

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Wyden for Oregon

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="2014"/>	<input type="text" value="2218.53"/>	<input type="text" value="2218.53"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="4963.75"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="76486.95"/>	<input type="text" value="487771.09"/>
(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="81450.70"/>	<input type="text" value="489989.62"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="72084.60"/>	<input type="text" value="480623.52"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="9366.10"/>	<input type="text" value="9366.10"/>
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Wyden for Oregon

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).....	72000.00	442122.14
(ii) Unitemized	440.00	4602.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	72440.00	446724.14
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	4000.00	41000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	76440.00	487724.14
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).....	46.95	46.95
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))..... ▶	76486.95	487771.09
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	76486.95	487771.09

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	3184.60	62723.52
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	3184.60	62723.52
22. Transfers to Affiliated/Other Party Committees.....	68900.00	417900.00
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 (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) 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)) ..	72084.60	480623.52
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	72084.60	480623.52

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	76440.00	487724.14
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	76440.00	487724.14
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	3184.60	62723.52
37. Offsets to Operating Expenditures (from Line 15, page 3).....	46.95	46.95
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3137.65	62676.57

**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 16
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<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. Joseph W. II Angel
Full Name (Last, First, Middle Initial)

Mailing Address 12745 SW Beaver Dam Road
Suite 240

City Beaverton State OR Zip Code 97005

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

Name of Employer Pacific Star Corp. Occupation President/CEO

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
12 / 22 / 2014

Transaction ID : SA11AI.6850

Amount of Each Receipt this Period
5000.00

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

Mailing Address 60 Daffodil Court

City Staten Island State NY Zip Code 10312

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

Name of Employer Neuberger Berman Management LL Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 27 / 2014

Transaction ID : SA11AI.6827

Amount of Each Receipt this Period
1500.00

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

Mailing Address 152 Fuller Street

City West Newton State MA Zip Code 02465

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

Name of Employer The Coyle Company Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 16 / 2014

Transaction ID : SA11AI.6839

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 7000.00

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

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NAME OF COMMITTEE (In Full)
Wyden for Oregon

Full Name (Last, First, Middle Initial)
A. Gary Fish

Mailing Address 61415 Tam McArthur Loop

City Bend State OR Zip Code 97702

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

Name of Employer Deschutes Brewery Occupation CEO

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
 12 / 03 / 2014

Transaction ID : SA11AI.6829

Amount of Each Receipt this Period
10000.00

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

Mailing Address 4318 SW Fairview Circus

City Portland State OR Zip Code 97221

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 ▼
10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2014

Transaction ID : SA11AI.6834

Amount of Each Receipt this Period
10000.00

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

Mailing Address One Centerpointe Dr Suite 200

City Lake Oswego State OR Zip Code 97035

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

Name of Employer Greenbrier Cos. Occupation CEO/President

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
 12 / 10 / 2014

Transaction ID : SA11AI.6833

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 25000.00

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 OF 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Wyden for Oregon

A. Rob Gramlich
 Full Name (Last, First, Middle Initial)
 Mailing Address 9207 Kirkdale Road
 City Bethesda State MD Zip Code 20817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Am. Wind Energy Association Occupation Energy Policy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : SA11AI.6830
 Amount of Each Receipt this Period
 500.00

B. Jonell Hermanson
 Full Name (Last, First, Middle Initial)
 Mailing Address 7825 SE 31st Avenue
 City Portland State OR Zip Code 97202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer M Financial Wealth Management Occupation President
 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
 12 / 17 / 2014
Transaction ID : SA11AI.6840
 Amount of Each Receipt this Period
 1000.00

C. Dan O'Neal
 Full Name (Last, First, Middle Initial)
 Mailing Address 17641 E. SR 106
 City Belfair State WA Zip Code 98528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Greenbrier Board Member
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2014
Transaction ID : SA11AI.6857
 Amount of Each Receipt this Period
 1500.00

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

Full Name (Last, First, Middle Initial) A. Jerome Reid		Date of Receipt 12 / 30 / 2014 Transaction ID : SA11AI.6859
Mailing Address 205 Spring Grove Avenue		Amount of Each Receipt this Period 1000.00
City San Rafael	State CA	Zip Code 94901
FEC ID number of contributing federal political committee. C	Name of Employer Forward	Occupation CEO
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Caitlin Sause		Date of Receipt 12 / 28 / 2014 Transaction ID : SA11AI.6855
Mailing Address 1500 Oak Terrace		Amount of Each Receipt this Period 5000.00
City Lake Oswego	State OR	Zip Code 97034
FEC ID number of contributing federal political committee. C	Name of Employer Vigor Industrial	Occupation Director of Gvt. and Public Affairs
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Cory Sause		Date of Receipt 12 / 27 / 2014 Transaction ID : SA11AI.6853
Mailing Address 155 E. Market Avenue		Amount of Each Receipt this Period 5000.00
City Coos Bay	State OR	Zip Code 97420
FEC ID number of contributing federal political committee. C	Name of Employer Sause Brothers	Occupation VP, Health Safety Quality & Enviroment
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional).....▶	11000.00
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 10 OF 16
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Wyden for Oregon

Full Name (Last, First, Middle Initial) A. Dale Sause		Date of Receipt
Mailing Address 155 E. Market Avenue		<input type="text" value="12"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code
Coos Bay	OR	97420
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.6852
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="10000.00"/>
Name of Employer	Occupation	
Sause Brothers	President	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="10000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Patricia Smith		Date of Receipt
Mailing Address 2334 NW Tower Rock Drive		<input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>
City	State	Zip Code
Bend	OR	97701
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.6847
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="7500.00"/>
Name of Employer	Occupation	
La Pine School District	Substitute Teacher	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="7500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. William Smith		Date of Receipt
Mailing Address 2334 NW Tower Rock Drive		<input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>
City	State	Zip Code
Bend	OR	97701
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.6846
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="7500.00"/>
Name of Employer	Occupation	
William Smith Properties	Real Estate Developer	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="7500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="25000.00"/>
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 12 OF 16
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Wyden for Oregon

Full Name (Last, First, Middle Initial) A. AMERICAN MEDICAL GROUP ASSOCIATION PAC		Date of Receipt
Mailing Address 1202 MEDICAL CENTER LANE		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
WILMINGTON	NC	28401
FEC ID number of contributing federal political committee.	<input type="text" value="C00408120"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	
		Amount of Each Receipt this Period <input type="text" value="1000.00"/>
		Transaction ID : SA11C.6823

Full Name (Last, First, Middle Initial) B. AMERICAN PSYCHOLOGICAL ASSOCIATION PRACTICE ORGANIZATION POLITICAL ACTION COMMITTEE (APAPO)		Date of Receipt
Mailing Address PO BOX 65353		<input type="text" value="12"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code
WASHINGTON	DC	20035
FEC ID number of contributing federal political committee.	<input type="text" value="C00522094"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="3500.00"/>	
		Amount of Each Receipt this Period <input type="text" value="1000.00"/>
		Transaction ID : SA11C.6836

Full Name (Last, First, Middle Initial) C. DIRECT VOICE, THE POLITICAL ACTION COMMITTEE OF THE DIRECT MARKETING ASSOCIATION		Date of Receipt
Mailing Address 1615 L STREET, NW SUITE 1100		<input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code
WASHINGTON	DC	20036
FEC ID number of contributing federal political committee.	<input type="text" value="C00235309"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	
		Amount of Each Receipt this Period <input type="text" value="1000.00"/>
		Transaction ID : SA11C.6844

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="3000.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 13 OF 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Wyden for Oregon

A. RENEWABLE ENERGY SYSTEMS AMERICAS INC. PAC (AKA RESPAC)
 Full Name (Last, First, Middle Initial)
 Mailing Address 11101 W 120TH AVE STE 400
 City BROOMFIELD State CO Zip Code 80021
 FEC ID number of contributing federal political committee. **C** C00434142
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : SA11C.6842
 Amount of Each Receipt this Period
 1000.00

B.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	4000.00

**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

Full Name (Last, First, Middle Initial)

A. Authorize.net

Mailing Address 10800 NE 8th Street
Suite 600

City Bellevue State WA Zip Code 98004

Purpose of Disbursement
Credit Card Processing Fees

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 02 / 2014

Transaction ID : SB21B.6870

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

B. Authorize.net

Mailing Address 10800 NE 8th Street
Suite 600

City Bellevue State WA Zip Code 98004

Purpose of Disbursement
Credit Card Processing Fees

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 10 / 2014

Transaction ID : SB21B.6872

Amount of Each Disbursement this Period

637.65

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address PO Box 15731

City Wilmington State DE Zip Code 19886

Purpose of Disbursement
Credit Card Processing Fees

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 02 / 2014

Transaction ID : SB21B.6869

Amount of Each Disbursement this Period

26.95

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

684.60

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Wyden for Oregon

Full Name (Last, First, Middle Initial)

A. Maura Hagerty

Mailing Address 300 Massachusetts Avenue
Apt. 700

City Washington State DC Zip Code 20001

Purpose of Disbursement
Fundraising Consultant

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.6871

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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

Full Name (Last, First, Middle Initial)

A. HOLDING ONTO OREGON'S PRIORITIES

Mailing Address PO Box 3314

City Portland State OR Zip Code 97208

Purpose of Disbursement
Joint Fundraising Transfer

008

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2014

Transaction ID : SB22.6875

Amount of Each Disbursement this Period

31500.00

Full Name (Last, First, Middle Initial)

B. WYDEN FOR SENATE

Mailing Address 232 NE 9TH AVENUE

City PORTLAND State OR Zip Code 97232

Purpose of Disbursement
Joint Fundraising Transfer

008

Candidate Name

Category/
Type

RONALD L WYDEN

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: OR District: 00

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2014

Transaction ID : SB22.6874

Amount of Each Disbursement this Period

37400.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY

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

68900.00

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

68900.00