

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.

Holding Onto Oregon's Priorities

ADDRESS (number and street)

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

3. IS THIS REPORT NEW (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 / / in the State of

- (d) 30-Day POST-Election Report for the:
- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period / / through / /

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 Ms. Melissa Kardon

Signature of Treasurer Ms. Melissa Kardon [Electronically Filed] Date / /

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Holding Onto Oregon's Priorities

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2011"/>		27880.79
(b) Cash on Hand at Beginning of Reporting Period.....	3156.38	
(c) Total Receipts (from Line 19)	42000.00	86600.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	45156.38	114480.79
7. Total Disbursements (from Line 31).....	30507.37	99831.78
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	14649.01	14649.01
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Holding Onto Oregon's Priorities

Report Covering the Period: From: / / To: / /

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).....	5000.00	5000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	5000.00	5000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	7500.00	13600.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	12500.00	18600.00
12. Transfers From Affiliated/Other Party Committees.....	29500.00	68000.00
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).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	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))..... ▶	42000.00	86600.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	42000.00	86600.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) 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	5507.37	33831.78
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	5507.37	33831.78
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	25000.00	47500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	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	0.00	18500.00
30. Federal Election Activity (2 U.S.C. §431(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)) ..	30507.37	99831.78
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	30507.37	99831.78

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	12500.00	18600.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12500.00	18600.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	5507.37	33831.78
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	5507.37	33831.78

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

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

FOR LINE NUMBER: PAGE 6 OF 26
(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)
Holding Onto Oregon's Priorities

A. Full Name (Last, First, Middle Initial)
Ms. Melissa Kardon

Mailing Address 2911 NE Hancock

City State Zip Code
Portland OR 97212

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

Name of Employer Occupation
GPS, LLC Business Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 24 / 2011

Transaction ID : SA11AI.6563

Amount of Each Receipt this Period
5000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	5000.00

**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 7 OF 26
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial) A. BNSF RAILWAY COMPANY RAILPAC (BNSF RAILPAC)		Date of Receipt
Mailing Address P.O. Box 961039 Suite 220		<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2011"/>
City Fort Worth	State TX	Zip Code 76161
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00235739"/>	Transaction ID : SA11C.6562
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	<input type="text" value="5000.00"/>

Full Name (Last, First, Middle Initial) B. Realtors PAC		Date of Receipt
Mailing Address 430 N. Michigan Ave		<input type="text" value="12"/> / <input type="text" value="21"/> / <input type="text" value="2011"/>
City Chicago	State IL	Zip Code 60611
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00030718"/>	Transaction ID : SA11C.6616
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>	<input type="text" value="2500.00"/>

Full Name (Last, First, Middle Initial) C.		Date of Receipt
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text"/>	Amount of Each Receipt this Period
Name of Employer	Occupation	<input type="text"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="7500.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value="7500.00"/>

**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 8 OF 26
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 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)
Holding Onto Oregon's Priorities

A. WYDEN FOR OREGON
 Full Name (Last, First, Middle Initial)
 Mailing Address 2911 NE HANCOCK STREET
 City PORTLAND State OR Zip Code 97212
 FEC ID number of contributing federal political committee. **C** C00436998
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 47000.00

Date of Receipt 07 / 19 / 2011
Transaction ID : SA12.6615
 Amount of Each Receipt this Period 8500.00
 Transfer

B. William Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 2334 NW Tower Rock Drive
 City Bend State OR Zip Code 97701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 William Smith Properties Real Estate Developer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 07 / 08 / 2011
Transaction ID : SA12.6615.0
 Amount of Each Receipt this Period 2500.00
[MEMO ITEM]

C. Patricia Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 2334 NW Tower Rock Drive
 City Bend State OR Zip Code 97701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 La Pine School District Teacher
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 07 / 08 / 2011
Transaction ID : SA12.6615.1
 Amount of Each Receipt this Period 2500.00
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....▶	8500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 26
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 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)
Holding Onto Oregon's Priorities

A. Georges St. Laurent Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 120 NE 136th Avenue
Suite 200

City Vancouver State WA Zip Code 98684

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

Name of Employer St. Laurent Properties Occupation Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
07 / 08 / 2011
Transaction ID : SA12.6615.2

Amount of Each Receipt this Period
5000.00

[MEMO ITEM]

B. WYDEN FOR OREGON
Full Name (Last, First, Middle Initial)

Mailing Address 2911 NE HANCOCK STREET

City PORTLAND State OR Zip Code 97212

FEC ID number of contributing federal political committee. **C** C00436998

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
59000.00

Date of Receipt
08 / 03 / 2011
Transaction ID : SA12.6613

Amount of Each Receipt this Period
12000.00

Transfer

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

Mailing Address 1 Union Square South
Apt. 21

City New York State NY Zip Code 10003

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

Name of Employer Tiger Global Mgt Occupation Financial Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
07 / 25 / 2011
Transaction ID : SA12.6613.0

Amount of Each Receipt this Period
5000.00

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....▶	12000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 26
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 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)
Holding Onto Oregon's Priorities

A. Elena Shleifer
Full Name (Last, First, Middle Initial)

Mailing Address 101 Park Avenue, 48th Floor

City State Zip Code
New York NY 10178

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

Name of Employer Occupation
None Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 25 / 2011

Transaction ID : SA12.6613.1

Amount of Each Receipt this Period
5000.00

[MEMO ITEM]

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

Mailing Address 945 Back Ranch Road

City State Zip Code
Santa Cruz CA 95060

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

Name of Employer Occupation
Stanford University Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 25 / 2011

Transaction ID : SA12.6613.2

Amount of Each Receipt this Period
5000.00

[MEMO ITEM]

C. WYDEN FOR OREGON
Full Name (Last, First, Middle Initial)

Mailing Address 2911 NE HANCOCK STREET

City State Zip Code
PORTLAND OR 97212

FEC ID number of contributing federal political committee. **C** C00436998

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
68000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
08 / 20 / 2011

Transaction ID : SA12.6614

Amount of Each Receipt this Period
9000.00

Transfer

SUBTOTAL of Receipts This Page (optional).....▶	9000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 26
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 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)
Holding Onto Oregon's Priorities

A. Elizabeth Delamarter
Full Name (Last, First, Middle Initial)

Mailing Address 24411 NE 128th Street

City State Zip Code
Brush Prairie WA 98606

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

Name of Employer Occupation
None Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
08 / 11 / 2011
Transaction ID : SA12.6614.0

Amount of Each Receipt this Period
5000.00

[MEMO ITEM]

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

Mailing Address 24411 NE 128th Street

City State Zip Code
Brush Prairie WA 98606

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

Name of Employer Occupation
Prestige Care Inc. CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
08 / 05 / 2011
Transaction ID : SA12.6614.1

Amount of Each Receipt this Period
5000.00

[MEMO ITEM]

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	29500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 4099 SE International Way
Suite 203

City Milwaukie State OR Zip Code 97222

Purpose of Disbursement
Payroll Fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 25 / 2011

Transaction ID : SB21B.6582

Amount of Each Disbursement this Period

9.69

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 4099 SE International Way
Suite 203

City Milwaukie State OR Zip Code 97222

Purpose of Disbursement
Payroll Fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 27 / 2011

Transaction ID : SB21B.6583

Amount of Each Disbursement this Period

96.61

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 4099 SE International Way
Suite 203

City Milwaukie State OR Zip Code 97222

Purpose of Disbursement
Payroll Processing

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 28 / 2011

Transaction ID : SB21B.6580

Amount of Each Disbursement this Period

94.61

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

200.91

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

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

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

FOR LINE NUMBER:
(check only one)

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

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)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 4099 SE International Way
Suite 203

City Milwaukie State OR Zip Code 97222

Purpose of Disbursement
Payroll Taxes

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.6581

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 4099 SE International Way
Suite 203

City Milwaukie State OR Zip Code 97222

Purpose of Disbursement
Payroll Processing

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.6590

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 4099 SE International Way
Suite 203

City Milwaukie State OR Zip Code 97222

Purpose of Disbursement
Payroll Taxes

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.6598

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 4099 SE International Way
Suite 203

City Milwaukie State OR Zip Code 97222

Purpose of Disbursement
Payroll Processing

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.6591

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 4099 SE International Way
Suite 203

City Milwaukie State OR Zip Code 97222

Purpose of Disbursement
Payroll Taxes

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.6593

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 4099 SE International Way
Suite 203

City Milwaukie State OR Zip Code 97222

Purpose of Disbursement
Payroll Taxes

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.6584

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 4099 SE International Way
Suite 203

City Milwaukie State OR Zip Code 97222

Purpose of Disbursement
Payroll Processing

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 30 / 2011

Transaction ID : SB21B.6597

Amount of Each Disbursement this Period

96.61

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 4099 SE International Way
Suite 203

City Milwaukie State OR Zip Code 97222

Purpose of Disbursement
Payroll Processing

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 29 / 2011

Transaction ID : SB21B.6586

Amount of Each Disbursement this Period

94.61

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 4099 SE International Way
Suite 203

City Milwaukie State OR Zip Code 97222

Purpose of Disbursement
Payroll Taxes

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 29 / 2011

Transaction ID : SB21B.6587

Amount of Each Disbursement this Period

145.88

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

337.10

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

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

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

FOR LINE NUMBER:
(check only one)

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

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)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)

A. AT&T Mobility

Mailing Address PO Box 536216

City Atlanta State GA Zip Code 30353-6216

Purpose of Disbursement
Telephone Service

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.6574

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. AT&T Mobility

Mailing Address PO Box 536216

City Atlanta State GA Zip Code 30353-6216

Purpose of Disbursement
Telephone Service

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.6596

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. AT&T Mobility

Mailing Address PO Box 536216

City Atlanta State GA Zip Code 30353-6216

Purpose of Disbursement
Telephone Service

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.6577

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)

A. AT&T Mobility

Mailing Address PO Box 536216

City Atlanta State GA Zip Code 30353-6216

Purpose of Disbursement
Telephone Service

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2011

Transaction ID : SB21B.6579

Amount of Each Disbursement this Period

227.90

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address PO Box 53132

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement
Credit Card Payment

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 11 / 2011

Transaction ID : SB21B.6564

Amount of Each Disbursement this Period

140.46

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address PO Box 53132

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement
Credit Card

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 13 / 2011

Transaction ID : SB21B.6570

Amount of Each Disbursement this Period

54.99

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

423.35

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

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

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

FOR LINE NUMBER:
(check only one)

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

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)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)

A. Qwest Communications

Mailing Address 310 SW Park Avenue

City Portland State OR Zip Code 97205

Purpose of Disbursement
Telephone Service

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.6570.0

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address PO Box 53132

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement
Credit Card

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.6617

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Qwest Communications

Mailing Address 310 SW Park Avenue

City Portland State OR Zip Code 97205

Purpose of Disbursement
Telephone Service

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.6617.0

Amount of Each Disbursement this Period

[MEMO ITEM]

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address PO Box 53132

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement
Credit Card

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.6576

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Qwest Communications

Mailing Address 310 SW Park Avenue

City Portland State OR Zip Code 97205

Purpose of Disbursement
Telephone Service

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.6576.0

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address PO Box 53132

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement
Credit Card

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.6578

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)

A. Qwest Communications

Mailing Address 310 SW Park Avenue

City Portland State OR Zip Code 97205

Purpose of Disbursement Telephone Service

001
Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB21B.6578.0

Amount of Each Disbursement this Period

71.49

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address PO Box 53132

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement Bank Fees

001
Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 29 / 2011

Transaction ID : SB21B.6589

Amount of Each Disbursement this Period

30.00

Full Name (Last, First, Middle Initial)

C. NARAL Prochoice Oregon

Mailing Address 310 Southwest 4th Ave

City Portland State OR Zip Code 97204-2345

Purpose of Disbursement Event Tickets

001
Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 28 / 2011

Transaction ID : SB21B.6573

Amount of Each Disbursement this Period

250.00

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

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

280.00

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

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

FOR LINE NUMBER:
(check only one)

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

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)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)

A. NGP Software, Inc.

Mailing Address 1101 Vermont Avenue, NW
Suite 710

City Washington State DC Zip Code 20005

Purpose of Disbursement
Database

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.6567

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. NGP Software, Inc.

Mailing Address 1101 Vermont Avenue, NW
Suite 710

City Washington State DC Zip Code 20005

Purpose of Disbursement
Database

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.6571

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Jocelyn Tyree

Mailing Address 8935 SW Bellflower Street

City Tigard State OR Zip Code 97224

Purpose of Disbursement
Salary

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.6599

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)

A. Jocelyn Tyree

Mailing Address 8935 SW Bellflower Street

City Tigard State OR Zip Code 97224

Purpose of Disbursement
Salary

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2011

Transaction ID : SB21B.6594

Amount of Each Disbursement this Period

420.13

Full Name (Last, First, Middle Initial)

B. Jocelyn Tyree

Mailing Address 8935 SW Bellflower Street

City Tigard State OR Zip Code 97224

Purpose of Disbursement
Salary

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2011

Transaction ID : SB21B.6585

Amount of Each Disbursement this Period

409.27

Full Name (Last, First, Middle Initial)

C. Jocelyn Tyree

Mailing Address 8935 SW Bellflower Street

City Tigard State OR Zip Code 97224

Purpose of Disbursement
Salary

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2011

Transaction ID : SB21B.6588

Amount of Each Disbursement this Period

409.27

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

1238.67

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

--

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

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

FOR LINE NUMBER:
(check only one)

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

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)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)

A. Verizon

Mailing Address P.O. Box 19707

City Irvine State CA Zip Code 92623-9707

Purpose of Disbursement Telephone Service

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 27 / 2011

Transaction ID : SB21B.6565

Amount of Each Disbursement this Period

45.66

Full Name (Last, First, Middle Initial)

B. Verizon

Mailing Address P.O. Box 19707

City Irvine State CA Zip Code 92623-9707

Purpose of Disbursement Telephone Service

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 09 / 2011

Transaction ID : SB21B.6569

Amount of Each Disbursement this Period

97.52

Full Name (Last, First, Middle Initial)

C. Verizon

Mailing Address P.O. Box 19707

City Irvine State CA Zip Code 92623-9707

Purpose of Disbursement Telephone Service

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 02 / 2011

Transaction ID : SB21B.6595

Amount of Each Disbursement this Period

43.12

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

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

186.30

5454.49

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)

A. BERKLEY FOR CONGRESS

Mailing Address 3077 E WARM SPRINGS RD SUITE 300

City LAS VEGAS State NV Zip Code 89120

Purpose of Disbursement

Candidate Name
BERKLEY FOR CONGRESS

Office Sought: House Senate President
State: NV District: 01
Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 21 / 2011

Transaction ID : **SB23.6606**

Amount of Each Disbursement this Period

2500.00

Category/
Type

Full Name (Last, First, Middle Initial)

B. Bob Casey for Senate

Mailing Address PO Box 1177

City Harrisburg State PA Zip Code 17108

Purpose of Disbursement

Candidate Name
Bob Casey for Senate

Office Sought: House Senate President
State: District:
Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 11 / 2011

Transaction ID : **SB23.6568**

Amount of Each Disbursement this Period

5000.00

Category/
Type

Full Name (Last, First, Middle Initial)

C. BONAMICI FOR CONGRESS

Mailing Address 2236 SE 10TH AVE

City PORTLAND State OR Zip Code 97214

Purpose of Disbursement

Candidate Name
BONAMICI FOR CONGRESS

Office Sought: House Senate President
State: OR District: 01
Disbursement For: 2012
 Primary General
 Other (specify) ▼
Special-General

Date of Disbursement

MM / DD / YYYY
12 / 29 / 2011

Transaction ID : **SB23.6610**

Amount of Each Disbursement this Period

5000.00

Category/
Type

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

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

12500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)

A. FEINSTEIN FOR SENATE

Mailing Address 1801 AVENUE OF THE STARS SUITE 829

City LOS ANGELES State CA Zip Code 90067

Purpose of Disbursement

011

Candidate Name
DIANNE FEINSTEIN

Category/
Type

Office Sought: House
 Senate
 President
State: CA District: 00

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 21 / 2011

Transaction ID : **SB23.6602**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. KLOBUCHAR FOR MINNESOTA

Mailing Address PO BOX 4146
PO BOX 4146

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement

011

Candidate Name
AMY KLOBUCHAR

Category/
Type

Office Sought: House
 Senate
 President
State: MN District: 00

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 26 / 2011

Transaction ID : **SB23.6572**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. KLOBUCHAR FOR MINNESOTA

Mailing Address PO BOX 4146
PO BOX 4146

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement

011

Candidate Name
AMY KLOBUCHAR

Category/
Type

Office Sought: House
 Senate
 President
State: MN District: 00

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 21 / 2011

Transaction ID : **SB23.6605**

Amount of Each Disbursement this Period

2500.00

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

10000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)

A. KLOBUCHAR FOR MINNESOTA

Mailing Address PO BOX 4146
PO BOX 4146

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement

011

Candidate Name

AMY KLOBUCHAR

Category/
Type

Office Sought: House
 Senate
 President
State: MN District: 00

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 21 / 2011

Transaction ID : **SB23.6633**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. KURT SCHRADER FOR CONGRESS

Mailing Address 607 N. Main St
Suite 240

City Oregon City State OR Zip Code 97045

Purpose of Disbursement

011

Candidate Name

KURT SCHRADER

Category/
Type

Office Sought: House
 Senate
 President
State: OR District: 05

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : **SB23.6575**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. WU FOR CONGRESS

Mailing Address 818 SW Third Ave., #1182

City Portland State OR Zip Code 97204

Purpose of Disbursement
Uncashed Check

010

Candidate Name

WU FOR CONGRESS

Category/
Type

Office Sought: House
 Senate
 President
State: OR District: 01

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 30 / 2011

Transaction ID : **SB23.6601**

Amount of Each Disbursement this Period

-5000.00

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

2500.00

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

25000.00