528 Tennessee Ave NE                                                                                            |             |                                        | Amount of Each Receipt this Period<br>500.00                                            |  |
| City<br>Washington                                                                                                              | State<br>DC | Zip Code<br>20002-5410                 | <input type="checkbox"/> Memo Item                                                      |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |             |                                        |                                                                                         |  |
| Name of Employer (for Individual)<br>Summit Strategies LLC                                                                      |             | Occupation (for Individual)<br>Partner |                                                                                         |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)   |             | Aggregate Year-to-Date ▼<br>500.00     |                                                                                         |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶                                                                          |             |                                        | 6000.00                                                                                 |  |
| <b>TOTAL</b> This Period (last page this line number only).....▶                                                                |             |                                        |                                                                                         |  |

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 19 OF 38  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Progress for Oregon**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Russo, Nancy, , ,**

Mailing Address 2840 NW Glenwood Dr

City  
CorvallisState  
ORZip Code  
97330-3138FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 20 / 2023

Transaction ID : 16079174

Amount of Each Receipt this Period

50.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/23/2023

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Leiken, David, , ,**

Mailing Address 2990 SW Vista Dr

City  
PortlandState  
ORZip Code  
97225-4145FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DS Holdings Inc.Occupation (for Individual)  
Concert Promoter

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 30 / 2023

Transaction ID : 16124505

Amount of Each Receipt this Period

500.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/30/2023

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Reddy, Ramana, , ,**

Mailing Address 19413 SW Winslow Dr

City  
BeavertonState  
ORZip Code  
97007-6247FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EnSoftek Inc.Occupation (for Individual)  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 11 / 2023

Transaction ID : 16079145

Amount of Each Receipt this Period

1000.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/16/2023**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1550.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 20 OF 38  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Progress for Oregon**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Hertrich, Gustav, Adolf, ,**

Mailing Address PO Box 505

City  
SandyState  
ORZip Code  
97055-0505FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 17 / 2023

Transaction ID : 16075445

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Wihtol, Jeffrey, , ,**Mailing Address 420 NW 11th Ave  
Unit 1202City  
PortlandState  
ORZip Code  
97209-2976FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-EmployedOccupation (for Individual)  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 15 / 2023

Transaction ID : 16079155

Amount of Each Receipt this Period

2500.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/16/2023

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Auel, Ray, B., ,**

Mailing Address 2805 Rosecliffe Dr

City  
Lake OswegoState  
ORZip Code  
97034-5176FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 21 / 2023

Transaction ID : 16079175

Amount of Each Receipt this Period

1000.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/23/2023**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5500.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 21 OF 38  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Progress for Oregon**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Banitt, Susan, Pease, ,**

Mailing Address 7601 SW Brier Pl

City  
PortlandState  
ORZip Code  
97219-2813FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 29 / 2023

Transaction ID : 16124495

Amount of Each Receipt this Period

500.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/30/2023

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Friedenwald-Fishman, Rebecca, , ,**

Mailing Address 1606 SE Poplar Ave

City  
PortlandState  
ORZip Code  
97214-4828FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Metropolitan GroupOccupation (for Individual)  
PR Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 06 / 2023

Transaction ID : 15993817

Amount of Each Receipt this Period

1000.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/09/2023

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Raad, Sandra, , ,**

Mailing Address 5219 Boulevard Extension Rd SE

City  
OlympiaState  
WAZip Code  
98501-4967FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 02 / 2023

Transaction ID : 15926927

Amount of Each Receipt this Period

500.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/02/2023

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

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

2000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 22 OF 38  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Progress for Oregon**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Davis, Heather, Anne, ,**

Mailing Address 19963 SW Joann Ct

City  
BeavertonState  
ORZip Code  
97003-2575FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-EmployedOccupation (for Individual)  
Commercial Cleaning Service

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 25 / 2023

Transaction ID : 16201627

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Ahmad, Josefina, , ,**

Mailing Address 3205 NW Linmere Dr

City  
PortlandState  
ORZip Code  
97229-3643FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 12 / 2023

Transaction ID : 16079147

Amount of Each Receipt this Period

500.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/16/2023

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Schlachter, Robert, A., ,**

Mailing Address 4431 SW Eleanor Ln

City  
PortlandState  
ORZip Code  
97221-1272FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Stoll BerneOccupation (for Individual)  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 20 / 2023

Transaction ID : 16075457

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1500.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 23 OF 38  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Progress for Oregon**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Miller, John, , ,**Mailing Address 5290 S Landing Dr  
Unit 8ACity  
PortlandState  
ORZip Code  
97239-5925FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Land Use &amp; Agriculture &amp; Design

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 24 / 2023

Transaction ID : 16124467

Amount of Each Receipt this Period

2500.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/30/2023

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Carboneau, Teddi, , ,**

Mailing Address 4246 SE Ogden St

City  
PortlandState  
ORZip Code  
97206-8452FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Oregon RFID

Occupation (for Individual)

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 27 / 2023

Transaction ID : 16124477

Amount of Each Receipt this Period

250.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/30/2023

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Lessert, Jay, , ,**

Mailing Address 11711 SW 41st Ave

City  
PortlandState  
ORZip Code  
97219-7462FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Synopsis Inc.

Occupation (for Individual)

Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 07 / 2023

Transaction ID : 15993818

Amount of Each Receipt this Period

500.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/09/2023

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

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

3250.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 24 OF 38  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Progress for Oregon**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Clark, Olivia, N., ,**Mailing Address 5170 S Landing Dr  
Unit 303City  
PortlandState  
ORZip Code  
97239-5977FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 26 / 2023

Transaction ID : 16201628

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Scribner, Kevin, , ,**

Mailing Address 84794 Neotoma Ln

City  
Walla WallaState  
WAZip Code  
99362-9018FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 12 / 2023

Transaction ID : 16079148

Amount of Each Receipt this Period

500.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/16/2023

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Byers, Sara, C., ,**

Mailing Address 44272 SE Phelps Rd

City  
SandyState  
ORZip Code  
97055-8573FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 17 / 2023

Transaction ID : 16075448

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

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

1750.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 25 OF 38  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Progress for Oregon**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Freimark, Richard, , ,**

Mailing Address 4151 SW Bancroft St

City  
PortlandState  
ORZip Code  
97221-3755FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-EmployedOccupation (for Individual)  
Realtor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 24 / 2023

Transaction ID : 16124468

Amount of Each Receipt this Period

500.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/30/2023

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Shields, Matthew, , ,**

Mailing Address 2326 SE 60th Ave

City  
PortlandState  
ORZip Code  
97215-4076FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Oregon State BarOccupation (for Individual)  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 18 / 2023

Transaction ID : 16079168

Amount of Each Receipt this Period

500.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/23/2023

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Reardon, Jeff, , ,**

Mailing Address 12045 SE Foster Pl

City  
PortlandState  
ORZip Code  
97266-4968FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 07 / 2023

Transaction ID : 15993819

Amount of Each Receipt this Period

500.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/09/2023

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

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

1500.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 26 OF 38  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Progress for Oregon**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DeLacy, Margaret, , ,**

Mailing Address 7356 SE 30th Ave

City  
PortlandState  
ORZip Code  
97202-8837FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 09 / 2023

Transaction ID : 15993829

Amount of Each Receipt this Period

500.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/09/2023

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Denison, Harriet, Hayes, ,**

Mailing Address PO Box 10707

City  
PortlandState  
ORZip Code  
97296-0707FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 17 / 2023

Transaction ID : 16075439

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Gates, Susan, , ,**

Mailing Address 37 Hale Ln

City  
DarienState  
CTZip Code  
06820-4434FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 12 / 2023

Transaction ID : 16079149

Amount of Each Receipt this Period

500.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/16/2023**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 27 OF 38  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Progress for Oregon**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Rothrock, Philip, , ,**

Mailing Address 2228 NE 22nd Ave

City  
PortlandState  
ORZip Code  
97212-4711FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 17 / 2023

Transaction ID : 16075449

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Parry, Suzanne, , ,**

Mailing Address 14050 SW Burlwood Ln

City  
BeavertonState  
ORZip Code  
97005-2362FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-EmployedOccupation (for Individual)  
Writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 17 / 2023

Transaction ID : 16079159

Amount of Each Receipt this Period

500.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/23/2023

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Anderson, Carl, , ,**

Mailing Address 17249 SE Blackburn St

City  
DamascusState  
ORZip Code  
97089-5629FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-EmployedOccupation (for Individual)  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 25 / 2023

Transaction ID : 16124469

Amount of Each Receipt this Period

1000.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/30/2023

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

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

2000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 28 OF 38  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Progress for Oregon**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Briggs, Craig, Matthew, ,**

Mailing Address 305 G Ave

City  
Lake OswegoState  
ORZip Code  
97034-2331FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Deep Green FilmsOccupation (for Individual)  
Film Maker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 28 / 2023

Transaction ID : 16124489

Amount of Each Receipt this Period

500.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/30/2023

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Petruzelli, Dolores, , ,**

Mailing Address 9980 SW Riverwood Ln

City  
PortlandState  
ORZip Code  
97224-4540FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 30 / 2023

Transaction ID : 16124499

Amount of Each Receipt this Period

2000.00

☐ Memo Item\* Earmarked Contribution through ActBlue on  
07/30/2023

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ActBlue**

Mailing Address PO Box 441146

City  
West SomervilleState  
MAZip Code  
02144-0031FEC ID number of contributing  
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

45419.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2023

Transaction ID : 16183676E

Amount of Each Receipt this Period

45419.00

☒ Memo ItemNote: Total contribution(s) earmarked through this  
organization.

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

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

2500.00

55699.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 29 OF 38

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Progress for Oregon**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Jeff Merkley for Oregon**

Mailing Address PO Box 14172

City  
Portland

State  
OR

Zip Code  
97293-0172

FEC ID number of contributing  
federal political committee.

**C**

C00437277

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 27 / 2023

**Transaction ID : 16942917**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Return of Event Security Deposit Refund from World Forestry Center on 10/12/2023

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary  
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

500.00

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

500.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 30 OF 38

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

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NAME OF COMMITTEE (In Full)

Progress for Oregon

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144-3132

Purpose of Disbursement

Merchant Fees

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 0 | 2 |   | 2 | 0 | 2 | 3 |   |   |

FEC Identification Number

C

Transaction ID : 500316101

Amount of Each Disbursement this Period

19.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. American Express**

Mailing Address PO Box 1270

City  
NewarkState  
NJZip Code  
07101-1270

Purpose of Disbursement

Credit Card Payment - Below If Itemized

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 8 |   |   | 1 | 1 |   | 2 | 0 | 2 | 3 |   |   |

FEC Identification Number

C

Transaction ID : 500321381

Amount of Each Disbursement this Period

378.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. USPS.com**

Mailing Address 475 Lenfant Plz SW

City  
WashingtonState  
DCZip Code  
20260-0004

Purpose of Disbursement

Postage

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 8 |   |   | 1 | 1 |   | 2 | 0 | 2 | 3 |   |   |

FEC Identification Number

C

Transaction ID : 500321380

Amount of Each Disbursement this Period

378.00

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

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

397.75

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 31 OF 38

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

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NAME OF COMMITTEE (In Full)

Progress for Oregon

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144-3132

Purpose of Disbursement

Merchant Fees

Candidate Name

Category/  
Type

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 0 | 9 |   |   | 2 | 0 | 2 | 3 |   |

FEC Identification Number

C

Transaction ID : 500316891

Amount of Each Disbursement this Period

338.54

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. American Express**

Mailing Address PO Box 1270

City  
NewarkState  
NJZip Code  
07101-1270

Purpose of Disbursement

Credit Card Payment - Below If Itemized

Candidate Name

Category/  
Type

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 9 |   |   | 1 | 2 |   |   | 2 | 0 | 2 | 3 |   |

FEC Identification Number

C

Transaction ID : 500327684

Amount of Each Disbursement this Period

12907.03

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Hopworks Brewery**

Mailing Address 2944 SE Powell Blvd

City  
PortlandState  
ORZip Code  
97202-2054

Purpose of Disbursement

Catering

Candidate Name

Category/  
Type

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 9 |   |   | 1 | 2 |   |   | 2 | 0 | 2 | 3 |   |

FEC Identification Number

C

Transaction ID : 500327681

Amount of Each Disbursement this Period

388.96

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

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

13245.57

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 32 OF 38

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

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NAME OF COMMITTEE (In Full)

Progress for Oregon

Full Name (Last, First, Middle Initial)

**A. As Good As It Gets Catering**

Mailing Address 1135 SW Washington St

City  
PortlandState  
ORZip Code  
97205-2313

Purpose of Disbursement

Catering

Candidate Name

Category/  
Type

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 9 |   |   | 1 | 2 |   |   | 2 | 0 | 2 | 3 |   |

FEC Identification Number

C

Transaction ID : 500327683

Amount of Each Disbursement this Period

12424.38

☒ Memo Item \*

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144-3132

Purpose of Disbursement

Merchant Fees

Candidate Name

Category/  
Type

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:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : 500321105

Amount of Each Disbursement this Period

136.29

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Jeff Merkley for Oregon**

Mailing Address PO Box 14172

City  
PortlandState  
ORZip Code  
97293-0172

Purpose of Disbursement

Reimbursement - Facility &amp; Equipment Rental for Event

Candidate Name

MERKLEY, JEFFREY ALAN, , ,

Category/  
Type

Office Sought:

|                                     |           |
|-------------------------------------|-----------|
| <input type="checkbox"/>            | House     |
| <input checked="" type="checkbox"/> | Senate    |
| <input type="checkbox"/>            | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State: OR

District: 00

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 0 |   |   | 0 | 3 |   |   | 2 | 0 | 2 | 3 |   |

FEC Identification Number

C C00437277

Transaction ID : 500325865

Amount of Each Disbursement this Period

3333.08

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

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

3469.37

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 33 OF 38

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

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NAME OF COMMITTEE (In Full)

Progress for Oregon

Full Name (Last, First, Middle Initial)

**A. Events Unlimited**

Mailing Address PO Box 19856

City  
PortlandState  
ORZip Code  
97280-0856

Purpose of Disbursement

Facility &amp; Equipment Rental for Event

Candidate Name

Category/  
Type

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:

Date of Disbursement

|    |   |   |   |   |   |   |   |   |   |   |   |   |
|----|---|---|---|---|---|---|---|---|---|---|---|---|
| M  | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 1  | 0 |   |   | 0 | 3 |   |   |   |   |   |   | 2 |
| 08 |   |   |   |   |   |   |   |   |   |   |   |   |

FEC Identification Number

C

Transaction ID : 500325864

Amount of Each Disbursement this Period

3333.08

☒ Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Amalgamated Bank**Mailing Address 275 7th Ave  
Lbby 2City  
New YorkState  
NYZip Code  
10001-8400

Purpose of Disbursement

Bank Fees

Candidate Name

Category/  
Type

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:

Date of Disbursement

|    |   |   |   |   |   |   |   |   |   |   |   |   |
|----|---|---|---|---|---|---|---|---|---|---|---|---|
| M  | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0  | 8 |   |   | 2 | 5 |   |   |   |   |   |   | 2 |
| 08 |   |   |   |   |   |   |   |   |   |   |   |   |

FEC Identification Number

C

Transaction ID : 500323586

Amount of Each Disbursement this Period

90.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144-3132

Purpose of Disbursement

Merchant Fees

Candidate Name

Category/  
Type

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:

Date of Disbursement

|    |   |   |   |   |   |   |   |   |   |   |   |   |
|----|---|---|---|---|---|---|---|---|---|---|---|---|
| M  | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0  | 7 |   |   | 1 | 6 |   |   |   |   |   |   | 2 |
| 08 |   |   |   |   |   |   |   |   |   |   |   |   |

FEC Identification Number

C

Transaction ID : 500320037

Amount of Each Disbursement this Period

351.56

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

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

441.56

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 34 OF 38

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

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NAME OF COMMITTEE (In Full)

Progress for Oregon

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address PO Box 1270

City  
NewarkState  
NJZip Code  
07101-1270

Purpose of Disbursement

Credit Card Payment - Below If Itemized

Candidate Name

Category/  
Type

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 | 2 |   |   | 2 | 0 | 2 | 3 |   |

FEC Identification Number

C

Transaction ID : 500320557

Amount of Each Disbursement this Period

7647.27

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. As Good As It Gets Catering**

Mailing Address 1135 SW Washington St

City  
PortlandState  
ORZip Code  
97205-2313

Purpose of Disbursement

Catering

Candidate Name

Category/  
Type

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 | 2 |   |   | 2 | 0 | 2 | 3 |   |

FEC Identification Number

C

Transaction ID : 500320553

Amount of Each Disbursement this Period

3563.12

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. World Forestry Center**

Mailing Address 4033 SW Canyon Rd

City  
PortlandState  
ORZip Code  
97221-2760

Purpose of Disbursement

Event Space Rental

Candidate Name

Category/  
Type

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 | 2 |   |   | 2 | 0 | 2 | 3 |   |

FEC Identification Number

C

Transaction ID : 500320554

Amount of Each Disbursement this Period

1000.00

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

7647.27

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

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 35 OF 38

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

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NAME OF COMMITTEE (In Full)

Progress for Oregon

Full Name (Last, First, Middle Initial)

**A. World Forestry Center**

Mailing Address 4033 SW Canyon Rd

City  
PortlandState  
ORZip Code  
97221-2760

Purpose of Disbursement

Event Space Rental

Candidate Name

Category/  
Type

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 | 2 |   |   | 2 | 0 | 2 | 3 |   |

FEC Identification Number

C

Transaction ID : 500320555

Amount of Each Disbursement this Period

2750.00

☒ Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Kelly Paper**

Mailing Address 12310 Slauson Ave

City  
Santa Fe SpringsState  
CAZip Code  
90670-2629

Purpose of Disbursement

Printing of Campaign Materials

Candidate Name

Category/  
Type

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 | 2 |   |   | 2 | 0 | 2 | 3 |   |

FEC Identification Number

C

Transaction ID : 500320556

Amount of Each Disbursement this Period

334.15

☒ Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Cardmember Services**

Mailing Address PO Box 790408

City  
Saint LouisState  
MOZip Code  
63179-0408

Purpose of Disbursement

Credit Card Payment - Below If Itemized

Candidate Name

Category/  
Type

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 8 |   |   | 1 | 4 |   |   | 2 | 0 | 2 | 3 |   |

FEC Identification Number

C

Transaction ID : 500321497

Amount of Each Disbursement this Period

255.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| 2 | 5 | 5 | . | 0 | 0 |
|---|---|---|---|---|---|

  

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| 2 | 5 | 5 | . | 0 | 0 |
|---|---|---|---|---|---|

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 36 OF 38

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

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NAME OF COMMITTEE (In Full)

Progress for Oregon

Full Name (Last, First, Middle Initial)

**A. JD Fulwiler & Co. Insurance, Inc.**

Mailing Address 5727 S Macadam Ave

City  
PortlandState  
ORZip Code  
97239-3765

Purpose of Disbursement

Event Insurance

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 8 |   |   | 1 | 4 |   |   | 2 | 0 | 2 | 3 |   |

FEC Identification Number

**C**

Transaction ID : 500321496

Amount of Each Disbursement this Period

255.00

☒ Memo Item \*

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144-3132

Purpose of Disbursement

Merchant Fees

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 2 | 3 |   |   | 2 | 0 | 2 | 3 |   |

FEC Identification Number

**C**

Transaction ID : 500320038

Amount of Each Disbursement this Period

306.16

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Amalgamated Bank**Mailing Address 275 7th Ave  
Lbby 2City  
New YorkState  
NYZip Code  
10001-8400

Purpose of Disbursement

Bank Fees

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 9 |   |   | 2 | 7 |   |   | 2 | 0 | 2 | 3 |   |

FEC Identification Number

**C**

Transaction ID : 500328168

Amount of Each Disbursement this Period

30.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

336.16

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 37 OF 38

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

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NAME OF COMMITTEE (In Full)

Progress for Oregon

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144-3132

Purpose of Disbursement

Merchant Fees

Candidate Name

Category/  
Type

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 8 |   |   | 2 | 0 |   |   | 2 | 0 | 2 | 3 |   |   |

FEC Identification Number

C

Transaction ID : 500322078

Amount of Each Disbursement this Period

1.98

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Amalgamated Bank**Mailing Address 275 7th Ave  
Lbby 2City  
New YorkState  
NYZip Code  
10001-8400

Purpose of Disbursement

Bank Fees

Candidate Name

Category/  
Type

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 2 | 6 |   |   | 2 | 0 | 2 | 3 |   |   |

FEC Identification Number

C

Transaction ID : 500320019

Amount of Each Disbursement this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144-3132

Purpose of Disbursement

Merchant Fees

Candidate Name

Category/  
Type

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 | 0 |   |   | 2 | 0 | 2 | 3 |   |   |

FEC Identification Number

C

Transaction ID : 500320229

Amount of Each Disbursement this Period

641.94

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

703.92

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

26496.60

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Progress for Oregon

Full Name (Last, First, Middle Initial)

**A. Jeff Merkley for Oregon**

Mailing Address PO Box 14172

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 9 |   |   | 1 | 9 |   |   | 2 | 0 | 2 | 3 |   |

City  
PortlandState  
ORZip Code  
97293-0172

FEC Identification Number

**C** C00437277**Transaction ID : 500324600**

Amount of Each Disbursement this Period

30000.00

☐ Memo Item

Purpose of Disbursement

Joint Fundraising Transfer

Candidate Name

MERKLEY, JEFFREY ALAN, , ,

Category/  
Type

Office Sought:

|                                            |
|--------------------------------------------|
| <input type="checkbox"/> House             |
| <input checked="" type="checkbox"/> Senate |
| <input type="checkbox"/> President         |

Disbursement For:

|                                            |                                  |
|--------------------------------------------|----------------------------------|
| <input type="checkbox"/> Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |                                  |

State: OR

District: 00

Full Name (Last, First, Middle Initial)

**B. Blue Wave Project**

Mailing Address PO Box 14172

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 9 |   |   | 1 | 9 |   |   | 2 | 0 | 2 | 3 |   |

City  
PortlandState  
ORZip Code  
97293-0172

FEC Identification Number

**C** C00460972**Transaction ID : 500324601**

Amount of Each Disbursement this Period

30000.00

☐ Memo Item

Purpose of Disbursement

Joint Fundraising Transfer

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.**

Mailing Address

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
|   |   |   |   |   |   |   |   |   |   |   |   |   |

City

State

Zip Code

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item

Purpose of Disbursement

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

60000.00

60000.00