

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

JUL 18 12 09 PM '98

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (In full) BLUMENAUER FOR CONGRESS		2. FEC IDENTIFICATION NUMBER C00307314
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. PO BOX 1396		
CITY, STATE and ZIP CODE PORTLAND, OR 97207	STATE/DISTRICT OR/03	
3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		

4. TYPE OF REPORT

- | | |
|---|--|
| <input type="checkbox"/> April 15 Quarterly Report | <input type="checkbox"/> 12-Day Pre-Election Report for the _____
(Type of Election) |
| <input checked="" type="checkbox"/> July 15 Quarterly Report | election on _____ in the State of _____ |
| <input type="checkbox"/> October 15 Quarterly Report | <input type="checkbox"/> 30-Day Post-Election Report for the _____
(Type of Election) |
| <input type="checkbox"/> January 31 Year End Report | election on _____ in the State of _____ |
| <input type="checkbox"/> July 31 Mid-Year Report (Non-election Year Only) | <input type="checkbox"/> Termination Report |

This report contains activity for Primary Election General Election Special Election Runoff Election

SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
4/30/98 through 6/30/98		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	45,773.95	119,508.95
(b) Total Contribution Refunds (from Line 20(d))	1,000.	3,000.
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	44,773.95	116,508.95
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	41,082.42	112,959.92
(b) Total Offsets to Operating Expenditures (from Line 14)	681.10	826.30
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	40,401.32	112,133.62
8. Cash on Hand at Close of Reporting Period (from Line 27)	79,728.78	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20483 Toll Free 800-424-9530 Local 202-219-8420
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	

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 Susan E. Gustafson, Assistant Treasurer/Custodian of Records	Date 7/15/98
Signature of Treasurer <i>Susan Gustafson</i>	

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

--	--	--	--	--	--	--	--	--	--

FEC FORM 3
(revised 4/87)

DETAILED SUMMARY PAGE

of Receipts and Disbursements

(Page 2, FEC FORM 3)

Name of Committee (in full)	Report Covering the Period:	
<i>Blumenauer for Congress</i>	<i>C00307314</i>	From: <i>4/30/98</i> To: <i>6/30/98</i>
I. RECEIPTS	COLUMN A Total This Period	COLUMN B Calendar Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	<i>11,563.95</i>	
(ii) Unitemized	<i>3,450.</i>	
(iii) Total of contributions from individuals	<i>15,013.95</i>	<i>60,398.95</i>
(b) Political Party Committees	<i>0</i>	<i>0</i>
(c) Other Political Committees (such as PACs)	<i>30,760.</i>	<i>59,110.</i>
(d) The Candidate	<i>0</i>	<i>0</i>
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(i), (b), (c) and (d))	<i>45,773.95</i>	<i>119,508.95</i>
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	<i>0</i>	<i>0</i>
13. LOANS:		
(a) Made or Guaranteed by the Candidate	/	/
(b) All Other Loans	/	/
(c) TOTAL LOANS (add 13(a) and (b))	<i>0</i>	<i>0</i>
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	<i>681.10</i>	<i>826.30</i>
15. OTHER RECEIPTS (Dividends, Interest, etc.)	<i>0</i>	<i>0</i>
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	<i>46,455.05</i>	<i>120,335.25</i>
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES	<i>41,082.42</i>	<i>112,959.92</i>
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	<i>0</i>	<i>0</i>
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate	/	/
(b) Of All Other Loans	/	/
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))	<i>0</i>	<i>0</i>
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	<i>1,000.</i>	<i>3,000.</i>
(b) Political Party Committees	<i>0</i>	<i>0</i>
(c) Other Political Committees (such as PACs)	<i>0</i>	<i>0</i>
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	<i>1,000.</i>	<i>3,000.</i>
21. OTHER DISBURSEMENTS	<i>0</i>	<i>1,250.</i>
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	<i>42,082.42</i>	<i>117,209.92</i>

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$	<i>75,356.15</i>	
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$	<i>46,455.05</i>	
25. SUBTOTAL (Add Line 23 and Line 24)	\$	<i>121,811.20</i>	
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	\$	<i>42,082.42</i>	
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	\$	<i>79,728.78</i>	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 3
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals

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)

Blumenauer for Congress C00307314

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Larry Brady One Centerville Dr # 200 Lake Oswego, OR 97035	James Furman & Co.	5/1/98	250.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Executive	Aggregate Year-to-Date > \$ 250.	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Peter Peyser, Jr. 11000 Dobbin Dr. Potomac, MD 20854	Peyser Associates, Inc.	5/4/98	1,000.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Consultant	Aggregate Year-to-Date > \$ 1,000.	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Frederick K. Erickson, Jr. 1007 Salzman Rd. Corbett, OR 97019	Note: Information requested, not yet received.	5/5/98	250.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:	Aggregate Year-to-Date > \$ 250.	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Estle Harlan 2244 SE Lake Rd. Milwaukie, OR 97222	Harlan Business Consultants, Inc.	5/5/98	575. In Kind
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Consultant	Aggregate Year-to-Date > \$ 575	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Stan R. Amy 4115 NE 19th Ave. Portland, OR 97211	Nature's Fresh NW	5/19/98	1,000.
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retailer	Aggregate Year-to-Date > \$ 1,000.	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Nancy N. Russell 4921 SW Hewett Blvd. Portland, OR 97221		5/19/98	2,000. (Note: \$1000 refunded 5/21/98 due to overlimit.)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Conservation/parks volunteer	Aggregate Year-to-Date > \$ 2,000	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Bruce H. Russell 4921 SW Hewett Blvd. Portland, OR 97221	Bruce Russell & Assoc.	5/19/98	2,000. (Note: for Primary and General '98)
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Investment Counselor	Aggregate Year-to-Date > \$ 2,000.	

SUBTOTAL of Receipts This Page (optional) 7,075.

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals

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

PAGE 2 OF 3
FOR LINE NUMBER 11 (2) (1)

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)

Blumenauer for Congress C00307314

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ball Janik LLP 101 SW Main, #1100 Portland, OR 97204 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Partnership Occupation Aggregate Year-to-Date > \$ 500.	6/2/98	500. MEA (divided equally among 4 partners)
B. Full Name, Mailing Address and ZIP Code Paul V. Phillips 15025 SW 137th Place Tigard, OR 97224 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Pac West Communications Occupation Lobbyist Aggregate Year-to-Date > \$ 250.	6/2/98	250.
C. Full Name, Mailing Address and ZIP Code James A. Meyer 1331 SW Broadway # 201 Portland, OR 97201 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Criterion Investment Co. Occupation Investments Aggregate Year-to-Date > \$ 238.95	6/8/98	238.95 In Kind
D. Full Name, Mailing Address and ZIP Code W. Richard Cooley 1700 Woodland Terrace Lake Oswego, OR 97034 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed Occupation Investor Aggregate Year-to-Date > \$ 1,000.	6/11/98	1,000.
E. Full Name, Mailing Address and ZIP Code Susan D. Keil 2616 NW 21st Ave Vancouver, WA 98665 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer City of Portland Occupation Manager Aggregate Year-to-Date > \$ 500.	6/15/98	500.
F. Full Name, Mailing Address and ZIP Code Robert L. Harris 601 Braxton Place Alexandria, VA 22301 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Nutter & Harris, Inc. Occupation Lobbyist Aggregate Year-to-Date > \$ 250.	6/26/98	250.
G. Full Name, Mailing Address and ZIP Code William W. Miller 106 Dulaney Place Falls Church, VA 22046 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer American Public Transit Assn. Occupation President Aggregate Year-to-Date > \$ 250.	6/26/98	250.

SUBTOTAL of Receipts This Page (optional)

2,488.95

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals

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

PAGE 3 OF 3
FOR LINE NUMBER 11(a)(i)

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)

Blumenauer for Congress C00307314

A. Full Name, Mailing Address and ZIP Code <i>Brad G. Figel 5048 Klinge St NW Washington, DC 20016</i>	Name of Employer <i>Nike, Inc.</i> Occupation <i>Director, Governmental Affairs</i>	Date (month, day, year) <i>6/26/98</i>	Amount of Each Receipt this Period <i>500.</i>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ <i>500.</i>		
B. Full Name, Mailing Address and ZIP Code <i>Paula B. Garrie 4714 Linnear Ave NW Washington, DC 20008</i>	Name of Employer Occupation <i>Homemaker</i>	Date (month, day, year) <i>6/26/98</i>	Amount of Each Receipt this Period <i>500.</i>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code <i>Eric E. Merk 02134 SW Greenwood Rd. Portland, OR 97219</i>	Name of Employer <i>InSport International Inc.</i> Occupation <i>Businessperson</i>	Date (month, day, year) <i>6/26/98</i>	Amount of Each Receipt this Period <i>1,000.</i>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ <i>1,000.</i>		
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

2,000.

TOTAL This Period (last page this line number only)

11,563.95

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 6
FOR LINE NUMBER 11(c)

Contributions from Other Political Committees

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) *Blumenauer for Congress C00307314*

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<i>Dealers Election Action Committee 8400 Westpark Dr. McLean, VA 22102</i>		<i>5/1/98</i>	<i>2,000.</i>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ <i>2,000.</i>	
<i>Amalgamated Transit Union COPE 5025 Wisconsin Ave, NW Washington, DC 20016</i>		<i>5/4/98</i>	<i>1,000.</i>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ <i>1,000.</i>	
<i>TTX Co. PAC 101 N. Wacker Dr. # 1060 Chicago, IL 60606</i>		<i>5/4/98</i>	<i>250.</i>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ <i>250.</i>	
<i>Architects Council of Oregon, AIA 1207 SW Sixth Ave. Portland, OR 97204</i>		<i>5/5/98</i>	<i>60.</i>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ <i>560.</i>	
<i>Committee on Letter Carriers Political Education 100 Indiana Ave, NW Washington, DC 20001</i>		<i>5/11/98</i>	<i>1,500.</i>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ <i>1,500.</i>	
<i>Confederated Tribes of Grand Ronde 9615 Grand Ronde Rd. Grand Ronde, OR 97147</i>		<i>5/13/98</i>	<i>500.</i>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ <i>500.</i>	
<i>NEA PAC 1201 16th St, NW Washington, DC 20036</i>		<i>5/13/98</i>	<i>1,500.</i>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ <i>1,500.</i>	

SUBTOTAL of Receipts This Page (optional)	<i>6,810.</i>
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 6
FOR LINE NUMBER 11 (c)

Contributions from Other Political Committees

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)

Blumenauer for Congress C00307314

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Drive Political Fund 25 Louisiana Ave, NW Washington, DC 20001		5/15/98	5,000.
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 5,000.	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
GTE PAC 1850 M St, NW, # 1200 Washington, DC 20036		5/15/98	500.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500.	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
American Medical PAC 1101 Vermont Ave, NW Washington, DC 20005		5/20/98	1,000. <i>(Note: redesignated to General request)</i>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000.	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
PG&E Employees PAC PO Box 770000 SAN FRANCISCO, CA 94177		5/20/98	500. <i>(Note: redesignated to General request)</i>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500.	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Pacificorp Federal PAC 920 SW Sixth Ave. Portland, OR 97204		6/2/98	1,000.
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000.	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Fluor Public Affairs Committee 3353 Michelson Dr. Irvine, CA 92698		6/5/98	500.
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500.	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Deloitte & Touche LLP PAC PO Box 365 Washington, DC 20044		6/5/98	500. <i>(Note: redesignated to General request)</i>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional) 9,000.

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 6
FOR LINE NUMBER 11 (c)

Contributions from Other Political Committees

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)

Blumenauer for Congress C00307314

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Alaska Air Group PAC PO Box 68900 Seattle, WA 98168		6/13/98	500. <i>(Note: redesignated to General request)</i>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500.	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Boeing PAC 1700 N. Moore St Arlington, VA 22209		6/13/98	500.
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000.	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
American Airlines PAC 1101 17th St, NW, #600 Washington, DC 20036		6/13/98	500.
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500.	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
ASLRA PAC 1120 G St, NW, #520 Washington, DC 20006		6/15/98	500.
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500.	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
RAILPAC 50 F St, NW Washington, DC 20001		6/15/98	500.
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500.	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Bechtel PAC PO Box 193965 San Francisco, CA 94119		6/15/98	500.
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500.	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Garvey, Schubert & Dorer PAC 1000 Potomac St, NW Washington, DC 20007		6/15/98	250.
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 750.	

SUBTOTAL of Receipts This Page (optional)

3,250.

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 6
FOR LINE NUMBER 11 (c)

Contributions from Other Political Committees

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)

Blumenauer for Congress C00309314

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
I.D.E.W. - C.O.P.E. 1125 15th St, NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		6/26/98	1,000.
Aggregate Year-to-Date > \$ 3,500.			
B. Full Name, Mailing Address and ZIP Code Transportation Political Education League 14600 Detroit Ave. Cleveland, OH 44107 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		6/26/98	1,000.
Aggregate Year-to-Date > \$ 3,500.			
C. Full Name, Mailing Address and ZIP Code Responsible Citizens Political League 3 Research Place Rockville, MD 20850 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		6/26/98	500.
Aggregate Year-to-Date > \$ 500.			
D. Full Name, Mailing Address and ZIP Code O'Melveny & Myers PAC 555 13th St, NW Washington, DC 20004 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		6/26/98	500.
Aggregate Year-to-Date > \$ 500.			
E. Full Name, Mailing Address and ZIP Code Matson Federal Election Committee 333 Market St. San Francisco, CA 94105 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		6/26/98	500.
Aggregate Year-to-Date > \$ 1,000.			
F. Full Name, Mailing Address and ZIP Code NATL Committee to Preserve Social Security & Medicare PAC 10 G St, NE, # 600 Washington, DC 20002 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		6/26/98	500.
Aggregate Year-to-Date > \$ 500.			
G. Full Name, Mailing Address and ZIP Code Realtors PAC 430 N. Michigan Ave. Chicago, IL 60611 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		6/26/98	1,000.
Aggregate Year-to-Date > \$ 1,000.			

SUBTOTAL of Receipts This Page (optional)

5,000.

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 5 OF 6
FOR LINE NUMBER 11(c)

Contributions from Other Political Committees

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)

Blumenauer for Congress C00307314

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Union Pacific FFEG 600 Thirteenth St, NW, # 340 Washington, DC 20005		6/26/98	1,000.
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$ 1,000.		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Norfolk Southern Corp. GGF Three Commercial Plaza Norfolk, VA 23510		6/26/98	500.
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$ 500.		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Natl Air Traffic Controllers Assn. 1150 17th St, NW, # 701 Washington, DC 20036		6/26/98	500.
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$ 500.		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Assn. of Flight Attendants 1625 Massachusetts Ave, NW Washington, DC 20036		6/26/98	500.
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$ 500.		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Enron Corp. PAC 1400 Smith, # EG 4520 Houston, TX 77002		6/26/98	500.
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$ 500.		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
General Electric Co. PAC 1299 Pennsylvania Ave, NW, # 1100W Washington, DC 20004		6/26/98	500.
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$ 1,000.		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Hewlett-Packard Committee for Good Govt. 3000 Hanover St. Palo Alto, CA 94304		6/26/98	500.
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$ 500.		

SUBTOTAL of Receipts This Page (optional) 4,000.

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 6 OF 6
FOR LINE NUMBER 11(c)

Contributions from Other Political Committees

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)

Blumenauer for Congress C00307314

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<i>Transport Workers Union PAC 80 West End Ave. New York, NY 10023</i>		<i>6/26/98</i>	<i>500.</i>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$ <i>1,000.</i>		
<i>Amalgamated Transit Union COPE 5025 Wisconsin Ave, NW Washington, DC 20016</i>		<i>6/30/98</i>	<i>500.</i>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$ <i>1,500.</i>		
<i>NACDS PAC 413 N. Lee St. Alexandria, VA 22314</i>		<i>6/30/98</i>	<i>500.</i>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$ <i>500.</i>		
<i>Active Ballot Club (UFCW) 1775 K St, NW Washington, DC 20006</i>		<i>6/30/98</i>	<i>1,000.</i>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$ <i>1,000.</i>		
<i>unitemized contributions from other political committees</i>		<i>4/30/98 - 6/30/98</i>	<i>200.</i>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)

2,700.

TOTAL This Period (last page this line number only)

30,760.

SCHEDULE A

ITEMIZED RECEIPTS

Offsets to Operating Expenditures

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

PAGE 1 OF 1
FOR LINE NUMBER 14

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)

Blumenauer for Congress C00307314

A. Full Name, Mailing Address and ZIP Code <i>Unitized</i>	Name of Employer <i>(rebate; sale of surplus postage)</i> Occupation Aggregate Year-to-Date > \$	Date (month, day, year) <i>5/19/98 6/8/98</i>	Amount of Each Receipt this Period <i>50. 64.</i>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer <i>(refund of deposit)</i> Occupation Aggregate Year-to-Date > \$ <i>6 567.10</i>	Date (month, day, year) <i>6/15/98</i>	Amount of Each Receipt this Period <i>567.10</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) *681.10*

TOTAL This Period (last page this line number only) *681.10*

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 3
FOR LINE NUMBER 17

Operating Expenditures

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)

BLUMENAUER FOR CONGRESS C00307314

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Phil Donovan 4518 NE 28th Ave. Portland, OR 97211	payroll; reimburse; printing, parking, copies, office supplies	4/30/98	66.45
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	4/30/98	2163.46
	<input type="checkbox"/> Other (specify)	5/1/98 5/13/98	15.23 2163.46
Susan E. Gustafson 1533 NE Tillamook Portland, OR 97212	payroll; reimburse; copies, postage, telephone, volunteer supplies	4/30/98	26.64
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	4/30/98	934.32
	<input type="checkbox"/> Other (specify)	5/19/98	55.71
C. Full Name, Mailing Address and ZIP Code ↓	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General	5/12/98 6/30/98	332.46 8.56
	<input type="checkbox"/> Other (specify)		
D. Full Name, Mailing Address and ZIP Code Democratic Congressional Campaign Committee 430 South Capitol St. Washington, DC 20003	Purpose of Disbursement annual dues	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	4/30/98	6,000.
	<input type="checkbox"/> Other (specify)		
E. Full Name, Mailing Address and ZIP Code Bell Atlantic Mobile PO Box 41556 Philadelphia, PA 19101	Purpose of Disbursement telephone	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	4/30/98 5/20/98	34.70 25.95
	<input type="checkbox"/> Other (specify)		
F. Full Name, Mailing Address and ZIP Code Portland Storage 215 SE Morrison Portland, OR 97214	Purpose of Disbursement storage	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General	4/30/98 6/13/98	41. 92.
	<input type="checkbox"/> Other (specify)		
G. Full Name, Mailing Address and ZIP Code US West PO Box 12480 Seattle, WA 98111	Purpose of Disbursement telephone	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	4/30/98 6/15/98	34.82 221.57 30.62
	<input type="checkbox"/> Other (specify)		
H. Full Name, Mailing Address and ZIP Code Oregon Coordinated Campaign 711 SW Alder Portland, OR 97205	Purpose of Disbursement dues	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	5/1/98	5,000.
	<input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code tax deposit	Purpose of Disbursement taxes	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	4/30/98 5/18/98 5/1/98	1297.23 1154.83 66.89
	<input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)

18,755.95

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 3
FOR LINE NUMBER 17

Operating Expenditures

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)

BLUMENAUER FOR CONGRESS C00307314

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
<i>Greer Graphics 1220 SW Morrison #815 Portland, OR 97205</i>	<i>design & production</i> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>5/8/98</i>	<i>485.</i>
<i>MJR Strategic Services 1220 SW Morrison #910 Portland, OR 97205</i>	<i>campaign management services</i> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>5/11/98</i>	<i>5,000.</i>
<i>Multnomah Athletic Club PO Box 390 Portland, OR 97207-0390</i>	<i>CATERING</i> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>5/12/98</i>	<i>2,783.45</i>
<i>Admail 905 NW 17th Portland, OR 97210</i>	<i>POSTAGE</i> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>5/18/98</i>	<i>225.</i>
<i>Lazer Quick 825 NE Multnomah Portland, OR 97232</i>	<i>printing</i> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>5/18/98</i>	<i>179.25</i>
<i>ADP EasyPay 4099 SE International Way #203 Milwaukie, OR 97222</i>	<i>payroll service</i> Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>5/15/98 6/30/98</i>	<i>44.25 45.</i>
<i>National Finance Center PO Box 70874 Chicago, IL 60673-0874</i>	<i>health insurance</i> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>5/20/98</i>	<i>205.09</i>
<i>T&F Productions 11912 SW 25th Ave. Portland, OR 97219</i>	<i>radio production</i> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>5/20/98</i>	<i>1,000.27</i>
<i>Lori LaFave 6282 Occoquan Forest Dr. MANASSAS, VA 20112</i>	<i>fundraising services</i> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>5/28/98</i>	<i>2,000.</i>

SUBTOTAL of Disbursements This Page (optional)

12,067.31

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Operating Expenditures

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

PAGE 3 OF 3
FOR LINE NUMBER 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)

BLUMENAUER FOR CONGRESS C00307314

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
<i>Postmaster Washington, DC</i>	<i>postage</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>5/20/98</i>	<i>480.</i>
<i>Kinkos 950 NW 23rd Ave. Portland, OR 97216</i>	<i>printing</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>5/25/98</i>	<i>275.08</i>
<i>Cantrell Cutter 1789 Olive St. Capital Heights, MD 20743</i>	<i>printing</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>6/15/98</i>	<i>1579.56</i>
<i>Phoenix Park Hotel North Capitol St, NW Washington, DC 20001</i>	<i>catering</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>6/25/98</i>	<i>5,434.22</i>
<i>University Club 1225 SW Sixth Ave. Portland, OR 97204</i>	<i>catering</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>6/26/98</i>	<i>1,138.</i>
<i>unitemized disbursements</i>	<i>MISC.</i> Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>4/30/98 - 6/30/98</i>	<i>543.75</i>
<i>Estle M. Harlan</i>	<i>catering</i> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>5/5/98</i>	<i>575. In Kind</i>
<i>James A. Meyer</i>	<i>catering</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>6/8/98</i>	<i>238.95 In Kind</i>

SUBTOTAL of Disbursements This Page (optional)

10,259.16

TOTAL This Period (last page this line number only)

41,082.42

SCHEDULE B

ITEMIZED DISBURSEMENTS

Refunds of Contributions

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

PAGE 1 OF 1
FOR LINE NUMBER 20(A)

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)

BLUMENAUER FOR CONGRESS 200307314

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement <i>refund of contribution (over limit)</i>	Date (month, day, year)	Amount of Each Disbursement This Period
<i>Nancy N. Russell 4921 SW Hewett Blvd. Portland, OR 97221</i>	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>5/21/98</i>	<i>1,000.</i>
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

1,000.


TOTAL This Period (last page this line number only)

1,000.

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 7/15/98
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 PREPARER	7/18/98 DATE PREPARED