

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

Office Use Only

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

12FE4M5

OREGON REPUBLICAN PARTY

ADDRESS (number and street)

PO BOX 1586

Check if different  
than previously  
reported. (ACC)

LAKE OSWEGO

OR

97035

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00153031

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15  
Quarterly Report (Q1)
- ☐ July 15  
Quarterly Report (Q2)
- ☐ October 15  
Quarterly Report (Q3)
- ☐ January 31  
Year-End Report (YE)
- ☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)
- ☐ Termination Report  
(TER)

(b) Monthly  
Report  
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)  
(Non-Election  
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)  
(Non-Election  
Year Only)
- ☐ Apr 20 (M4) ☒ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

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

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

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

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

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

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

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
06 01 2026

through

M M M / D D D / Y Y Y Y Y Y  
06 30 2026

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

MILLER, GLENN, , ,

Signature of Treasurer

MILLER, GLENN, , ,

Date

M M M / D D D / Y Y Y Y Y Y  
07 20 2026

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

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**OREGON REPUBLICAN PARTY**

Report Covering the Period: From: MM / DD / YYYY 06 / 01 / 2026 To: MM / DD / YYYY 06 / 30 / 2026

|                                                                                                                  | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|------------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand<br>January 1, YYYY YYYY                                                                      |                         | 277593.04                         |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....                                                        | 264173.77               |                                   |
| (c) Total Receipts (from Line 19) .....                                                                          | 51641.39                | 200456.26                         |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | 315815.16               | 478049.30                         |
| 7. Total Disbursements (from Line 31) .....                                                                      | 5437.46                 | 167671.60                         |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....                        | 310377.70               | 310377.70                         |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                   |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 0.00                    |                                   |



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

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

# DETAILED SUMMARY PAGE

## of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

OREGON REPUBLICAN PARTY

Report Covering the Period:

From:

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

To:

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

| I. Receipts                                                                                                 | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|-------------------------------------------------------------------------------------------------------------|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:                                                                  |                               |                                   |
| (a) Individuals/Persons Other<br>Than Political Committees<br>(i) Itemized (use Schedule A).....            | 11626.26                      | 39225.46                          |
| (ii) Unitemized .....                                                                                       | 1930.67                       | 45392.93                          |
| (iii) TOTAL (add<br>Lines 11(a)(i) and (ii)).....▶                                                          | 13556.93                      | 84618.39                          |
| (b) Political Party Committees .....                                                                        | 0.00                          | 0.00                              |
| (c) Other Political Committees<br>(such as PACs).....                                                       | 0.00                          | 0.00                              |
| (d) Total Contributions (add Lines<br>11(a)(iii), (b), and (c)) (Carry<br>Totals to Line 33, page 5) .....  | 13556.93                      | 84618.39                          |
| 12. Transfers From Affiliated/Other<br>Party Committees.....                                                | 38084.46                      | 115837.87                         |
| 13. All Loans Received .....                                                                                | 0.00                          | 0.00                              |
| 14. Loan Repayments Received.....                                                                           | 0.00                          | 0.00                              |
| 15. Offsets To Operating Expenditures<br>(Refunds, Rebates, etc.)<br>(Carry Totals to Line 37, page 5)..... | 0.00                          | 0.00                              |
| 16. Refunds of Contributions Made<br>to Federal Candidates and Other<br>Political Committees.....           | 0.00                          | 0.00                              |
| 17. Other Federal Receipts<br>(Dividends, Interest, etc.).....                                              | 0.00                          | 0.00                              |
| 18. Transfers from Non-Federal and Levin Funds                                                              |                               |                                   |
| (a) Non-Federal Account<br>(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),<br>12, 13, 14, 15, 16, 17, and 18(c)) .....                            | 51641.39                      | 200456.26                         |
| 20. Total Federal Receipts<br>(subtract Line 18(c) from Line 19) .....                                      | 51641.39                      | 200456.26                         |

# **DETAILED SUMMARY PAGE** of Disbursements

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Page 4

| II. Disbursements                                                                              | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|------------------------------------------------------------------------------------------------|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:                                                                    |                               |                                   |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4)                                  |                               |                                   |
| (i) Federal Share .....                                                                        | 814.22                        | 7788.69                           |
| (ii) Non-Federal Share.....                                                                    | 3063.00                       | 29300.28                          |
| (b) Other Federal Operating Expenditures .....                                                 | 1560.24                       | 50207.13                          |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 5437.46                       | 87296.10                          |
| 22. Transfers to Affiliated/Other Party Committees.....                                        | 0.00                          | 79000.00                          |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 0.00                          | 0.00                              |
| 24. Independent Expenditures (use Schedule E) .....                                            | 0.00                          | 0.00                              |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....                | 0.00                          | 0.00                              |
| 26. Loan Repayments Made.....                                                                  | 0.00                          | 0.00                              |
| 27. Loans Made.....                                                                            | 0.00                          | 0.00                              |
| 28. Refunds of Contributions To:                                                               |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                  | 0.00                          | 0.00                              |
| (b) Political Party Committees .....                                                           | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....                                             | 0.00                          | 0.00                              |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....                            | 0.00                          | 0.00                              |
| 29. Other Disbursements (Including Non-Federal Donations).....                                 | 0.00                          | 1375.50                           |
| 30. Federal Election Activity (52 U.S.C. § 30101(20))                                          |                               |                                   |
| (a) Allocated Federal Election Activity (from Schedule H6)                                     |                               |                                   |
| (i) Federal Share .....                                                                        | 0.00                          | 0.00                              |
| (ii) "Levin" Share.....                                                                        | 0.00                          | 0.00                              |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                           | 0.00                          | 0.00                              |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....            | 0.00                          | 0.00                              |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..      | 5437.46                       | 167671.60                         |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 2374.46                       | 138371.32                         |

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

| <b>III. Net Contributions/<br/>Operating Expenditures</b>                             | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Calendar Year-to-Date</b> |
|---------------------------------------------------------------------------------------|---------------------------------------|-------------------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....         | 13556.93                              | 84618.39                                  |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                             | 0.00                                  | 0.00                                      |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....     | 13556.93                              | 84618.39                                  |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) .....▶ | 2374.46                               | 57995.82                                  |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                  | 0.00                                  | 0.00                                      |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....▶              | 2374.46                               | 57995.82                                  |

# **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 29

(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)

**OREGON REPUBLICAN PARTY**

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

**A. AKERMAN, RICHARD, , ,**

Mailing Address 3166 STONEBRIDGE WAY

City  
LAKE OSWEGO

State  
OR

Zip Code  
97034

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.25

Date of Receipt

06 / 26 / 2026

Transaction ID : SA11AI.11812

Amount of Each Receipt this Period

104.10

☐ Memo Item

EARMARKED THROUGH WINRED [SA11AI.11704]

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

**B. BACHHUBER, MARTIN, , ,**

Mailing Address 11026 SW MADRONE CT

City  
TUALATIN

State  
OR

Zip Code  
97062

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.25

Date of Receipt

06 / 20 / 2026

Transaction ID : SA11AI.11793

Amount of Each Receipt this Period

52.05

☐ Memo Item

EARMARKED THROUGH WINRED [SA11AI.11700]

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

**C. BURNS, DAVID, R, ,**

Mailing Address 22887 JENNE ROAD

City  
LYONS

State  
OR

Zip Code  
97358

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

675.00

Date of Receipt

06 / 11 / 2026

Transaction ID : SA11AI.11712

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

256.15

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 7 OF 29  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**OREGON REPUBLICAN PARTY**

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

**A. CHAO, LAIZA, , ,**

Mailing Address 12042 SE SUNNYSIDE RD

City  
CLACKAMASState  
ORZip Code  
97015FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

981.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 12 / 2026

Transaction ID : SA11AI.11713

Amount of Each Receipt this Period

721.96

☐ Memo Item

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

**B. DEVLAEINCK, JESSICA, , ,**

Mailing Address PO BOX 966

City  
THE DALLESState  
ORZip Code  
97058FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DEVCO MECHANICALOccupation (for Individual)  
BOOKKEEPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

655.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 26 / 2026

Transaction ID : SA11AI.11816

Amount of Each Receipt this Period

10.41

☐ Memo Item

EARMARKED THROUGH WINRED [SA11A1.11704]

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

**C. DITUSA-BROWN, ADAM, , ,**

Mailing Address 1660 TIMBER WOODS LANE

City  
LIBERTYVILLEState  
ILZip Code  
60048FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HEADWINDS LLCOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 11 / 2026

Transaction ID : SA11AI.11715

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

982.37

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 8 OF 29  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**OREGON REPUBLICAN PARTY**

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

**A. DITUSABROWN, ADAM, , ,**

Mailing Address 2400 SW TURNER RD

City  
WEST LINNState  
ORZip Code  
97068FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ENTREPRENEUROccupation (for Individual)  
ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 03 / 2026

Transaction ID : SA11AI.11744

Amount of Each Receipt this Period

52.05

☐ Memo Item

EARMARKED THROUGH WINRED [SA11AI.11434]

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

**B. GJURGEVICH, JUSTINE, , ,**

Mailing Address 16993 ROYAL COACHMAN DR

City  
SISTERSState  
ORZip Code  
97759FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 18 / 2026

Transaction ID : SA11AI.11799

Amount of Each Receipt this Period

52.05

☐ Memo Item

EARMARKED THROUGH WINRED [SA11AI.11700]

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

**C. HELLER, HELEN, , ,**

Mailing Address 8205 SW OAK ST

City  
PORTLANDState  
ORZip Code  
97223FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

890.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 09 / 2026

Transaction ID : SA11AI.11718

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

604.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 9 OF 29  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**OREGON REPUBLICAN PARTY**

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

**A. JONCUS, STEPHEN, , ,**

Mailing Address 22900 SE NAOMI CT

City  
BORINGState  
ORZip Code  
97089FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JONCUS LAW PCOccupation (for Individual)  
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.46

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 24 / 2026

Transaction ID : SA11A1.11803

Amount of Each Receipt this Period

10.00

☐ Memo Item

EARMARKED THROUGH WINRED [SA11A1.11700]

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

**B. JONCUS, STEPHEN, , ,**

Mailing Address 22900 SE NAOMI CT

City  
BORINGState  
ORZip Code  
97089FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JONCUS LAW PCOccupation (for Individual)  
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.87

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 25 / 2026

Transaction ID : SA11A1.11820

Amount of Each Receipt this Period

10.41

☐ Memo Item

EARMARKED THROUGH WINRED [SA11A1.11704]

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

**C. MILLER, GLENN, , ,**

Mailing Address 717 NORTHEAST 64TH PLACE

City  
HILLSBOROState  
ORZip Code  
97124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TTM TECHNOLOGOESOccupation (for Individual)  
IT MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200.87

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 01 / 2026

Transaction ID : SA11A1.11745

Amount of Each Receipt this Period

10.41

☐ Memo Item

EARMARKED THROUGH WINRED [SA11A1.11434]

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

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

30.82

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 10 OF 29  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**OREGON REPUBLICAN PARTY**

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

**A. MILLER, GLENN, , ,**

Mailing Address 717 NORTHEAST 64TH PLACE

City  
HILLSBOROState  
ORZip Code  
97124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TTM TECHNOLOGOESOccupation (for Individual)  
IT MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 16 / 2026

Transaction ID : SA11AI.11729

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

**B. NASHIF, MARK, , ,**

Mailing Address 7100 NE 67TH ST

City  
VANCOUVERState  
WAZip Code  
98661FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GATEWAY COMMUNICATIONS INCOccupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 13 / 2026

Transaction ID : SA11AI.11786

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED THROUGH WINRED [SA11A1.11699]

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

**C. RAPALYEA, STEPHEN, , ,**

Mailing Address PO BOX 805 40030 9MILE RD.

City  
CHILOQUINState  
ORZip Code  
97624FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 16 / 2026

Transaction ID : SA11AI.11790

Amount of Each Receipt this Period

26.03

☐ Memo Item

EARMARKED THROUGH WINRED [SA11A1.11699]

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

1036.03

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 11 OF 29  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**OREGON REPUBLICAN PARTY**

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

**A. RAPALYEA, STEPHEN, , ,**

Mailing Address PO BOX 805 40030 9MILE RD.

City  
CHILOQUINState  
ORZip Code  
97624FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 19 / 2026

Transaction ID : SA11A1.11806

Amount of Each Receipt this Period

10.41

☐ Memo Item

EARMARKED THROUGH WINRED [SA11A1.11700]

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

**B. SAWYER, CYNTHIA, , ,**

Mailing Address 8165 SW RIDGEWAY DR

City  
PORTLANDState  
ORZip Code  
97225FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 11 / 2026

Transaction ID : SA11A1.11731

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**C. SAYLER, MARY, , ,**

Mailing Address 1414 S CORBETT HILL CIR

City  
PORTLANDState  
ORZip Code  
97219FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1041.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 09 / 2026

Transaction ID : SA11A1.11763

Amount of Each Receipt this Period

1041.02

☐ Memo Item

EARMARKED THROUGH WINRED [SA11A1.11435]

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

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

1551.43

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 12 OF 29  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**OREGON REPUBLICAN PARTY**

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

**A. SEASHORE, TONY, , ,**

Mailing Address 18022 SKYLAND CIRCLE

City  
LAKE OSWEGOState  
ORZip Code  
97034FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TSCMOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 16 / 2026

Transaction ID : SA11AI.11734

Amount of Each Receipt this Period

2000.00

☐ Memo Item

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

**B. SLAGLE, MIKE, , ,**

Mailing Address 1427 46TH PL SE

City  
SALEMState  
ORZip Code  
97317FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WESTPRO LABOccupation (for Individual)  
AEROSPACE INDUSTRY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.11

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 24 / 2026

Transaction ID : SA11AI.11808

Amount of Each Receipt this Period

10.41

☐ Memo Item

EARMARKED THROUGH WINRED [SA11AI.11700]

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

**C. WINRED**Mailing Address 1603 CAPITOL AVENUE  
SUITE 413-B562City  
CHEYENNEState  
WYZip Code  
82001FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

9325.25

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 08 / 2026

Transaction ID : SA11AI.11434

Amount of Each Receipt this Period

90.57

☒ Memo ItemTOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED. ITEMIZED IF REQUIRED

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

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

2010.41

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 13 OF 29  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**OREGON REPUBLICAN PARTY**

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

**A. WINRED**Mailing Address 1603 CAPITOL AVENUE  
SUITE 413-B562City  
CHEYENNEState  
WYZip Code  
82001FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10631.81

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 15 / 2026

Transaction ID : SA11AI.11435

Amount of Each Receipt this Period

1306.56

☒ Memo ItemTOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED. ITEMIZED IF REQUIRED

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

**B. WINRED**Mailing Address 1603 CAPITOL AVENUE  
SUITE 413-B562City  
CHEYENNEState  
WYZip Code  
82001FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11772.59

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 22 / 2026

Transaction ID : SA11AI.11699

Amount of Each Receipt this Period

1140.78

☒ Memo ItemTOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED. ITEMIZED IF REQUIRED

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

**C. WINRED**Mailing Address 1603 CAPITOL AVENUE  
SUITE 413-B562City  
CHEYENNEState  
WYZip Code  
82001FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

12064.66

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 29 / 2026

Transaction ID : SA11AI.11700

Amount of Each Receipt this Period

292.07

☒ Memo ItemTOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED. ITEMIZED IF REQUIRED

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

0.00

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: PAGE 14 OF 29  
(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**

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

### A. WINRED

Mailing Address 1603 CAPITOL AVENUE  
SUITE 413-B562

City  
CHEYENNE

State  
WY

Zip Code  
82001

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12526.17

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11AI.11704

Amount of Each Receipt this Period

461.51

☒ Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED. ITEMIZED IF REQUIRED

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

### B. WITT, BRYAN, , ,

Mailing Address PO BOX 272

City

WEST LINN

State

OR

Zip Code

97068

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

EXECUTIVE SECURITY SERVICES INC

Occupation (for Individual)

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10309.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 08 / 2026

Transaction ID : SA11AI.11740

Amount of Each Receipt this Period

5154.95

☐ Memo Item

EXCESS TRANSFERRED TO STATE ACCOUNT ON  
7/20

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

### C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ 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

☐ Memo Item

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

5154.95

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

11626.26

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 15 OF 29  
(check only one)  

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**OREGON REPUBLICAN PARTY**

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

**A. CALUGAR, DANIEL, G, ,**Mailing Address 1 HUGHES CENTER DR  
UNIT 1404City  
LAS VEGASState  
NVZip Code  
89169FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1613.95

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 25 / 2026

Transaction ID : SA12.11830

Amount of Each Receipt this Period

1613.95

☒ Memo Item

JFC TRANSFER: NRSC VICTORY

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

**B. FERTITTA, FRANK, , ,**Mailing Address 10120 W FLAMINGO RD  
STE 4267City  
LAS VEGASState  
NVZip Code  
89147FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STATION CASINOSOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3939.53

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 24 / 2026

Transaction ID : SA12.11834

Amount of Each Receipt this Period

3939.53

☒ Memo Item

JFC TRANSFER: NRSC VICTORY

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

**C. FERTITTA, LORENZO, , ,**Mailing Address 10120 W FLAMINGO RD  
STE 4267City  
LAS VEGASState  
NVZip Code  
89147FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FERTITTA CAPITALOccupation (for Individual)  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3939.53

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 24 / 2026

Transaction ID : SA12.11832

Amount of Each Receipt this Period

3939.53

☒ Memo Item

JFC TRANSFER: NRSC VICTORY

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

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

0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 29

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**OREGON REPUBLICAN PARTY**

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

**A. FOSTER, PAUL, , ,**Mailing Address 123 W MILLS AVE  
STE 600City  
EL PASOState  
TXZip Code  
79901FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
FRANKLIN MOUNTAIN MANAGEMENTOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 17 / 2025

Transaction ID : SA12.11839

Amount of Each Receipt this Period

- 8683.81

☒ Memo Item

JFC TRANSFER: GROW THE MAJORITY

2025 AGGREGATE

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

**B. GABBAY, MAYA, , ,**

Mailing Address 10640 LENNOX LANE

City  
DALLASState  
TXZip Code  
75229FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SWGR REALTYOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 26 / 2026

Transaction ID : SA12.11836

Amount of Each Receipt this Period

10000.00

☒ Memo Item

JFC TRANSFER: NRSC VICTORY

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

**C. GROW THE MAJORITY**

Mailing Address 228 S WASHINGTON ST STE 115

City  
ALEXANDRIAState  
VAZip Code  
22314FEC ID number of contributing  
federal political committee.**C** C00858373

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

110.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA12.11828

Amount of Each Receipt this Period

10.00

☐ Memo ItemJFC TRANSFER: SEE ATTRIBUTION(S) ABOVE  
ITEMIZATION THRESHOLD

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

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

10.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 29

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**OREGON REPUBLICAN PARTY**

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

**A. NRSC VICTORY**Mailing Address 228 S WASHINGTON ST  
STE 115City  
ALEXANDRIAState  
VAZip Code  
22314FEC ID number of contributing  
federal political committee.**C**

C00837518

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

96727.87

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2026

Transaction ID : SA12.11826

Amount of Each Receipt this Period

38074.46

☐ Memo ItemJFC TRANSFER: SEE ATTRIBUTION(S) ABOVE  
ITEMIZATION THRESHOLD

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

**B. WYNN, ANDREA, , ,**

Mailing Address 2449 N TENAYA WAY

City

LAS VEGAS

State  
NVZip Code  
89133FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
ENTREPRENEUROccupation (for Individual)  
ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 22 / 2026

Transaction ID : SA12.11838

Amount of Each Receipt this Period

10000.00

☒ Memo Item

JFC TRANSFER: NRSC VICTORY

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

**C. WYNN, STEPHEN, , ,**

Mailing Address 2449 N TENAYA WAY

City

LAS VEGAS

State  
NVZip Code  
89133FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
VALMORE GPOccupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 22 / 2026

Transaction ID : SA12.11837

Amount of Each Receipt this Period

10000.00

☒ Memo Item

JFC TRANSFER: NRSC VICTORY

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

38074.46

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

38084.46

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

PAGE 18 OF 29

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

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NAME OF COMMITTEE (In Full)

**OREGON REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. ACCESSORY APPEAL**

Mailing Address 520 NE THIRD STREET

City  
MCMINNVILLEState  
ORZip Code  
97128

Purpose of Disbursement

DONOR GIFTS

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 0 | 5 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

**C**

Transaction ID : SB21B.11854

Amount of Each Disbursement this Period

49.95

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. AMAZON**

Mailing Address 410 TERRY AVE N

City  
SEATTLEState  
WAZip Code  
98109

Purpose of Disbursement

DONOR GIFTS

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

**C**

Transaction ID : SB21B.11855

Amount of Each Disbursement this Period

38.97

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT INC.**Mailing Address 1340 POYDRAS STREET  
SUITE 1770City  
NEW ORLEANSState  
LAZip Code  
70112

Purpose of Disbursement

MERCHANT FEES

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 0 | 5 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

**C**

Transaction ID : SB21B.11841

Amount of Each Disbursement this Period

0.60

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

0.60

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

PAGE 19 OF 29

☒ 21b    ☐ 22    ☐ 23    ☐ 26    ☐ 27  
☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**OREGON REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. ANEDOT INC.**Mailing Address 1340 POYDRAS STREET  
SUITE 1770City  
NEW ORLEANSState  
LAZip Code  
70112

Purpose of Disbursement

MERCHANT FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** **Transaction ID : SB21B.11842**

Amount of Each Disbursement this Period

 172.75☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT INC.**Mailing Address 1340 POYDRAS STREET  
SUITE 1770City  
NEW ORLEANSState  
LAZip Code  
70112

Purpose of Disbursement

MERCHANT FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** **Transaction ID : SB21B.11843**

Amount of Each Disbursement this Period

 28.05☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT INC.**Mailing Address 1340 POYDRAS STREET  
SUITE 1770City  
NEW ORLEANSState  
LAZip Code  
70112

Purpose of Disbursement

MERCHANT FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** **Transaction ID : SB21B.11844**

Amount of Each Disbursement this Period

 25.57☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 226.37

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

PAGE 20 OF 29

☒ 21b    ☐ 22    ☐ 23    ☐ 26    ☐ 27  
☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**OREGON REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. ANEDOT INC.**Mailing Address 1340 POYDRAS STREET  
SUITE 1770City  
NEW ORLEANSState  
LAZip Code  
70112

Purpose of Disbursement

MERCHANT FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** **Transaction ID : SB21B.11845**

Amount of Each Disbursement this Period

 70.90☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT INC.**Mailing Address 1340 POYDRAS STREET  
SUITE 1770City  
NEW ORLEANSState  
LAZip Code  
70112

Purpose of Disbursement

MERCHANT FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 2 | 5 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

**C** **Transaction ID : SB21B.11846**

Amount of Each Disbursement this Period

 0.45☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DIRECT MAIL SYSTEMS, INC**Mailing Address 1551 102ND AVENUE NORTH  
SUITE ACity  
SAINT PETERSBURGState  
FLZip Code  
33716

Purpose of Disbursement

DIRECT MAIL SERVICES GENERAL PARTY FUNDRAISING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** **Transaction ID : SB21B.11847**

Amount of Each Disbursement this Period

 544.75☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 616.10

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

OREGON REPUBLICAN PARTY

116.10

District:

The image shows three 16-pin DIP packages. The first package is labeled '06' and has 'M' and 'M' markings. The second package is labeled '09' and has 'D' and 'D' markings. The third package is labeled '2026' and has 'Y' and 'Y' markings. Each package has a notch on the top edge.

56.70

District:

17.81

District:

0.00

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

PAGE 22 OF 29

☒ 21b    ☐ 22    ☐ 23    ☐ 26    ☐ 27  
☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**OREGON REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. NW FOOD & GIFTS**

Mailing Address 445 NE 3RD STREET

City  
MCMINNVILLEState  
ORZip Code  
97128

Purpose of Disbursement

DONOR GIFTS

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 0 | 5 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

**C****Transaction ID : SB21B.11861**

Amount of Each Disbursement this Period

178.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. PENDLETON**

Mailing Address 8500 SE MCLOUGHLIN BLVD

City  
PORTLANDState  
ORZip Code  
97222

Purpose of Disbursement

DONOR GIFTS

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.11863**

Amount of Each Disbursement this Period

9.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. SMITH, LAURI, , ,**

Mailing Address 13825 PARRETT MOUNTAIN RD

City  
SHERWOODState  
ORZip Code  
97140

Purpose of Disbursement

EXPENSE REIMBURSEMENT: SEE ITEMIZATIONS IF REQUIRED

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.11846**

Amount of Each Disbursement this Period

575.53

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

|   |   |   |   |   |   |  |  |  |  |  |  |  |  |
|---|---|---|---|---|---|--|--|--|--|--|--|--|--|
| 5 | 7 | 5 | . | 5 | 3 |  |  |  |  |  |  |  |  |
|---|---|---|---|---|---|--|--|--|--|--|--|--|--|

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

OREGON REPUBLICAN PARTY

FEC Schedule B (Form 3X) Rev. 05/2016

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

PAGE 24 OF 29

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

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NAME OF COMMITTEE (In Full)

**OREGON REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES, LLC**Mailing Address 1603 CAPITOL AVENUE  
SUITE 413-B561City  
CHEYENNEState  
WYZip Code  
82001

Purpose of Disbursement

MERCHANT FEES

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.11849**

Amount of Each Disbursement this Period

18.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES, LLC**Mailing Address 1603 CAPITOL AVENUE  
SUITE 413-B561City  
CHEYENNEState  
WYZip Code  
82001

Purpose of Disbursement

MERCHANT FEES

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 1 | 5 |   |   | 2 | 0 | 2 | 6 |   |

FEC Identification Number

**C****Transaction ID : SB21B.11850**

Amount of Each Disbursement this Period

53.59

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES, LLC**Mailing Address 1603 CAPITOL AVENUE  
SUITE 413-B561City  
CHEYENNEState  
WYZip Code  
82001

Purpose of Disbursement

MERCHANT FEES

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.11851**

Amount of Each Disbursement this Period

46.81

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

118.65

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

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

PAGE 25 OF 29

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

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NAME OF COMMITTEE (In Full)

**OREGON REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES, LLC**Mailing Address 1603 CAPITOL AVENUE  
SUITE 413-B561City  
CHEYENNEState  
WYZip Code  
82001

Purpose of Disbursement

MERCHANT FEES

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 2 | 9 |   |   | 2 | 0 | 2 | 6 |   |

FEC Identification Number

**C** **Transaction ID : SB21B.11852**

Amount of Each Disbursement this Period

 11.98☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** 

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** 

Amount of Each Disbursement this Period

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

11.98

1560.24

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 26 OF 29

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

OREGON REPUBLICAN PARTY

|                                                                                                                |             |                   |                                                                                                                         |  |
|----------------------------------------------------------------------------------------------------------------|-------------|-------------------|-------------------------------------------------------------------------------------------------------------------------|--|
| <b>A. Full Name (Last, First, Middle Initial) Transaction ID : H4.11870</b> <input type="checkbox"/> Memo Item |             |                   | Allocated Activity or Event:                                                                                            |  |
| KSLM RADIO                                                                                                     |             |                   | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt |  |
| Mailing Address 732 HAWTHORNE AVE NE                                                                           |             |                   | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support                                  |  |
| City<br>SALEM                                                                                                  | State<br>OR | Zip Code<br>97301 | <input type="checkbox"/> Public Comm (ref to party only) by PAC                                                         |  |
| Purpose of Disbursement:<br>RENT                                                                               |             | Category/<br>Type | Allocated Activity or Event Year-To-Date                                                                                |  |
| Activity or Event Identifier:<br>Administrative                                                                |             |                   | 33511.75                                                                                                                |  |
| FEDERAL SHARE                                                                                                  |             | +                 | NONFEDERAL SHARE                                                                                                        |  |
| 63.00                                                                                                          |             |                   | 237.00                                                                                                                  |  |
|                                                                                                                |             | =                 | TOTAL AMOUNT                                                                                                            |  |
|                                                                                                                |             |                   | 300.00                                                                                                                  |  |

|                                                                                                                |             |                   |                                                                                                                         |  |
|----------------------------------------------------------------------------------------------------------------|-------------|-------------------|-------------------------------------------------------------------------------------------------------------------------|--|
| <b>B. Full Name (Last, First, Middle Initial) Transaction ID : H4.11873</b> <input type="checkbox"/> Memo Item |             |                   | Allocated Activity or Event:                                                                                            |  |
| RED CURVE SOLUTIONS, LLC                                                                                       |             |                   | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt |  |
| Mailing Address 100 CUMMINGS CENTER<br>STE 306-P                                                               |             |                   | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support                                  |  |
| City<br>BEVERLY                                                                                                | State<br>MA | Zip Code<br>01915 | <input type="checkbox"/> Public Comm (ref to party only) by PAC                                                         |  |
| Purpose of Disbursement:<br>DATA PROCESSING SERVICES                                                           |             | Category/<br>Type | Allocated Activity or Event Year-To-Date                                                                                |  |
| Activity or Event Identifier:<br>Administrative                                                                |             |                   | 33692.52                                                                                                                |  |
| FEDERAL SHARE                                                                                                  |             | +                 | NONFEDERAL SHARE                                                                                                        |  |
| 37.96                                                                                                          |             |                   | 142.81                                                                                                                  |  |
|                                                                                                                |             | =                 | TOTAL AMOUNT                                                                                                            |  |
|                                                                                                                |             |                   | 180.77                                                                                                                  |  |

|                                                                                                                |             |                   |                                                                                                                         |  |
|----------------------------------------------------------------------------------------------------------------|-------------|-------------------|-------------------------------------------------------------------------------------------------------------------------|--|
| <b>C. Full Name (Last, First, Middle Initial) Transaction ID : H4.11872</b> <input type="checkbox"/> Memo Item |             |                   | Allocated Activity or Event:                                                                                            |  |
| PUBLIC STORAGE                                                                                                 |             |                   | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt |  |
| Mailing Address 1815 HYACINTH ST NE                                                                            |             |                   | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support                                  |  |
| City<br>SALEM                                                                                                  | State<br>OR | Zip Code<br>97301 | <input type="checkbox"/> Public Comm (ref to party only) by PAC                                                         |  |
| Purpose of Disbursement:<br>STORAGE                                                                            |             | Category/<br>Type | Allocated Activity or Event Year-To-Date                                                                                |  |
| Activity or Event Identifier:<br>Administrative                                                                |             |                   | 34099.52                                                                                                                |  |
| FEDERAL SHARE                                                                                                  |             | +                 | NONFEDERAL SHARE                                                                                                        |  |
| 85.47                                                                                                          |             |                   | 321.53                                                                                                                  |  |
|                                                                                                                |             | =                 | TOTAL AMOUNT                                                                                                            |  |
|                                                                                                                |             |                   | 407.00                                                                                                                  |  |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 186.43        |   | 701.34           |   | 887.77       |

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

|               |  |                  |  |              |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE |  | NONFEDERAL SHARE |  | TOTAL AMOUNT |
|               |  |                  |  |              |

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 27 OF 29

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

OREGON REPUBLICAN PARTY

|                                                                             |       |          |                                    |                                                                                                                         |              |
|-----------------------------------------------------------------------------|-------|----------|------------------------------------|-------------------------------------------------------------------------------------------------------------------------|--------------|
| <b>A. Full Name (Last, First, Middle Initial) Transaction ID : H4.11876</b> |       |          | <input type="checkbox"/> Memo Item | Allocated Activity or Event:                                                                                            |              |
| TWILIO SENDGRID                                                             |       |          |                                    | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt |              |
| Mailing Address PO BOX 735926                                               |       |          |                                    | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support                                  |              |
| City                                                                        | State | Zip Code |                                    | <input type="checkbox"/> Public Comm (ref to party only) by PAC                                                         |              |
| DALLAS                                                                      | TX    | 75373    |                                    | Allocated Activity or Event Year-To-Date                                                                                |              |
| Purpose of Disbursement:                                                    |       |          | Category/<br>Type                  | 34269.47                                                                                                                |              |
| SUBSCRIPTIONS                                                               |       |          |                                    | Date <input type="text" value="06"/> / <input type="text" value="04"/> / <input type="text" value="2026"/>              |              |
| Activity or Event Identifier:                                               |       |          |                                    |                                                                                                                         |              |
| Administrative                                                              |       |          |                                    |                                                                                                                         |              |
| FEDERAL SHARE                                                               |       | +        | NONFEDERAL SHARE                   | =                                                                                                                       | TOTAL AMOUNT |
| 35.69                                                                       |       |          | 134.26                             |                                                                                                                         | 169.95       |

|                                                                             |       |          |                                    |                                                                                                                         |              |
|-----------------------------------------------------------------------------|-------|----------|------------------------------------|-------------------------------------------------------------------------------------------------------------------------|--------------|
| <b>B. Full Name (Last, First, Middle Initial) Transaction ID : H4.11875</b> |       |          | <input type="checkbox"/> Memo Item | Allocated Activity or Event:                                                                                            |              |
| SAASANT INC                                                                 |       |          |                                    | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt |              |
| Mailing Address 16192 COASTAL HIGHWAY                                       |       |          |                                    | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support                                  |              |
| City                                                                        | State | Zip Code |                                    | <input type="checkbox"/> Public Comm (ref to party only) by PAC                                                         |              |
| LEWES                                                                       | DE    | 19958    |                                    | Allocated Activity or Event Year-To-Date                                                                                |              |
| Purpose of Disbursement:                                                    |       |          | Category/<br>Type                  | 34284.47                                                                                                                |              |
| SUBSCRIPTIONS                                                               |       |          |                                    | Date <input type="text" value="06"/> / <input type="text" value="09"/> / <input type="text" value="2026"/>              |              |
| Activity or Event Identifier:                                               |       |          |                                    |                                                                                                                         |              |
| Administrative                                                              |       |          |                                    |                                                                                                                         |              |
| FEDERAL SHARE                                                               |       | +        | NONFEDERAL SHARE                   | =                                                                                                                       | TOTAL AMOUNT |
| 3.15                                                                        |       |          | 11.85                              |                                                                                                                         | 15.00        |

|                                                                             |       |          |                                    |                                                                                                                         |              |
|-----------------------------------------------------------------------------|-------|----------|------------------------------------|-------------------------------------------------------------------------------------------------------------------------|--------------|
| <b>C. Full Name (Last, First, Middle Initial) Transaction ID : H4.11871</b> |       |          | <input type="checkbox"/> Memo Item | Allocated Activity or Event:                                                                                            |              |
| MICROSOFT                                                                   |       |          |                                    | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt |              |
| Mailing Address 1 MICROSOFT WAY                                             |       |          |                                    | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support                                  |              |
| City                                                                        | State | Zip Code |                                    | <input type="checkbox"/> Public Comm (ref to party only) by PAC                                                         |              |
| REDMOND                                                                     | WA    | 98052    |                                    | Allocated Activity or Event Year-To-Date                                                                                |              |
| Purpose of Disbursement:                                                    |       |          | Category/<br>Type                  | 34443.97                                                                                                                |              |
| SUBSCRIPTIONS                                                               |       |          |                                    | Date <input type="text" value="06"/> / <input type="text" value="10"/> / <input type="text" value="2026"/>              |              |
| Activity or Event Identifier:                                               |       |          |                                    |                                                                                                                         |              |
| Administrative                                                              |       |          |                                    |                                                                                                                         |              |
| FEDERAL SHARE                                                               |       | +        | NONFEDERAL SHARE                   | =                                                                                                                       | TOTAL AMOUNT |
| 33.50                                                                       |       |          | 126.00                             |                                                                                                                         | 159.50       |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 72.34         |   | 272.11           |   | 344.45       |

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

|               |                  |              |
|---------------|------------------|--------------|
| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
|               |                  |              |

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 28 OF 29

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

OREGON REPUBLICAN PARTY

|                                                                                                                |       |                   |                                                                                                                         |  |
|----------------------------------------------------------------------------------------------------------------|-------|-------------------|-------------------------------------------------------------------------------------------------------------------------|--|
| <b>A. Full Name (Last, First, Middle Initial) Transaction ID : H4.11868</b> <input type="checkbox"/> Memo Item |       |                   | Allocated Activity or Event:                                                                                            |  |
| GO BIG MEDIA, INC.                                                                                             |       |                   | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt |  |
| Mailing Address PO BOX 25026                                                                                   |       |                   | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support                                  |  |
| City                                                                                                           | State | Zip Code          | <input type="checkbox"/> Public Comm (ref to party only) by PAC                                                         |  |
| WASHINGTON                                                                                                     | DC    | 20027             |                                                                                                                         |  |
| Purpose of Disbursement:                                                                                       |       | Category/<br>Type | Allocated Activity or Event Year-To-Date                                                                                |  |
| DIGITAL CONSULTING                                                                                             |       |                   | 35443.97                                                                                                                |  |
| Activity or Event Identifier:                                                                                  |       | Date              | M M / D D / Y Y Y Y Y Y                                                                                                 |  |
| Administrative                                                                                                 |       |                   | 06 / 16 / 2026                                                                                                          |  |
| FEDERAL SHARE                                                                                                  |       | +                 | NONFEDERAL SHARE                                                                                                        |  |
| 210.00                                                                                                         |       |                   | 790.00                                                                                                                  |  |
|                                                                                                                |       | =                 | TOTAL AMOUNT                                                                                                            |  |
|                                                                                                                |       |                   | 1000.00                                                                                                                 |  |

|                                                                                                                |       |                   |                                                                                                                         |  |
|----------------------------------------------------------------------------------------------------------------|-------|-------------------|-------------------------------------------------------------------------------------------------------------------------|--|
| <b>B. Full Name (Last, First, Middle Initial) Transaction ID : H4.11874</b> <input type="checkbox"/> Memo Item |       |                   | Allocated Activity or Event:                                                                                            |  |
| RED CURVE SOLUTIONS, LLC                                                                                       |       |                   | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt |  |
| Mailing Address 100 CUMMINGS CENTER                                                                            |       |                   | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support                                  |  |
| STE 306-P                                                                                                      |       |                   | <input type="checkbox"/> Public Comm (ref to party only) by PAC                                                         |  |
| City                                                                                                           | State | Zip Code          |                                                                                                                         |  |
| BEVERLY                                                                                                        | MA    | 01915             |                                                                                                                         |  |
| Purpose of Disbursement:                                                                                       |       | Category/<br>Type | Allocated Activity or Event Year-To-Date                                                                                |  |
| COMPLIANCE CONSULTING                                                                                          |       |                   | 36943.97                                                                                                                |  |
| Activity or Event Identifier:                                                                                  |       | Date              | M M / D D / Y Y Y Y Y Y                                                                                                 |  |
| Administrative                                                                                                 |       |                   | 06 / 16 / 2026                                                                                                          |  |
| FEDERAL SHARE                                                                                                  |       | +                 | NONFEDERAL SHARE                                                                                                        |  |
| 315.00                                                                                                         |       |                   | 1185.00                                                                                                                 |  |
|                                                                                                                |       | =                 | TOTAL AMOUNT                                                                                                            |  |
|                                                                                                                |       |                   | 1500.00                                                                                                                 |  |

|                                                                                                                |       |                   |                                                                                                                         |  |
|----------------------------------------------------------------------------------------------------------------|-------|-------------------|-------------------------------------------------------------------------------------------------------------------------|--|
| <b>C. Full Name (Last, First, Middle Initial) Transaction ID : H4.11869</b> <input type="checkbox"/> Memo Item |       |                   | Allocated Activity or Event:                                                                                            |  |
| INTUIT                                                                                                         |       |                   | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt |  |
| Mailing Address 2800 E COMMERCE CENTER PLACE                                                                   |       |                   | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support                                  |  |
| City                                                                                                           | State | Zip Code          | <input type="checkbox"/> Public Comm (ref to party only) by PAC                                                         |  |
| TUCSON                                                                                                         | AZ    | 85706             |                                                                                                                         |  |
| Purpose of Disbursement:                                                                                       |       | Category/<br>Type | Allocated Activity or Event Year-To-Date                                                                                |  |
| SUBSCRIPTIONS                                                                                                  |       |                   | 37058.97                                                                                                                |  |
| Activity or Event Identifier:                                                                                  |       | Date              | M M / D D / Y Y Y Y Y Y                                                                                                 |  |
| Administrative                                                                                                 |       |                   | 06 / 24 / 2026                                                                                                          |  |
| FEDERAL SHARE                                                                                                  |       | +                 | NONFEDERAL SHARE                                                                                                        |  |
| 24.15                                                                                                          |       |                   | 90.85                                                                                                                   |  |
|                                                                                                                |       | =                 | TOTAL AMOUNT                                                                                                            |  |
|                                                                                                                |       |                   | 115.00                                                                                                                  |  |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

|               |   |                  |   |              |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 549.15        |   | 2065.85          |   | 2615.00      |

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

|               |                  |              |
|---------------|------------------|--------------|
| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
|               |                  |              |

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 29 OF 29

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

OREGON REPUBLICAN PARTY

|                                                                                                                |             |                                                                                                      |                                                                                                                         |  |
|----------------------------------------------------------------------------------------------------------------|-------------|------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|--|
| A. Full Name (Last, First, Middle Initial) <b>Transaction ID : H4.11877</b> <input type="checkbox"/> Memo Item |             |                                                                                                      | Allocated Activity or Event:                                                                                            |  |
| UMPQUA BANK                                                                                                    |             |                                                                                                      | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt |  |
| Mailing Address 6610 SW CARDINAL LN                                                                            |             |                                                                                                      | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support                                  |  |
| City<br>TIGARD                                                                                                 | State<br>OR | Zip Code<br>97224                                                                                    | <input type="checkbox"/> Public Comm (ref to party only) by PAC                                                         |  |
| Purpose of Disbursement:<br>BANK FEES                                                                          |             | Category/<br>Type                                                                                    | Allocated Activity or Event Year-To-Date                                                                                |  |
| Activity or Event Identifier:<br>Administrative                                                                |             |                                                                                                      | 37073.97                                                                                                                |  |
| Date                                                                                                           |             | <div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div> <div>06</div> <div>26</div> <div>2026</div> |                                                                                                                         |  |
| FEDERAL SHARE                                                                                                  |             | +                                                                                                    | NONFEDERAL SHARE                                                                                                        |  |
| 3.15                                                                                                           |             |                                                                                                      | 11.85                                                                                                                   |  |
|                                                                                                                |             | =                                                                                                    | TOTAL AMOUNT                                                                                                            |  |
|                                                                                                                |             |                                                                                                      | 15.00                                                                                                                   |  |

|                                                                                                                |             |                                                                                                      |                                                                                                                         |  |
|----------------------------------------------------------------------------------------------------------------|-------------|------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|--|
| B. Full Name (Last, First, Middle Initial) <b>Transaction ID : H4.11878</b> <input type="checkbox"/> Memo Item |             |                                                                                                      | Allocated Activity or Event:                                                                                            |  |
| UMPQUA BANK                                                                                                    |             |                                                                                                      | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt |  |
| Mailing Address 6610 SW CARDINAL LN                                                                            |             |                                                                                                      | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support                                  |  |
| City<br>TIGARD                                                                                                 | State<br>OR | Zip Code<br>97224                                                                                    | <input type="checkbox"/> Public Comm (ref to party only) by PAC                                                         |  |
| Purpose of Disbursement:<br>BANK FEES                                                                          |             | Category/<br>Type                                                                                    | Allocated Activity or Event Year-To-Date                                                                                |  |
| Activity or Event Identifier:<br>Administrative                                                                |             |                                                                                                      | 37088.97                                                                                                                |  |
| Date                                                                                                           |             | <div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div> <div>06</div> <div>30</div> <div>2026</div> |                                                                                                                         |  |
| FEDERAL SHARE                                                                                                  |             | +                                                                                                    | NONFEDERAL SHARE                                                                                                        |  |
| 3.15                                                                                                           |             |                                                                                                      | 11.85                                                                                                                   |  |
|                                                                                                                |             | =                                                                                                    | TOTAL AMOUNT                                                                                                            |  |
|                                                                                                                |             |                                                                                                      | 15.00                                                                                                                   |  |

|                                                                               |          |                                                                                              |                                                                                                              |  |
|-------------------------------------------------------------------------------|----------|----------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|--|
| C. Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item |          |                                                                                              | Allocated Activity or Event:                                                                                 |  |
| Mailing Address                                                               |          |                                                                                              | <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt |  |
| City                                                                          |          |                                                                                              | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support                       |  |
| State                                                                         | Zip Code |                                                                                              | <input type="checkbox"/> Public Comm (ref to party only) by PAC                                              |  |
| Purpose of Disbursement:                                                      |          | Category/<br>Type                                                                            | Allocated Activity or Event Year-To-Date                                                                     |  |
| Activity or Event Identifier:                                                 |          |                                                                                              |                                                                                                              |  |
| Date                                                                          |          | <div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div> <div></div> <div></div> <div></div> |                                                                                                              |  |
| FEDERAL SHARE                                                                 |          | +                                                                                            | NONFEDERAL SHARE                                                                                             |  |
|                                                                               |          |                                                                                              |                                                                                                              |  |
|                                                                               |          | =                                                                                            | TOTAL AMOUNT                                                                                                 |  |
|                                                                               |          |                                                                                              |                                                                                                              |  |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---------------|---|------------------|---|--------------|
| 6.30          |   | 23.70            |   | 30.00        |

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
|---------------|------------------|--------------|
| 814.22        | 3063.00          | 3877.22      |