

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 32
(check only one)

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

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
Dale Seale

Mailing Address 12691 SE 137th Dr

City State Zip Code
Clackamas OR 97015-5475

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

Name of Employer Providence Health Systems Occupation Registered Nurse

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt
MM / DD / YYYY
08 / 09 / 2007

Transaction ID: 80930.C92601

Amount of Each Receipt this Period
200.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Peter Stott

Mailing Address 2896 SW Patton Road

City State Zip Code
Portland OR 97204-3701

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

Name of Employer Crown Pacific Occupation President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
08 / 13 / 2007

Transaction ID: 80930.C92621

Amount of Each Receipt this Period
2500.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	2700.00
TOTAL This Period (last page this line number only)	▶	11129.00