

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Wyden for Oregon

ADDRESS (number and street) 2911 NE Hancock St
 Check if different than previously reported. (ACC)
Portland OR 97212

2. **FEC IDENTIFICATION NUMBER** C00436998
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 07 01 2010 through 09 30 2010

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 Melissa Kennedy Kardon

Signature of Treasurer Electronically Filed by Melissa Kennedy Kardon Date 10 14 2010

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

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Wyden for Oregon

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		5854.62
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	31847.65									
(c) Total Receipts (from Line 19)	59700.00	371284.59								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	91547.65	377139.21								
7. Total Disbursements (from Line 31)	61048.97	346640.53								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	30498.68	30498.68								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Wyden for Oregon

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

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)	59700.00	356713.00
(ii) Unitemized	0.00	1952.40
(iii) TOTAL (add Lines 11(a)(i) and (ii)	59700.00	358665.40
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	12500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	59700.00	371165.40
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	119.19
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 Transfer (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))	59700.00	371284.59
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	59700.00	371284.59

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	348.97	44815.53
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	348.97	44815.53
22. Transfers to Affiliated/Other Party Committees.....	60700.00	301825.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	61048.97	346640.53
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	61048.97	346640.53

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	59700.00	371165.40
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	59700.00	371165.40
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	348.97	44815.53
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	119.19
38. Net Operating Expenditures (subtract Line 37 from Line 36)	348.97	44696.34

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 / 16
	<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)
Wyden for Oregon

A.	Full Name (Last, First, Middle Initial) Dwight Anderson		Date of Receipt
	Mailing Address PO Box 8012		<input type="text" value="08"/> / <input type="text" value="12"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Garden City	NY	11530-8012
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Ospraie Funds		Occupation Investor	Transaction ID: SA11AI.5170
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>	<input type="text" value="5000.00"/>

B.	Full Name (Last, First, Middle Initial) Cynthia Campbell		Date of Receipt
	Mailing Address 260 Sw Birdshill Rd		<input type="text" value="09"/> / <input type="text" value="20"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Portland	OR	97219-8504
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer None		Occupation Homemaker	Transaction ID: SA11AI.5190
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>	<input type="text" value="5000.00"/>

C.	Full Name (Last, First, Middle Initial) J Duncan Campbell		Date of Receipt
	Mailing Address 260 SW Birdshill Rd		<input type="text" value="09"/> / <input type="text" value="20"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Portland	OR	97219-8504
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer The Campbell Group		Occupation President	Transaction ID: SA11AI.5188
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>	<input type="text" value="5000.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="15000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 / 16
	<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)
Wyden for Oregon

A.	Full Name (Last, First, Middle Initial) J Morton Davis	Date of Receipt MM / DD / YYYY 09 / 22 / 2010
	Mailing Address 44 Wall St.	Transaction ID: SA11AI.5192
	City State Zip Code New York NY 10005	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
Name of Employer DH Blair Investment Bank- ing	Occupation Chairman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

B.	Full Name (Last, First, Middle Initial) Stephen Gambee	Date of Receipt MM / DD / YYYY 08 / 03 / 2010
	Mailing Address 1811 E. Main St.	Transaction ID: SA11AI.5158
	City State Zip Code Medford OR 97504	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Rogue Waste Systems	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

C.	Full Name (Last, First, Middle Initial) Neva Goodwin	Date of Receipt MM / DD / YYYY 08 / 20 / 2010
	Mailing Address 11 Lowell Street	Transaction ID: SA11AI.5161
	City State Zip Code Cambridge MA 02138	Amount of Each Receipt this Period 4800.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Tufts University	Occupation Economist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4800.00	

SUBTOTAL of Receipts This Page (optional)	▶	14800.00
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 8 / 16

(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"/> 17

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NAME OF COMMITTEE (In Full)
Wyden for Oregon

A.

Full Name (Last, First, Middle Initial)
Merlin Hart

Mailing Address 87102 Kellmore St

City State Zip Code
Eugene OR 97402-9128

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

Name of Employer Occupation
Pinnacle Healthcare, Inc President

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 03 / 2010

Transaction ID: SA11AI.5179

Amount of Each Receipt this Period
2500.00

B.

Full Name (Last, First, Middle Initial)
John C Law

Mailing Address 514 Palisades Beach Rd

City State Zip Code
Santa Monica CA 90402-2604

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

Name of Employer Occupation
Warlord Investments Commercial Landlord

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 7400.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 09 / 2010

Transaction ID: SA11AI.5183

Amount of Each Receipt this Period
7400.00

C.

Full Name (Last, First, Middle Initial)
Harley Lippman

Mailing Address 1021 Park Avenue
7C

City State Zip Code
New York NY 10028

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

Name of Employer Occupation
Genesis 10 CEO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 16 / 2010

Transaction ID: SA11AI.5154

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional) ▶

14900.00

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 9 / 16
(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"/>	17
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NAME OF COMMITTEE (In Full)
Wyden for Oregon

A.

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

Mailing Address 120 NE 136th Ave
Suite 200

City Vancouver State WA Zip Code 98684

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

Name of Employer St. Laurent Properties Occupation Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
08 / 12 / 2010

Transaction ID: SA11AI.5165

Amount of Each Receipt this Period
5000.00

B.

Full Name (Last, First, Middle Initial)
Junki Yoshida

Mailing Address 17230 NE Sacramento St.

City Portland State OR Zip Code 97230

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

Name of Employer Yoshida Group Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
08 / 12 / 2010

Transaction ID: SA11AI.5166

Amount of Each Receipt this Period
5000.00

C.

Full Name (Last, First, Middle Initial)
Linda Yoshida

Mailing Address 17230 NE Sacramento St.

City Portland State OR Zip Code 97230

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

Name of Employer None Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
08 / 12 / 2010

Transaction ID: SA11AI.5168

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional)	▶	15000.00
TOTAL This Period (last page this line number only)	▶	59700.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Wyden for Oregon

A. Full Name (Last, First, Middle Initial) Powerpay <hr/> Mailing Address 280 Fore Street <hr/> City Portland State ME Zip Code 04101 <hr/> Purpose of Disbursement Credit Card Merchant Fees Candidate Name	Transaction ID: SB21B.5174 Date of Disbursement 07 / 02 / 2010
	Amount of Each Disbursement this Period 25.00
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:
B. Full Name (Last, First, Middle Initial) Powerpay <hr/> Mailing Address 280 Fore Street <hr/> City Portland State ME Zip Code 04101 <hr/> Purpose of Disbursement Credit Card Merchant Fees Candidate Name	Transaction ID: SB21B.5177 Date of Disbursement 08 / 01 / 2010
	Amount of Each Disbursement this Period 223.52
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:
C. Full Name (Last, First, Middle Initial) Powerpay <hr/> Mailing Address 280 Fore Street <hr/> City Portland State ME Zip Code 04101 <hr/> Purpose of Disbursement Credit Card Merchant Fees Candidate Name	Transaction ID: SB21B.5185 Date of Disbursement 09 / 01 / 2010
	Amount of Each Disbursement this Period 25.00
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

273.52

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Wyden for Oregon

A.	Full Name (Last, First, Middle Initial) Transfirst	Transaction ID: SB21B.5176 Date of Disbursement 07 / 12 / 2010
	Mailing Address 371 Centennial Parkway	Amount of Each Disbursement this Period 5.00
	City Louisville State CO Zip Code 80027	
	Purpose of Disbursement Credit Card Merchant Fees	001 Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Transfirst	Transaction ID: SB21B.5182 Date of Disbursement 08 / 10 / 2010
	Mailing Address 371 Centennial Parkway	Amount of Each Disbursement this Period 5.00
	City Louisville State CO Zip Code 80027	
	Purpose of Disbursement Credit Card Merchant Fees	001 Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Transfirst	Transaction ID: SB21B.5198 Date of Disbursement 09 / 01 / 2010
	Mailing Address 371 Centennial Parkway	Amount of Each Disbursement this Period 5.00
	City Louisville State CO Zip Code 80027	
	Purpose of Disbursement Credit Card Merchant Fees	001 Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	15.00
TOTAL This Period (last page this line number only)	288.52

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Wyden for Oregon

A.	Full Name (Last, First, Middle Initial) HOLDING ONTO OREGON'S PRIORITIES	Transaction ID: SB22.5157
	Mailing Address PO Box 3314	Date of Disbursement 07 / 28 / 2010
	City Portland State OR Zip Code 97208	Amount of Each Disbursement this Period 3600.00
	Purpose of Disbursement Jt Fundraising Contribution Distribution	008 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) HOLDING ONTO OREGON'S PRIORITIES	Transaction ID: SB22.5160
	Mailing Address PO Box 3314	Date of Disbursement 08 / 03 / 2010
	City Portland State OR Zip Code 97208	Amount of Each Disbursement this Period 4800.00
	Purpose of Disbursement Jt Fundraising Contribution Distribution	008 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) HOLDING ONTO OREGON'S PRIORITIES	Transaction ID: SB22.5172
	Mailing Address PO Box 3314	Date of Disbursement 08 / 12 / 2010
	City Portland State OR Zip Code 97208	Amount of Each Disbursement this Period 10400.00
	Purpose of Disbursement Joint Fundraising Contribution Distribution	008 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	18800.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Wyden for Oregon

A. Full Name (Last, First, Middle Initial)
HOLDING ONTO OREGON'S PRIORITIES

Mailing Address PO Box 3314

City Portland State OR Zip Code 97208

Purpose of Disbursement
Joint Fundraising Contribution Distribution
Candidate Name

008
Category/
Type

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

Transaction ID: SB22.5163
Date of Disbursement

08 / 20 / 2010

Amount of Each Disbursement this Period

2400.00

B. Full Name (Last, First, Middle Initial)
HOLDING ONTO OREGON'S PRIORITIES

Mailing Address PO Box 3314

City Portland State OR Zip Code 97208

Purpose of Disbursement
Jt Fundraising Contribution Distribution
Candidate Name

008
Category/
Type

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

Transaction ID: SB22.5178
Date of Disbursement

09 / 03 / 2010

Amount of Each Disbursement this Period

2500.00

C. Full Name (Last, First, Middle Initial)
HOLDING ONTO OREGON'S PRIORITIES

Mailing Address PO Box 3314

City Portland State OR Zip Code 97208

Purpose of Disbursement
Jt Fundraising Contribution Distribution
Candidate Name

008
Category/
Type

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

Transaction ID: SB22.5187
Date of Disbursement

09 / 09 / 2010

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional) ▶

9900.00

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)

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

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NAME OF COMMITTEE (In Full)
Wyden for Oregon

A. Full Name (Last, First, Middle Initial) HOLDING ONTO OREGON'S PRIORITIES Mailing Address PO Box 3314 City Portland State OR Zip Code 97208 Purpose of Disbursement Jt Fundraising Contribution Distribution Candidate Name	Transaction ID: SB22.5194 Date of Disbursement 09 / 20 / 2010
	Amount of Each Disbursement this Period 5400.00 Category/Type 008
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) HOLDING ONTO OREGON'S PRIORITIES Mailing Address PO Box 3314 City Portland State OR Zip Code 97208 Purpose of Disbursement Jt Fundraising Contribution Distribution Candidate Name	Transaction ID: SB22.5200 Date of Disbursement 09 / 22 / 2010
	Amount of Each Disbursement this Period 2600.00 Category/Type 008
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) WYDEN FOR SENATE Mailing Address 232 NE 9TH AVENUE City PORTLAND State OR Zip Code 97232 Purpose of Disbursement Jt Fundraising Contribution Distribution Candidate Name	Transaction ID: SB22.5156 Date of Disbursement 07 / 28 / 2010
	Amount of Each Disbursement this Period 2400.00 Category/Type 008
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 00 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	10400.00
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)

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

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NAME OF COMMITTEE (In Full)
Wyden for Oregon

A.	Full Name (Last, First, Middle Initial) WYDEN FOR SENATE	Transaction ID: SB22.5159 Date of Disbursement 08 / 03 / 2010
	Mailing Address 232 NE 9TH AVENUE	Amount of Each Disbursement this Period 200.00
	City PORTLAND State OR Zip Code 97232	
	Purpose of Disbursement Jt. Fundraising Contribution Distribution	008 Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) WYDEN FOR SENATE	Transaction ID: SB22.5173 Date of Disbursement 08 / 12 / 2010
	Mailing Address 232 NE 9TH AVENUE	Amount of Each Disbursement this Period 9600.00
	City PORTLAND State OR Zip Code 97232	
	Purpose of Disbursement Joint Fundraising Contribution Distribution	008 Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) WYDEN FOR SENATE	Transaction ID: SB22.5164 Date of Disbursement 08 / 20 / 2010
	Mailing Address 232 NE 9TH AVENUE	Amount of Each Disbursement this Period 2400.00
	City PORTLAND State OR Zip Code 97232	
	Purpose of Disbursement Joint Fundraising Contribution Distribution	008 Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	12200.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Wyden for Oregon

A.	Full Name (Last, First, Middle Initial) WYDEN FOR SENATE	Transaction ID: SB22.5186 Date of Disbursement
	Mailing Address 232 NE 9TH AVENUE	<input type="text" value="09"/> / <input type="text" value="09"/> / <input type="text" value="2010"/>
	City PORTLAND State OR Zip Code 97232	Amount of Each Disbursement this Period
	Purpose of Disbursement Jt. Fundraising Contribution Distribution	<input type="text" value="2400.00"/>
	Candidate Name	<input type="text" value="008"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) WYDEN FOR SENATE	Transaction ID: SB22.5195 Date of Disbursement
	Mailing Address 232 NE 9TH AVENUE	<input type="text" value="09"/> / <input type="text" value="20"/> / <input type="text" value="2010"/>
	City PORTLAND State OR Zip Code 97232	Amount of Each Disbursement this Period
	Purpose of Disbursement Jt Fundraising Contribution Distribution	<input type="text" value="4600.00"/>
	Candidate Name	<input type="text" value="008"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) WYDEN FOR SENATE	Transaction ID: SB22.5199 Date of Disbursement
	Mailing Address 232 NE 9TH AVENUE	<input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City PORTLAND State OR Zip Code 97232	Amount of Each Disbursement this Period
	Purpose of Disbursement Jt Fundraising Contribution Distribution	<input type="text" value="2400.00"/>
	Candidate Name	<input type="text" value="008"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="9400.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="60700.00"/>