

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 Victory Fund

ADDRESS (number and street) 232 NE 9th Avenue Check if different than previously reported. (ACC) Portland OR 97232

2. FEC IDENTIFICATION NUMBER C C00567206 3. IS THIS REPORT NEW (N) OR AMENDED (A) x

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report (MY) x, Termination Report (TER) (b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S) Election on in the State of (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S) Election on in the State of

5. Covering Period 01 / 01 / 2021 through 06 / 30 / 2021

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Zamore, Judith, , , Type or Print Name of Treasurer

Signature of Treasurer Zamore, Judith, , , [Electronically Filed] Date 07 / 27 / 2021

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Oregon Victory Fund

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2021"/>	<input type="text" value="1568.75"/>	<input type="text" value="1568.75"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="1568.75"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="57762.50"/>	<input type="text" value="57762.50"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="59331.25"/>	<input type="text" value="59331.25"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="57244.69"/>	<input type="text" value="57244.69"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="2086.56"/>	<input type="text" value="2086.56"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Oregon Victory Fund

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	57612.50	57612.50
(ii) Unitemized	150.00	150.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	57762.50	57762.50
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	57762.50	57762.50
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	57762.50	57762.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	57762.50	57762.50

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	9482.18	9482.18
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	9482.18	9482.18
22. Transfers to Affiliated/Other Party Committees.....	47762.51	47762.51
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	57244.69	57244.69
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	57244.69	57244.69

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	57762.50	57762.50
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	57762.50	57762.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	9482.18	9482.18
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	9482.18	9482.18

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 13
<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"/> 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 Victory Fund

A. ActBlue

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

Mailing Address 366 Summer Street

City Somerville	State MA	Zip Code 02144
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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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	08	/	2021

Transaction ID : SA11AI.4466

Amount of Each Receipt this Period
5000.00

Memo Item
Total earmarked through conduit; PAC limit not affected

B. ActBlue

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

Mailing Address 366 Summer Street

City Somerville	State MA	Zip Code 02144
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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 ▼
6412.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	22	/	2021

Transaction ID : SA11AI.4473

Amount of Each Receipt this Period
1412.50

Memo Item
Total earmarked through conduit; PAC limit not affected

C. ActBlue

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

Mailing Address 366 Summer Street

City Somerville	State MA	Zip Code 02144
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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 ▼
6562.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	05	/	2021

Transaction ID : SA11AI.4478

Amount of Each Receipt this Period
150.00

Memo Item
Total earmarked through conduit; PAC limit not affected

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: (check only one)	PAGE 7 OF 13
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Oregon Victory Fund

A. ActBlue

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

Mailing Address 366 Summer Street

City Somerville	State MA	Zip Code 02144
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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 ▼
11562.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 06 / 2021

Transaction ID : SA11AI.4484

Amount of Each Receipt this Period
5000.00

Memo Item
Total earmarked through conduit; PAC limit not affected

B. Giustina, E. Danell, , ,

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

Mailing Address PO Box 529

City Eugene	State OR	Zip Code 97440
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Giustina Resources	Occupation (for Individual) Managing Partner
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 08 / 2021

Transaction ID : SA11AI.4461

Amount of Each Receipt this Period
15000.00

Memo Item

C. Kardon, Joshua, , ,

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

Mailing Address 38643 SE 70th Street

City Washougal	State WA	Zip Code 98671
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Three Arch Strategies	Occupation (for Individual) Consultant
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 16 / 2021

Transaction ID : SA11AI.4482

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	20000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 13
<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"/> 17

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NAME OF COMMITTEE (In Full)
Oregon Victory Fund

A. Magliocco, Joseph, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 E. 81st Street
 City New York State NY Zip Code 10028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Chatham Imports, Inc. Occupation (for Individual) Businessman/Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15600.00

Date of Receipt **02 / 22 / 2021**
Transaction ID : SA11AI.4486
 Amount of Each Receipt this Period 15600.00
 Memo Item

B. Newmark, Craig, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 156 Woodland Avenue
 City San Francisco State CA Zip Code 94117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Craig Newmark Philanthropies Occupation (for Individual) Philanthropist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **01 / 08 / 2021**
Transaction ID : SA11AI.4463
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. Wagner, Danton, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11003 SW Matzen Drive
 City Wilsonville State OR Zip Code 97070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 7800.00

Date of Receipt **03 / 09 / 2021**
Transaction ID : SA11AI.4487
 Amount of Each Receipt this Period 7800.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	28400.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 13
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Oregon Victory Fund

A. Wagner, Diane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11003 SW Matzen Drive
 City Wilsonville State OR Zip Code 97070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 09 / 2021
Transaction ID : SA11AI.4489
 Amount of Each Receipt this Period
 7800.00
 Memo Item

B. Yee, Bennet, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 709 Tiana Lane
 City Mountain View State CA Zip Code 94041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Oasis Labs Occupation (for Individual) Software Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1412.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 22 / 2021
Transaction ID : SA11AI.4467
 Amount of Each Receipt this Period
 1412.50
 Memo Item

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 M / D D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	9212.50
TOTAL This Period (last page this line number only).....	57612.50

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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 Victory Fund

A. ActBlue

Full Name (Last, First, Middle Initial)

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 22 / 2021

FEC Identification Number: C

Transaction ID : **SB21B.4474**

Amount of Each Disbursement this Period: 55.80

Memo Item

B. ActBlue

Full Name (Last, First, Middle Initial)

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 02 / 05 / 2021

FEC Identification Number: C

Transaction ID : **SB21B.4479**

Amount of Each Disbursement this Period: 5.93

Memo Item

C. ActBlue

Full Name (Last, First, Middle Initial)

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 16 / 2021

FEC Identification Number: C

Transaction ID : **SB21B.4485**

Amount of Each Disbursement this Period: 197.50

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 259.23

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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 Victory Fund

A. GLH Consulting Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 4 I Street SE
Apt. 715

City Washington State DC Zip Code 20003

Purpose of Disbursement Fundraising Consultant

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 02 / 07 / 2021

FEC Identification Number: C

Transaction ID : SB21B.4475

Amount of Each Disbursement this Period: 1000.00

Memo Item

B. GLH Consulting Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 4 I Street SE
Apt. 715

City Washington State DC Zip Code 20003

Purpose of Disbursement Fundraising Consultant

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 03 / 2021

FEC Identification Number: C

Transaction ID : SB21B.4491

Amount of Each Disbursement this Period: 1000.00

Memo Item

C. GLH Consulting Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 4 I Street SE
Apt. 715

City Washington State DC Zip Code 20003

Purpose of Disbursement Fundraising Consultant

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 04 / 15 / 2021

FEC Identification Number: C

Transaction ID : SB21B.4494

Amount of Each Disbursement this Period: 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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 Victory Fund

Full Name (Last, First, Middle Initial) A. GLH Consulting Inc.			Date of Disbursement MM / DD / YYYY 05 / 04 / 2021	
Mailing Address 4 I Street SE Apt. 715			FEC Identification Number C [REDACTED] Transaction ID : SB21B.4496	
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Fundraising Consultant		Category/ Type 001	Memo Item <input type="checkbox"/>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:				

Full Name (Last, First, Middle Initial) B. The Ashmead Group			Date of Disbursement MM / DD / YYYY 04 / 19 / 2021	
Mailing Address 3612 Newark Street NW			FEC Identification Number C [REDACTED] Transaction ID : SB21B.4497	
City Washington	State DC	Zip Code 20016	Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement Fundraising Consultant		Category/ Type 003	Memo Item <input type="checkbox"/>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:				

Full Name (Last, First, Middle Initial) C. The Ashmead Group			Date of Disbursement MM / DD / YYYY 05 / 04 / 2021	
Mailing Address 3612 Newark Street NW			FEC Identification Number C [REDACTED] Transaction ID : SB21B.4499	
City Washington	State DC	Zip Code 20016	Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement Fundraising Consultant		Category/ Type 003	Memo Item <input type="checkbox"/>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	6000.00
TOTAL This Period (last page this line number only).....▶	9259.23

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Oregon Victory Fund

Full Name (Last, First, Middle Initial) A. DEMOCRATIC PARTY OF OREGON		Date of Disbursement MM / DD / YYYY 03 / 31 / 2021
Mailing Address 232 NE 9TH AVE.		FEC Identification Number C C00188367 Transaction ID : SB22.4493
City PORTLAND	State OR	Zip Code 97232
Purpose of Disbursement Jt. Fundraising Transfer		Category/Type 008
Candidate Name DEMOCRATIC PARTY OF OREGON		Amount of Each Disbursement this Period 24458.88
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. WYDEN FOR SENATE		Date of Disbursement MM / DD / YYYY 03 / 31 / 2021
Mailing Address 232 NE 9TH AVENUE		FEC Identification Number C S6OR00110 Transaction ID : SB22.4492
City PORTLAND	State OR	Zip Code 97232
Purpose of Disbursement Jt. Fundraising Transfer		Category/Type 008
Candidate Name WYDEN, RONALD L, , ,		Amount of Each Disbursement this Period 23303.63
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item
State: OR	District: 00	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Category/Type
Candidate Name		Amount of Each Disbursement this Period
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) ▼	<input type="checkbox"/> Memo Item
State:	District:	

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

47762.51

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

47762.51