

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
WASHINGTON, D.C.

JUL 20 10 03 AM '96

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) <i>Bill With for Congress 1996</i>		2. FEC IDENTIFICATION NUMBER <i>200303255</i>
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. <i>P.O. Box 230150 OR/01</i>		
CITY, STATE and ZIP CODE <i>TIGARD, OREGON 97281-0150</i>	STATE/DISTRICT	
3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		

4. TYPE OF REPORT

<input type="checkbox"/> April 15 Quarterly Report	<input type="checkbox"/> 12-Day Pre-Election Report for the _____ (Type of Election)
<input checked="" type="checkbox"/> July 15 Quarterly Report	election on _____ in the State of _____
<input type="checkbox"/> October 15 Quarterly Report	<input type="checkbox"/> 30-Day Post-Election Report for the _____ (Type of Election)
<input type="checkbox"/> January 31 Year End Report	election on _____ in the State of _____
<input type="checkbox"/> July 31 Mid-Year Report (Non-election Year Only)	<input type="checkbox"/> Termination Report

This report contains activity for ☒ Primary Election ☒ General Election ☐ Special Election ☐ Runoff Election

SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
<i>5/2/96</i> through <i>6/30/96</i>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	87,462.00	137,640.25
(b) Total Contribution Refunds (from Line 20(d))	1,000.00	1,000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	86,462.00	136,640.25
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	103,410.94	221,713.94
(b) Total Offsets to Operating Expenditures (from Line 14)	140.60	140.60
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	103,270.34	221,573.34
8. Cash on Hand at Close of Reporting Period (from Line 27)	34,582.41	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	169,699.05	

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 <i>Frank Fonfara</i>	Date <i>7/10/96</i>
Signature of Treasurer <i>Frank Fonfara</i>	

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

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FEC FORM 3
(revised 4/87)

FE5AN111

95-01-616-163

DETAILED SUMMARY PAGE

of Receipts and Disbursements
(Page 2, FEC FORM 3)

Name of Committee (in full) <i>B:11 Wife for Congress 1996</i>		Report Covering the Period: From: <i>5/2/96</i> To: <i>6/30/96</i>	
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) -----		56,700.00	
(ii) Unitemized -----		21,662.00	
(iii) Total of contributions from individuals -----		78,362.00	126,398.00
(b) Political Party Committees -----		100.00	150.00
(c) Other Political Committees (such as PACs) -----		9,000.00	9,000.00
(d) The Candidate -----		-0-	2,092.25
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d)) -----		87,462.00	137,640.25
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES -----		-0-	-0-
13. LOANS:			
(a) Made or Guaranteed by the Candidate -----		11,000.00	124,000.00
(b) All Other Loans -----		-0-	-0-
(c) TOTAL LOANS (add 13(a) and (b)) -----		11,000.00	124,000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) -----		140.60	140.60
15. OTHER RECEIPTS (Dividends, Interest, etc.) -----		-0-	-0-
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15) -----		98,602.60	261,780.85
II. DISBURSEMENTS			
17. OPERATING EXPENDITURES -----		103,410.94	221,713.94
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES -----		584.50	584.50
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate -----		3,900.00	3,900.00
(b) Of All Other Loans -----		-0-	-0-
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b)) -----		3,900.00	3,900.00
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees -----		1,000.00	1,000.00
(b) Political Party Committees -----		-0-	-0-
(c) Other Political Committees (such as PACs) -----		-0-	-0-
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c)) -----		1,000.00	1,000.00
21. OTHER DISBURSEMENTS -----		-0-	-0-
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21) -----		108,895.44	227,198.44

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD -----	\$	44,875.25	23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16) -----	\$	98,602.60	24
25. SUBTOTAL (add Line 23 and Line 24) -----	\$	143,477.85	25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) -----	\$	108,895.44	26
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25) -----	\$	34,582.41	27

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 14

FOR LINE NUMBER

11(a)(1)

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)

Bill Witt for Congress 1996

A. Full Name, Mailing Address and ZIP Code
Phyllis Anderson
1440 SW Country Commons Rd.
Lake Oswego, OR 97034

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer
JEIT - employed

Date (month, day, year)
5-20-96

Amount of Each Receipt this Period
100.00

Occupation
fertilizer business

Aggregate Year-to-Date > \$ 950.00

B. Full Name, Mailing Address and ZIP Code
Craig Berkman
Jackson Tower
806 SW Broadway # 625
Portland, OR 97205

Receipt For: ☒ Primary ☐ General
☐ Other (specify): (designated to primary)

Name of Employer
Self-employed

Date (month, day, year)
6-4-96

Amount of Each Receipt this Period
1000.00

Occupation
investor

Aggregate Year-to-Date > \$ 1000.00

C. Full Name, Mailing Address and ZIP Code
Robert Bobovsky
6770 SW Canyon Dr.
Portland, OR 97225

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer
Broker TDP

Date (month, day, year)
5-20-96

Amount of Each Receipt this Period
1000.00

Occupation
Managing Director

Aggregate Year-to-Date > \$ 1000.00

D. Full Name, Mailing Address and ZIP Code
Above Contribution earmarked through:
Madison Project Inc.
Federal Fund
P.O. Box 477
Hartford, CT 06108

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Date (month, day, year)
5-20-96

Amount of Each Receipt this Period
1000.00

Occupation

Aggregate Year-to-Date > \$

MEMO ENTRY FROM CONDUIT

E. Full Name, Mailing Address and ZIP Code
Diana Powers Evans
1910 Madrona Ave S.
SALEM, OR 97302

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer
retired

Date (month, day, year)
5-16-96

Amount of Each Receipt this Period
50.00

Occupation

Aggregate Year-to-Date > \$ 250.00

50.00

F. Full Name, Mailing Address and ZIP Code
Steve FleH
9221 SE 55th
Portland, OR 97206

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer
FleH Brothers, Inc.

Date (month, day, year)
5-15-96

Amount of Each Receipt this Period
50.00

Occupation
Contractor

Aggregate Year-to-Date > \$ 215.00

G. Full Name, Mailing Address and ZIP Code
Joseph Foye
3210 SW 72nd
Portland, OR 97225

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer
retired

Date (month, day, year)
5-16-96

Amount of Each Receipt this Period
400.00

Occupation

Aggregate Year-to-Date > \$ 400.00

SUBTOTAL of Receipts This Page (optional)

2,650.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 14

FOR LINE NUMBER 11(a)(1)

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NAME OF COMMITTEE (in Full)

Bill Witt for Congress 1996

<p>A. Full Name, Mailing Address and ZIP Code George Frye 12175 SW Douglas Portland, OR 97225</p>	<p>Name of Employer Frye Electronics Inc Occupation manager</p>	<p>Date (month, day, year) 5-14-96</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date > \$ 250.00</p>		
<p>B. Full Name, Mailing Address and ZIP Code Betty Goebel #206 1335 SW 66 Portland, OR 97225</p>	<p>Name of Employer retired Occupation</p>	<p>Date (month, day, year) 5-17-96</p>	<p>Amount of Each Receipt this Period 100.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date > \$ 300.00</p>		
<p>C. Full Name, Mailing Address and ZIP Code Wayne Hammersly #200 811 SW Front Ave. Portland, OR 97204</p>	<p>Name of Employer WHL Leasing self-employed Occupation stockbroker</p>	<p>Date (month, day, year) 5-2-96 5-7-96</p>	<p>Amount of Each Receipt this Period 100.00 100.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date > \$ 300.00</p>		
<p>D. Full Name, Mailing Address and ZIP Code Brian Kreitzberg 14669 Davis Lake Oswego, OR 97035</p>	<p>Name of Employer Electro Scientific, Inc. Occupation engineer</p>	<p>Date (month, day, year) 5-20-96</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date > \$ 500.00</p>		
<p>E. Full Name, Mailing Address and ZIP Code Wayne Kun 3725 SW Cedar Hills Beaverton, OR 97005</p>	<p>Name of Employer Kun Enterprises Occupation president</p>	<p>Date (month, day, year) 5-13-96</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date > \$ 250.00</p>		
<p>F. Full Name, Mailing Address and ZIP Code Daniel McWilliams 4204 NE Hazelbank Portland, OR 97213</p>	<p>Name of Employer McWilliams + Co. Occupation advertising</p>	<p>Date (month, day, year) 5-17-96</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date > \$ 750.00</p>		
<p>G. Full Name, Mailing Address and ZIP Code Art Pascazi 10250 SW North Dakota Tigard, OR 97223</p>	<p>Name of Employer Milwaukee Crane Occupation owner</p>	<p>Date (month, day, year) 5-13-96</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date > \$ 250.00</p>		

SUBTOTAL of Receipts This Page (optional)

1,800.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 14

FOR LINE NUMBER

11(a)(i)

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NAME OF COMMITTEE (In Full)

Bill Witt for Congress 1996

A. Full Name, Mailing Address and ZIP Code

Ralph Pruett
18700 Sunnyridge Ln.
Sheridan, OR 97378

Name of Employer

retired

Date (month,
day, year)

5-2-96

Amount of Each
Receipt this Period

~~5-2-96~~
50.00

Receipt For:

☒ Primary
☐ Other (specify):

☐ General

Occupation

Aggregate Year-to-Date > \$ 300.00

B. Full Name, Mailing Address and ZIP Code

Jane Sanders
6903 SE Riverside Dr.
Vancouver, WA 98664

Name of Employer

homemaker

Date (month,
day, year)

5-15-96

Amount of Each
Receipt this Period

1000.00

Receipt For:

☒ Primary
☐ Other (specify):

☐ General

Occupation

Aggregate Year-to-Date > \$ 1000.00

C. Full Name, Mailing Address and ZIP Code

Gene Talbot
1700 Villa Rd.
Newberg, OR 97132

Name of Employer

self-employed

Date (month,
day, year)

5-14-96

Amount of Each
Receipt this Period

100.00

Receipt For:

☒ Primary
☐ Other (specify):

☐ General

Occupation

agricultural
research

Aggregate Year-to-Date > \$ 500.00

D. Full Name, Mailing Address and ZIP Code

Marilyn Thore
3512 N. Aspen Way
Newberg, OR 97132

Name of Employer

homemaker

Date (month,
day, year)

5-8-96

Amount of Each
Receipt this Period

250.00

Receipt For:

☒ Primary
☐ Other (specify):

☐ General

Occupation

Aggregate Year-to-Date > \$ 450.00

E. Full Name, Mailing Address and ZIP Code

Robert Tomaroni
18961 SW 84th Ave.
Tualatin, OR 97062

Name of Employer

mortgage
Freedom

Date (month,
day, year)

5-3-96

Amount of Each
Receipt this Period

500.00

Receipt For:

☒ Primary
☐ Other (specify):

☐ General

Occupation

mortgage broker

Aggregate Year-to-Date > \$ 500.00

F. Full Name, Mailing Address and ZIP Code

Beverly Trimmell
525 S. Kansas
Liberal, KS 67901

Name of Employer

self-employed

Date (month,
day, year)

5-9-96

Amount of Each
Receipt this Period

1000.00

Receipt For:

☒ Primary
☐ Other (specify):

☐ General

Occupation

wholesaler

Aggregate Year-to-Date > \$ 1000.00

G. Full Name, Mailing Address and ZIP Code

ABOVE Contribution Earmarked
Mullis Project Inc.
Federal Fund
P.O. Box 474
Hamilton, VA 22068

Name of Employer

Date (month,
day, year)

5-9-96

Amount of Each
Receipt this Period

1000.00

Receipt For:

☒ Primary
☐ Other (specify):

☐ General

Occupation

Aggregate Year-to-Date > \$

MEMO
ENTRY FROM
CONDUIT

SUBTOTAL of Receipts This Page (optional)

2,900.00

TOTAL This Period (last page this line number only)

96-01-516-1617

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

PAGE 4 OF 14

FOR LINE NUMBER

11(a)(1)

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NAME OF COMMITTEE (in Full)

Bill Witt For Congress 1996

A. Full Name, Mailing Address and ZIP Code

Receipt For:

☒ Primary☐ General☐ Other (specify):

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation N/A

Aggregate Year-to-Date > \$

B. Full Name, Mailing Address and ZIP Code

Samuel Wheeler
1211 SW 5th Ave.
Portland, OR 97204

Receipt For:

☒ Primary☐ General☐ Other (specify):

(debt retirement)

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation N/A

Aggregate Year-to-Date > \$ 1800.00

C. Full Name, Mailing Address and ZIP Code

Charles H. Wilson
5210 NE Columbia
Portland, OR

Receipt For:

☒ Primary☐ General☐ Other (specify):

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this PeriodOccupation Ace
Specialties
Inc. president

Aggregate Year-to-Date > \$ 250.00

D. Full Name, Mailing Address and ZIP Code

Frances Witt Jr.
19891 Edgewood Tr.
Strongsville, Ohio 44136

Receipt For:

☒ Primary☐ General☐ Other (specify):

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this PeriodOccupation Wittco, Inc.
member of
board

Aggregate Year-to-Date > \$ 1000.00

E. Full Name, Mailing Address and ZIP Code

Mary Lou Witt
19891 Edgewood Tr.
Strongsville, Ohio 44136

Receipt For:

☒ Primary☐ General☐ Other (specify):

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this PeriodOccupation Wittco, Inc.
Administration

Aggregate Year-to-Date > \$ 1000.00

F. Full Name, Mailing Address and ZIP Code

H. A. Anderson
P.O. Box 6712
Portland, OR 97228

Receipt For:

☐ Primary☒ General☐ Other (specify):

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this PeriodOccupation Anderson
Construction
contractor

Aggregate Year-to-Date > \$ 1000.00

G. Full Name, Mailing Address and ZIP Code

Phyllis Anderson
1440 SW Country Commons
Lake Oswego, OR 97034

Receipt For:

☐ Primary☒ General☐ Other (specify):

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this PeriodOccupation Self-employed
fortified
business

Aggregate Year-to-Date > \$ 250.00

SUBTOTAL of Receipts This Page (optional)

4,400.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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PAGE 5 OF 14

FOR LINE NUMBER

11(a)(1)

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NAME OF COMMITTEE (in Full)

Bill Witt for Congress 1996

A. Full Name, Mailing Address and ZIP Code Joseph W. Angel, II 1410 SW Jefferson Portland, OR 97201 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer self-employed Occupation investor Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 6-7-96	Amount of Each Receipt this Period 1000.00
B. Full Name, Mailing Address and ZIP Code Joan D. Austin P.O. Box 209 Newberg, OR 97132 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer A-DEC Occupation executive Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 6-21-96	Amount of Each Receipt this Period 1000.00
C. Full Name, Mailing Address and ZIP Code Alan Dale Babb 695 Fair Oaks Dr. Eugene, OR 97401 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Delta Sand & Gravel Co. Occupation owner Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 6-7-96	Amount of Each Receipt this Period 1000.00
D. Full Name, Mailing Address and ZIP Code Roland Banks Jr. 1211 SW Fifth Ave #1600 Portland, OR 97204 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Schawbe, Williams, Wyatt Occupation attorney Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 6-27-96	Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and ZIP Code Gene Bigg 4220 SW Cedar Hills Blvd. Beaverton, OR 97005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Beaverton Foods Occupation president Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) 6-30-96	Amount of Each Receipt this Period 300.00
F. Full Name, Mailing Address and ZIP Code Broughton H. Bishop P.O. Box 3030 Portland, OR 97208 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Reed Station Woonen Mills Occupation executive Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 6-25-96	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and ZIP Code C.M. Bishop III P.O. Box 3030 Portland, OR 97208 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Reed Station Woonen Mills Occupation executive Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6-8-96	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

4,300.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

 Use separate schedule(s)
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Detailed Summary Page

PAGE 6 OF 14

FOR LINE NUMBER 11(a)(1)

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NAME OF COMMITTEE (In Full)

Bill Witt for Congress 1996

A. Full Name, Mailing Address and ZIP Code C. M. Bishop, Jr. 220 NW Broadway Portland, OR 97208 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Nordstrom Hood River Mills Occupation executive Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 5-29-96	Amount of Each Receipt this Period 1000.00
B. Full Name, Mailing Address and ZIP Code P. G. Brumber P.O. Box 551 Elm Grove, WI 53122 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer retired Occupation Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 6-28-96	Amount of Each Receipt this Period 1000.00
C. Full Name, Mailing Address and ZIP Code Jack Burns 6350 SW Richey Ln. Tigard, OR 97223 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Burns Brothers (deceased) Occupation president Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 6-10-96	Amount of Each Receipt this Period 1000.00
D. Full Name, Mailing Address and ZIP Code E. H. Cooley 1860 SW Greenwood Rd. Portland, OR 97219 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer retired Occupation N/A Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6-5-96	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and ZIP Code Henrietta Collins 2275 SW Mayfield Ave. Portland, OR 97225 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer retired Occupation Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 5-29-96	Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and ZIP Code Sue D. Cooley 1860 SW Greenwood Rd. Portland, OR 97219 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer homemaker Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6-5-96	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and ZIP Code R. J. Deamond P.O. Box 3517 Central Point, OR 97502 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer retired Occupation Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 6-30-96	Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

4,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

 Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (in Full)

Bill Witt For Congress 1996

A. Full Name, Mailing Address and ZIP Code Cornelius Duffie 1635 SW Elm St. Portland, OR 97201 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer none Occupation N/A Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 6-18-96 Amount of Each Receipt this Period 1000.00
B. Full Name, Mailing Address and ZIP Code Dan Dutton 520 SW Yamhill Portland, OR 97204 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Stinson Lumber Occupation president Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 6-27-96 Amount of Each Receipt this Period 1000.00
C. Full Name, Mailing Address and ZIP Code William Frank 6128 S.W. Riverpointe Ln. Portland, OR 97201 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer retired Occupation N/A Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 6-4-96 Amount of Each Receipt this Period 1000.00
D. Full Name, Mailing Address and ZIP Code Ripley W. Gage P.O. Box 2209 Lake Oswego, OR 97035 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Gage Industries Occupation chairman Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 6-26-96 Amount of Each Receipt this Period 1000.00
E. Full Name, Mailing Address and ZIP Code William Gander 4804 SE Woodstock Portland, OR 97206 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Standard Appliance Occupation president Aggregate Year-to-Date > \$ 1999.00	Date (month, day, year) 5-29-96 Amount of Each Receipt this Period 1000.00
F. Full Name, Mailing Address and ZIP Code Patricia Girard 6590 SW 88th Ave Portland, OR 97223 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer homemaker Occupation homemaker Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 6-28-96 Amount of Each Receipt this Period 1000.00
G. Full Name, Mailing Address and ZIP Code William G. Girard 6590 SW 88th Ave Portland, OR 97223 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Plaid Pantry Occupation president Aggregate Year-to-Date > \$ 1900.00	Date (month, day, year) 6-28-96 Amount of Each Receipt this Period 900.00

SUBTOTAL of Receipts This Page (optional)

6,900.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER

11(a)(i)

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NAME OF COMMITTEE (In Full)

Bill Witt for Congress 1996

A. Full Name, Mailing Address and ZIP Code

N. B. Givstina
P.O. Box 989
Eugene, OR 97440

Name of Employer

Givstina
Land Timber

Date (month,
day, year)

6-10-96

Amount of Each
Receipt this Period

500.00

Receipt For:

☐ Primary

☒ General

☐ Other (specify):

Occupation

forest
land management

Aggregate Year-to-Date > \$ 500.00

B. Full Name, Mailing Address and ZIP Code

Gregory Hadley
26505 SW 98th Ave
Tualatin OR 97062

Name of Employer

Self-employed

Date (month,
day, year)

6-30-96

Amount of Each
Receipt this Period

250.00

Receipt For:

☐ Primary

☒ General

☐ Other (specify):

Occupation

management
consultant

Aggregate Year-to-Date > \$ 250.00

C. Full Name, Mailing Address and ZIP Code

William Hammond
4455 SW Greenhills
Portland, OR 97221 way

Name of Employer

retired

Date (month,
day, year)

6-4-96

Amount of Each
Receipt this Period

250.00

Receipt For:

☐ Primary

☒ General

☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 250.00

D. Full Name, Mailing Address and ZIP Code

James D. Harper Jr.
11120 MC CANE RD.
Amity, OR 97101

Name of Employer

Self-employed

Date (month,
day, year)

6-20-96

Amount of Each
Receipt this Period

1000.00

Receipt For:

☐ Primary

☒ General

☐ Other (specify):

Occupation

restorable
developer

Aggregate Year-to-Date > \$ 1000.00

E. Full Name, Mailing Address and ZIP Code

Dixie Harrison
29179 Spencer Creek W. homemaker
Eugene, OR 97405

Name of Employer

homemaker

Date (month,
day, year)

6-28-96

Amount of Each
Receipt this Period

1000.00

Receipt For:

☐ Primary

☒ General

☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 1000.00

F. Full Name, Mailing Address and ZIP Code

A. J. Horzel
12929 Forest Meadows
Lake Oswego, OR 97034 way

Name of Employer

Columbia
Forest
Products

Date (month,
day, year)

6-3-96

Amount of Each
Receipt this Period

1000.00

Receipt For:

☐ Primary

☒ General

☐ Other (specify):

Occupation

executive

Aggregate Year-to-Date > \$ 1000.00

G. Full Name, Mailing Address and ZIP Code

Ralph Hull
P.O. Box 40
Kenosha, OR 97456

Name of Employer

Hull Oakes Lumber Co.

Date (month,
day, year)

5-30-96
6-17-96

Amount of Each
Receipt this Period

500.00
200.00

Receipt For:

☐ Primary

☒ General

☐ Other (specify):

Occupation

business
executive

Aggregate Year-to-Date > \$ 1200.00

SUBTOTAL of Receipts This Page (optional)

4,700.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER
11(a)(1)

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NAME OF COMMITTEE (in Full)

Bill White for Congress 1996

<p>A. Full Name, Mailing Address and ZIP Code Russell Humberton 4300 SW Murray Blvd. Beaverton, OR 97005</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self-employed</p> <p>Occupation automotive executive</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 6-21-96</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Charles R. Insley 10520 SW 63rd Dr. Portland, OR 97219</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer AOP</p> <p>Occupation systems analyst</p> <p>Aggregate Year-to-Date > \$ 350.00</p>	<p>Date (month, day, year) 6-17-96</p>	<p>Amount of Each Receipt this Period 300.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Don R. Johnson P.O. Box 66 Riddle, OR 97469</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self-employed D.R. Johnson Lumber</p> <p>Occupation executive</p> <p>Aggregate Year-to-Date > \$ 1000.00</p>	<p>Date (month, day, year) 5-30-96</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Everett P. Johnson 1717 Whittiers Park Rd. Roseburg, OR 97470</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer C + D Lumber Co.</p> <p>Occupation Lumberman</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 6-20-96</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>E. Full Name, Mailing Address and ZIP Code ARON Jones P.O. Box 851 Eugene, OR 97440</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Seneca Sawmill</p> <p>Occupation owner</p> <p>Aggregate Year-to-Date > \$ 1000.00</p>	<p>Date (month, day, year) 6-3-96</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Marie D. Jones 1880 McLean Blvd. Eugene, OR 97405</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer homemaker</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 1000.00</p>	<p>Date (month, day, year) 6-10-96</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Kenneth R. Kirtz 1975 SW 5th Ave #200 Portland, OR 97201</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Columbia Cascade Co.</p> <p>Occupation executive</p> <p>Aggregate Year-to-Date > \$ 2000.00</p>	<p>Date (month, day, year) 6-12-96</p>	<p>Amount of Each Receipt this Period 1000.00</p>

SUBTOTAL of Receipts This Page (optional)

5,050.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (in Full)

Bill Wits for Congress 1996

<p>A. Full Name, Mailing Address and ZIP Code Wayne Runi 3725 SW Cedar Hills Beverton OR 97005</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Runi Enterprises</p> <p>Occupation president</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 5-31-96</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Scott Lapey 3545 NW 123rd Pl. Portland, OR 97229</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Griffith Rubber Mills</p> <p>Occupation president</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 6-4-96</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Kenneth Logue DMD 3114 NE Jackson Loop Rd. Hillsboro, OR 97124</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self</p> <p>Occupation dentist</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 6-11-96</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Teresa Logue 3114 NE Jackson Loop Rd. Hillsboro, OR 97124</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer homemaker</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 1000.00</p>	<p>Date (month, day, year) 6-30-96</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Belvin Matsuda 2760 NW Linnere Dr. Portland, OR 97229</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self-employed</p> <p>Occupation orthodontist</p> <p>Aggregate Year-to-Date > \$ 400.00</p>	<p>Date (month, day, year) 6-12-96</p>	<p>Amount of Each Receipt this Period 400.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Calden McCall 808 SW 15th Ave. Portland, OR 97205</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer retired</p> <p>Occupation N/A</p> <p>Aggregate Year-to-Date > \$ 1000.00</p>	<p>Date (month, day, year) 6-10-96</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Daniel McWilliams 4204 NE Hazelton Pl. Portland, OR 97213</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer McWilliams & Co.</p> <p>Occupation advertising</p> <p>Aggregate Year-to-Date > \$ 1250.00</p>	<p>Date (month, day, year) 6-4-96</p>	<p>Amount of Each Receipt this Period 500.00</p>

SUBTOTAL of Receipts This Page (optional)

3,900.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

Bill Witt for Congress 1996

<p>A. Full Name, Mailing Address and ZIP Code Harry Merlo 128 SW Morrison #450 Portland, OR 97204</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Merlo Corporation</p> <p>Occupation CEO</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 6-27-96</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Arthur Markofsky 2850 SW Lakeview Blvd. Lake Oswego, OR 97035</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Markofsky Enterprises</p> <p>Occupation executive</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 5-29-96</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Dennis Noonan 13930 SW Secretariat Ct. Beaverton, OR 97008</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Purkey Tax Service</p> <p>Occupation licensed tax preparer</p> <p>Aggregate Year-to-Date > \$ 1000.00</p>	<p>Date (month, day, year) 6-4-96</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Todd W. Nyström 25674 Cherry Creek Rd. Monroe, OR 97456</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Hull-Oakes Lumber Co.</p> <p>Occupation forester</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 6-19-96</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>E. Full Name, Mailing Address and ZIP Code B.B. Pamplin 900 SW Fifth Ave #1800 Portland, OR 97204</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Retired</p> <p>Occupation N/A</p> <p>Aggregate Year-to-Date > \$ 1000.00</p>	<p>Date (month, day, year) 5-30-96</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Dr. R. B. Pamplin, Jr. 801 Terrace Dr. Lake Oswego, OR 97034</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer R.B. Pamplin Co.</p> <p>Occupation executive</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 6-26-96</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Ronald C. PARKER 2145 NW 135th Portland, OR 97229</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Hampton Associates</p> <p>Occupation pres + CEO</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 6-24-96</p>	<p>Amount of Each Receipt this Period 500.00</p>

SUBTOTAL of Receipts This Page (optional)

3,750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Bill Witt for Congress 1996

<p>A. Full Name, Mailing Address and ZIP Code Judith Peters 13930 SW Secretariat Ct. Beaverton, OR 97008</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Radiology Group</p> <p>Occupation Physician</p> <p>Aggregate Year-to-Date > \$ 1000.00</p>	<p>Date (month, day, year) 6-4-96</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Robert A. Pierce 14010 SW High Tor Dr. TIGARD, OR 97224</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self-employed</p> <p>Occupation Sales</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 6-4-96</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>C. Full Name, Mailing Address and ZIP Code R. L. Praegitzler 1270 Monmouth Court Rd. Dallas, OR 97338</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Praegitzler Industries</p> <p>Occupation Owner</p> <p>Aggregate Year-to-Date > \$ 1000.00</p>	<p>Date (month, day, year) 5-31-96</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Robert C. Sanders 6903 SE Riverdale Dr. Vancouver, WA 98664</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer retired</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 1000.00</p>	<p>Date (month, day, year) 6-21-96</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Don J. Shaw 12405 SW Dockhill Ct. Tigard, OR 97224</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer retired</p> <p>Occupation N/A</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 6-3-96</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Forrest Simmons 1700 SW Military Rd. Portland, OR 97219</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer retired</p> <p>Occupation N/A</p> <p>Aggregate Year-to-Date > \$ 450.00</p>	<p>Date (month, day, year) 6-18-96</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Steven Johnson P.O. Box 250 Kenosha, OR 97442</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Superior Lumber Co.</p> <p>Occupation executive</p> <p>Aggregate Year-to-Date > \$ 1000.00</p>	<p>Date (month, day, year) 6-3-96</p>	<p>Amount of Each Receipt this Period 1000.00</p>

SUBTOTAL of Receipts This Page (optional)

4,750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

Bill Latta for Congress 1996

<p>A. Full Name, Mailing Address and ZIP Code <u>Henry Swigert</u> <u>P.O. Box 10123</u> <u>Portland, OR 97210</u></p> <p>Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p>	<p>Name of Employer <u>EGCO Steel Co.</u></p> <p>Occupation <u>Executive</u></p> <p>Aggregate Year-to-Date > \$ <u>1000.00</u></p>	<p>Date (month, day, year) <u>5-29-96</u></p>	<p>Amount of Each Receipt this Period <u>1000.00</u></p>
<p>B. Full Name, Mailing Address and ZIP Code <u>W.T. Triplett</u> <u>7375 SW Lake Blvd Ct.</u> <u>Wilsonville, OR 97070</u></p> <p>Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p>	<p>Name of Employer <u>retired</u></p> <p>Occupation <u></u></p> <p>Aggregate Year-to-Date > \$ <u>250.00</u></p>	<p>Date (month, day, year) <u>6-24-96</u></p>	<p>Amount of Each Receipt this Period <u>250.00</u></p>
<p>C. Full Name, Mailing Address and ZIP Code <u>Donald Tykeson</u> <u>447 Spglass Dr.</u> <u>Eugene, OR 97401</u></p> <p>Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p>	<p>Name of Employer <u>self</u></p> <p>Occupation <u>investor</u></p> <p>Aggregate Year-to-Date > \$ <u>450.00</u></p>	<p>Date (month, day, year) <u>6-21-96</u></p>	<p>Amount of Each Receipt this Period <u>200.00</u></p>
<p>D. Full Name, Mailing Address and ZIP Code <u>Donald Walker</u> <u>65895 W Hwy 20</u> <u>Bend, OR 97701</u></p> <p>Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p>	<p>Name of Employer <u>retired</u></p> <p>Occupation <u></u></p> <p>Aggregate Year-to-Date > \$ <u>1000.00</u></p>	<p>Date (month, day, year) <u>6-19-96</u></p>	<p>Amount of Each Receipt this Period <u>1000.00</u></p>
<p>E. Full Name, Mailing Address and ZIP Code <u>Robert Wilhelm</u> <u>3250 NW Mt. Helms Rd.</u> <u>Portland, OR 97210</u></p> <p>Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p>	<p>Name of Employer <u>Wilhelm Trucking</u></p> <p>Occupation <u>Trucking Executive</u></p> <p>Aggregate Year-to-Date > \$ <u>500.00</u></p>	<p>Date (month, day, year) <u>6-11-96</u></p>	<p>Amount of Each Receipt this Period <u>500.00</u></p>
<p>F. Full Name, Mailing Address and ZIP Code <u>Mrs. Cornelius Duffie</u> <u>1635 SW Elm St.</u> <u>Portland, OR 97201</u></p> <p>Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p>	<p>Name of Employer <u>homemaker</u></p> <p>Occupation <u></u></p> <p>Aggregate Year-to-Date > \$ <u>1000.00</u></p>	<p>Date (month, day, year) <u>5-24-96</u></p>	<p>Amount of Each Receipt this Period <u>1000.00</u></p>
<p>G. Full Name, Mailing Address and ZIP Code <u>Samuel Wheeler</u> <u>1211 SW 5th Ave</u> <u>Portland, OR 97204</u></p> <p>Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p>	<p>Name of Employer <u>retired</u></p> <p>Occupation <u></u></p> <p>Aggregate Year-to-Date > \$ <u>1800.00</u></p>	<p>Date (month, day, year) <u>6-17-96</u></p>	<p>Amount of Each Receipt this Period <u>900.00</u></p>

SUBTOTAL of Receipts This Page (optional)

4,850.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 14 OF 14

FOR LINE NUMBER

11(a)(i)

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NAME OF COMMITTEE (in Full)

Bill Hale for Congress 1996

A. Full Name, Mailing Address and ZIP Code
John Trimmell
525 So. Kansas
Liberal KS 67901

Name of Employer
self-employed

Date (month,
day, year)
5-9-96

Amount of Each
Receipt this Period
1000.00*

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Occupation
wholesaler

Aggregate Year-to-Date > \$ 1000.00

B. Full Name, Mailing Address and ZIP Code
Above Contr buton Earmarked
Madnon Project Inc. Through:
Federal Fund
P.O. Box 479, Hamilton, VA 22065

Name of Employer

Date (month,
day, year)
5-9-96

Amount of Each
Receipt this Period
1000.00
memo ENTRY
FROM CONDUIT

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$

C. Full Name, Mailing Address and ZIP Code
Oregon Smith Fund
5000 Cirrus Dr. #202
Medford, OR 97504

Name of Employer
self-employed

Date (month,
day, year)
6-2-96

Amount of Each
Receipt this Period
1000.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation
consultant

Aggregate Year-to-Date > \$ 2000.00

D. Full Name, Mailing Address and ZIP Code
Frank Warner
121 SW Salmon
Portland, OR 97204

Name of Employer

Date (month,
day, year)
5-16-96

Amount of Each
Receipt this Period
250.00
memo
(250.00)*

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Occupation
(* contributed 500.00 on 5-17-95 and 500.00 on 4-24-96)

Aggregate Year-to-Date > \$ 750.00

E. Full Name, Mailing Address and ZIP Code
SAME AS ABOVE Frank Warner
121 SW Salmon
Portland, OR 97204

Name of Employer
retired

Date (month,
day, year)
5-16-96

Amount of Each
Receipt this Period
250.00
red contribution to
general election

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 750.00

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$

SUBTOTAL of Receipts This Page (optional)

2,250.00

TOTAL This Period (last page this line number only)

56,700.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 11 OF 11
FOR LINE NUMBER 11(6)

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)

Bill Witt for Congress 1996

A. Full Name, Mailing Address and ZIP Code

Mathew Co. Republican Central Committee

Name of Employer

N/A

Date (month,
day, year)

5-24-96

Amount of Each
Receipt this Period

100.00

Receipt For:

☐ Primary

☒ General

☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$

100.00

B. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify):

Aggregate Year-to-Date > \$

C. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify):

Aggregate Year-to-Date > \$

D. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify):

Aggregate Year-to-Date > \$

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify):

Aggregate Year-to-Date > \$

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify):

Aggregate Year-to-Date > \$

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify):

Aggregate Year-to-Date > \$

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

100.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11(C)

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)

Bill Wilt for Congress 1996

A. Full Name, Mailing Address and ZIP Code
Republican National Coalition
for Life PAC
P.O. Box 618
Aiken, SC 29802

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

5-17-96

1000.00

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date > \$ 1000.00

B. Full Name, Mailing Address and ZIP Code
NRA - Political Victory Fund
11250 Waples Mill Rd.
Fairfax, VA 22030

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

6-25-96

2500.00

Occupation

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date > \$ 2500.00

C. Full Name, Mailing Address and ZIP Code
TRSA of America
Political Action Committee
1130 E. Beach Blvd #8
Hialeah, FL 33009

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

6-28-96

500.00

Occupation

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date > \$ 500.00

D. Full Name, Mailing Address and ZIP Code
AGC PAC Committee
1957 E. St NW
Washington DC 20006

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

6-28-96

2500.00

Occupation

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date > \$ 2500.00

E. Full Name, Mailing Address and ZIP Code
RJR PAC 718
P.O. Box 718
Winston-Salem, NC 27102

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

6-28-96

500.00

Occupation

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date > \$ 500.00

F. Full Name, Mailing Address and ZIP Code
Majority Leaders Fund
P.O. Box 995
Lewisville, TX 75067

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

6-30-96

1000.00

Occupation

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date > \$ 1000.00

G. Full Name, Mailing Address and ZIP Code
National Restaurant Assoc. PAC
1200 Seventeenth St NW
Washington, DC 20036

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

6-30-96

1000.00

Occupation

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date > \$ 1000.00

SUBTOTAL of Receipts This Page (optional)

9,000.00

TOTAL This Period (last page this line number only)

9,000.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 14

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NAME OF COMMITTEE (in Full)

B. H. Witt for Congress 1996

A. Full Name, Mailing Address and ZIP Code

Reed Harris
322 NW 14th
Portland, OR 97210

Name of Employer

refund mailing
overpayment

Date (month,
day, year)

5-17-96

Amount of Each
Receipt this Period

140.60

Receipt For:

☐ Primary ☐ General

☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$

B. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary ☐ General

☐ Other (specify):

Aggregate Year-to-Date > \$

C. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary ☐ General

☐ Other (specify):

Aggregate Year-to-Date > \$

D. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary ☐ General

☐ Other (specify):

Aggregate Year-to-Date > \$

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary ☐ General

☐ Other (specify):

Aggregate Year-to-Date > \$

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary ☐ General

☐ Other (specify):

Aggregate Year-to-Date > \$

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary ☐ General

☐ Other (specify):

Aggregate Year-to-Date > \$

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

140.60

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 11

FOR LINE NUMBER

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)

Bill Witt for Congress 1996

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
US Postmaster	Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-2-96	320.00
B. Full Name, Mailing Address and ZIP Code Labels and Lists 2500 116th Ave. NE Bellevue, WA 98004	Purpose of Disbursement lists and labels Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-2-96	1,082.71
C. Full Name, Mailing Address and ZIP Code Clark American Check Order 16209 Bryant Rd. Lake Oswego, OR 97035	Purpose of Disbursement deposit slips Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-2-96	21.25
D. Full Name, Mailing Address and ZIP Code McWilliams and Co. 3739 SE 8th Ave. Portland, OR 97214	Purpose of Disbursement advertising Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-3-96	4,415.00
E. Full Name, Mailing Address and ZIP Code John Lansing 32880 SW Delmonde Dr. Wilsonville, OR 97070	Purpose of Disbursement wages Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-3-96	1,000.00
F. Full Name, Mailing Address and ZIP Code Oregon Dept. of Consumer and Business Svc 350 Winter St NE Rm 300 Salem OR 97310	Purpose of Disbursement Worker's comp. ins. Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-6-96	500.00
G. Full Name, Mailing Address and ZIP Code Frank Fonfara 6985 SW 184th Aloha, OR 97007	Purpose of Disbursement accounting Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-6-96	250.00
H. Full Name, Mailing Address and ZIP Code David Ashcraft 288 S. Ivy St. Cornelius, OR 97113	Purpose of Disbursement wages and expense reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-6-96	1,224.09
I. Full Name, Mailing Address and ZIP Code Scott Burge 52664 Eastview Dr. Scappoose, OR 97056	Purpose of Disbursement wages Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-6-96	408.18

SUBTOTAL of Disbursements This Page (optional)

9,221.23

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 2 OF 11
FOR LINE NUMBER
17

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NAME OF COMMITTEE (in Full)

Bill Witt for Congress 1996

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Eric Christen 2580 Wembly Park Rd. LARE Oswego, OR 97035	wages Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-6-96	716. <u>30</u>
B. Full Name, Mailing Address and ZIP Code Tim Knopp P.O. Box 6145 Bend, OR 97708	wages and expense reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-6-96	3,903. <u>64</u>
C. Full Name, Mailing Address and ZIP Code Loretta Schauffler 3216 SW NEBRASKA Portland, OR 97201	wages and expense reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-6-96	347. <u>69</u>
D. Full Name, Mailing Address and ZIP Code Labels and Lists 2500 116th Ave. NE Bellevue, WA 98004	lists Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-7-96	100. <u>68</u>
E. Full Name, Mailing Address and ZIP Code Executive Plaza P.O. Box 6746 Portland, OR 97228	rent Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-7-96	1,384. <u>50</u>
F. Full Name, Mailing Address and ZIP Code Labels and Lists 2500 116th Ave. NE Bellevue, WA 98004	labels Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-7-96	333. <u>45</u>
G. Full Name, Mailing Address and ZIP Code US Postmaster	postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-7-96	320. <u>00</u>
H. Full Name, Mailing Address and ZIP Code Century Direct Marketing, Inc. P.O. Box 10283 Portland, OR 97210	marketing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-9-96	515. <u>00</u>
I. Full Name, Mailing Address and ZIP Code McWilliams and Co. 3739 SE 8th Ave. Portland, OR 97214	advertising Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-9-96	16,501. <u>25</u>

SUBTOTAL of Disbursements This Page (optional)

24,122.51

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 3 OF 11
FOR LINE NUMBER 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)

Bill Witt for Congress 1996

A. Full Name, Mailing Address and ZIP Code Culligan Bottled Water of 909 N. Columbia Portland Portland, OR 97217	Purpose of Disbursement water Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5-10-96	Amount of Each Disbursement This Period 51. ⁰⁰
B. Full Name, Mailing Address and ZIP Code Good Impressions Printing Co. 7112 NE Emerson Portland, OR 97218	Purpose of Disbursement printing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5-10-96	Amount of Each Disbursement This Period 1,678. ⁰⁰
C. Full Name, Mailing Address and ZIP Code Guy Rogers and Associates 748 Montebello Circle Chesapeake, VA 23320	Purpose of Disbursement consulting Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5-10-96	Amount of Each Disbursement This Period 2,050. ⁰⁰
D. Full Name, Mailing Address and ZIP Code Portland West Restaurant Corp 9900 SW Canyon Rd Portland OR 97225	Purpose of Disbursement meals Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5-10-96	Amount of Each Disbursement This Period 100. ⁰⁰
E. Full Name, Mailing Address and ZIP Code Transport Logic, LLC 50 SW 2nd Ave. #510 Portland, OR 97204	Purpose of Disbursement internet access Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5-10-96	Amount of Each Disbursement This Period 25. ⁰⁰
F. Full Name, Mailing Address and ZIP Code William D. Witt 13197 NW Helen Ln. Portland, OR 97229	Purpose of Disbursement expense reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5-10-96	Amount of Each Disbursement This Period 100. ⁰⁰
G. Full Name, Mailing Address and ZIP Code Words, Etc. 8196 SW Hall Blvd #208 Beaverton OR 97008	Purpose of Disbursement word processing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5-10-96	Amount of Each Disbursement This Period 131. ²⁵
H. Full Name, Mailing Address and ZIP Code Labels and Lists 2500 116th Ave. NE Bellevue, WA 98004	Purpose of Disbursement labels Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5-14-96	Amount of Each Disbursement This Period 150. ⁴⁰
I. Full Name, Mailing Address and ZIP Code Advanced Phone Resources 8940 S. 700 East Salt Lake City, UT 84070	Purpose of Disbursement telemarketing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5-15-96	Amount of Each Disbursement This Period 6,609. ²⁵

SUBTOTAL of Disbursements This Page (optional)

10,894.90

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 4 OF 11
FOR LINE NUMBER
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NAME OF COMMITTEE (in Full)

Bill Witt for Congress 1996

A. Full Name, Mailing Address and ZIP Code McWilliams and Co. 3739 SE 8th Ave. Portland, OR 97214	Purpose of Disbursement advertising Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5-15-96	Amount of Each Disbursement This Period 10,155. ⁰⁰
B. Full Name, Mailing Address and ZIP Code Frank Fonfara 6985 SW 184th Aloha, OR 97007	Purpose of Disbursement accounting Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5-16-96	Amount of Each Disbursement This Period 250. ⁰⁰
C. Full Name, Mailing Address and ZIP Code US Postmaster	Purpose of Disbursement postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5-16-96	Amount of Each Disbursement This Period 64. ⁰⁰
D. Full Name, Mailing Address and ZIP Code David Ashcraft 288 S. Ivy St. Cornelius, OR 97113	Purpose of Disbursement wages and expense reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5-20-96	Amount of Each Disbursement This Period 1,058. ⁶¹
E. Full Name, Mailing Address and ZIP Code Eric Christen 2580 Wembly Park Rd. Lake Oswego, OR 97035	Purpose of Disbursement wages and expense reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5-20-96	Amount of Each Disbursement This Period 956. ²⁵
F. Full Name, Mailing Address and ZIP Code Tim Knopp P.O. Box 6145 Bend, OR 97008	Purpose of Disbursement wages Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5-20-96	Amount of Each Disbursement This Period 1,245. ⁴¹
G. Full Name, Mailing Address and ZIP Code Loretta Schauflier 3216 SW Nebraska Portland, OR 97201	Purpose of Disbursement wages Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5-20-96	Amount of Each Disbursement This Period 405. ⁸⁷
H. Full Name, Mailing Address and ZIP Code Phillip Simone 335 NW 19th Av #311 Portland OR 97207	Purpose of Disbursement wages Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5-20-96	Amount of Each Disbursement This Period 92. ⁰¹
I. Full Name, Mailing Address and ZIP Code Joe Foxall 1146 N. Jantzen Portland, OR 97217	Purpose of Disbursement commissions Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5-20-96	Amount of Each Disbursement This Period 500. ⁰⁰

SUBTOTAL of Disbursements This Page (optional)

14,727.15

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

Bill Witt for Congress 1996

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Gateway Communications, Inc. 6600 NE 78th Ct. Portland, OR 97218	fundraising Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-20-96	1,000. ⁰⁰ / ₁₀₀
B. Full Name, Mailing Address and ZIP Code Loretta Schaeffler 3216 SW Nebraska Portland, OR 97201	expense reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-23-96	138. ⁶³ / ₁₀₀
C. Full Name, Mailing Address and ZIP Code US Postmaster	postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-23-96	64. ⁰⁰ / ₁₀₀
D. Full Name, Mailing Address and ZIP Code US Postmaster	postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-24-96	480. ⁰⁰ / ₁₀₀
E. Full Name, Mailing Address and ZIP Code East County Signs 14606 SE Harrison Portland, OR 97233	signs Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-28-96	45. ⁰⁰ / ₁₀₀
F. Full Name, Mailing Address and ZIP Code Ad Group, Inc. P.O. Box 2626 Eugene, OR 97402	printing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-30-96	2,000. ⁰⁰ / ₁₀₀
G. Full Name, Mailing Address and ZIP Code Allen's Press Clipping Bureau 621 SW Alder Portland, OR 97205	press clipping service Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-30-96	84. ⁹² / ₁₀₀
H. Full Name, Mailing Address and ZIP Code AT and T P.O. Box 78225 Phoenix, AZ 85062	phones/long distance Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-30-96	106. ³⁰ / ₁₀₀
I. Full Name, Mailing Address and ZIP Code AT and T Wireless Services P.O. Box 78248 Phoenix, AZ 85062	cell phones Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-30-96	371. ⁹⁷ / ₁₀₀

SUBTOTAL of Disbursements This Page (optional)

4,290.82

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SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

Bill Wiet for Congress 1996

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Gateway Communications, Inc. 6600 NE 78th Ct. Portland, OR 97218	fundraising Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-30-96	500.00
B. Full Name, Mailing Address and ZIP Code Good Impressions Printing, Co. 7112 NE Emerson Portland, OR 97218	printing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-30-96	802.00
C. Full Name, Mailing Address and ZIP Code GTE Northwest Payment Processing Center Inglewood, CA 90313	phones Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-30-96	988.73
D. Full Name, Mailing Address and ZIP Code Oregon Right to Life PAC 4335 River Rd. N. Salem, OR 97303	mailing list Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-30-96	106.68
E. Full Name, Mailing Address and ZIP Code The Polling Company 1337 Connecticut Ave. NW Washington, DC 20036	polling Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-30-96	2,000.00
F. Full Name, Mailing Address and ZIP Code Postal Annex 8152 SW Hall Blvd. Beaverton, OR 97008	mailing service Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-30-96	120.63
G. Full Name, Mailing Address and ZIP Code West Coast Paper P.O. Box 84145 Seattle, WA 98124	paper Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-30-96	46.00
H. Full Name, Mailing Address and ZIP Code Words, Etc. 8196 SW Hall Blvd #208 Beaverton OR 97008	word processing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-30-96	240.10
I. Full Name, Mailing Address and ZIP Code Elections Division Sec. of State Salem, OR 97309	election results Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-30-96	24.00

SUBTOTAL of Disbursements This Page (optional)

4,828.14

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SCHEDULE B

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NAME OF COMMITTEE (in Full)

Bill Witt for Congress 1996

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Frank Fonfara 6985 SW 184th Aloha, OR 97007	accounting Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-4-96	250.00
B. Full Name, Mailing Address and ZIP Code Postal Annex 8152 SW Hall Blvd. Beaverton, OR 97008	Postage/Mailing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-5-96	260.00
C. Full Name, Mailing Address and ZIP Code David Ashcraft 288 S. Ivy St. Cornelius, OR 97113	wages and expense reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-5-96	902.89
D. Full Name, Mailing Address and ZIP Code Scott Burge 52664 Eastview Dr. Scappoose, OR 97056	wages Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-5-96	408.18
E. Full Name, Mailing Address and ZIP Code Eric Christen 2580 Wembly Park Rd. Lake Oswego, OR 97035	wages and expense reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-5-96	828.50
F. Full Name, Mailing Address and ZIP Code Tim Knopp P.O. Box 6145 Bend, OR 97708	wages and expense reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-5-96	1,720.42
G. Full Name, Mailing Address and ZIP Code Joe Foxall 1146 N. Jantzen Portland, OR 97217	commissions Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-5-96	500.00
H. Full Name, Mailing Address and ZIP Code Loretta Schaffler 3216 SW Nebraska Portland, OR 97201	wages Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-5-96	331.59
I. Full Name, Mailing Address and ZIP Code Oregon Department of Revenue P.O. Box 14800 Salem, OR 97309	state taxes withholding Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-5-96	1,715.60

SUBTOTAL of Disbursements This Page (optional)

6,917.18

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)

Bill Witt for Congress 1996

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bank of America Oregon Lake Grove Branch 16209 Bryant Rd. Lake Oswego, OR 97035	federal taxes withholding Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-5-96	44.87
Bank of America Oregon Lake Grove Branch 16209 Bryant Rd. Lake Oswego, OR 97035	federal taxes withholding Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-5-96	2,021.14
D. Scott Peterson 2800 Greenway Blvd Falls Church VA 22042	research Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-5-96	500.00
Executive Plaza P.O. Box 6746 Portland, OR 97228	rent Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-6-96	1,365.00
Gateway Communications, Inc. 6600 NE 78th Ct. Portland, OR 97218	fundraising Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-7-96	446.50
Moba Media, Inc. PO Box 1593 Portland OR 97207	media reproduction Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-7-96	108.00
The Polling Company 1337 Connecticut Ave. NW 2nd Floor Washington, DC 20036	polling Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-7-96	2,500.00
Transport Logic, LLC 50 SW 2nd Ave. #510 Portland, OR 97204	internet access Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-7-96	25.00
Words, Etc. 8196 SW Hall Blvd #208 Beaverton OR 97008	word processing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-7-96	90.10

SUBTOTAL of Disbursements This Page (optional)

7,100.61

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SCHEDULE B

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NAME OF COMMITTEE (in Full)

Bill Witt for Congress 1996

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
John Lansing 32380 SW Belmonte Dr. Wilsonville, OR 97070	wages Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-7-96	1,000.00
B. Full Name, Mailing Address and ZIP Code US Postmaster	Purpose of Disbursement Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-12-96	320.00
C. Full Name, Mailing Address and ZIP Code Oregon Dept. of Consumer and Business 350 Winter St NE, Rm 300 Salem OR 97310	Purpose of Disbursement workers comp. ins. Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-18-96	125.98
D. Full Name, Mailing Address and ZIP Code East County Signs 14606 SE Harrison Portland, OR 97233	Purpose of Disbursement signs Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-19-96	180.00
E. Full Name, Mailing Address and ZIP Code Good Impressions Printing Co. 7112 NE Emerson Portland, OR 97218	Purpose of Disbursement printing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-19-96	467.00
F. Full Name, Mailing Address and ZIP Code Frank Fonfara 6985 SW 184th Aloha, OR 97007	Purpose of Disbursement accounting Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-20-96	250.00
G. Full Name, Mailing Address and ZIP Code David Ashcraft 288 S. Ivy St. Cornelius, OR 97113	Purpose of Disbursement wages Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-20-96	844.90
H. Full Name, Mailing Address and ZIP Code Scott Burge 52664 Eastview Dr. Scappoose, OR 97056	Purpose of Disbursement wages Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-20-96	408.18
I. Full Name, Mailing Address and ZIP Code Eric Christen 2580 Wembly Park Rd. Lake Oswego, OR 97035	Purpose of Disbursement wages Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-20-96	716.30

SUBTOTAL of Disbursements This Page (optional)

4,312.36

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NAME OF COMMITTEE (in Full)

Bill Witt for Congress 1996

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Tim Knopp P.O. Box 6145 Bend, OR 97708	wages Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-20-96	1,442. ⁶⁹
B. Full Name, Mailing Address and ZIP Code Loretta Schaffler 3216 SW Nebraska Portland, OR 97201	wages Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-20-96	152. ⁶¹
C. Full Name, Mailing Address and ZIP Code Guy Rogers and Associates 748 Montebello Circle Chesapeake, VA 23320	consulting Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-21-96	1,625. ⁰⁰
D. Full Name, Mailing Address and ZIP Code Hillsboro Chamber of Commerce 334 SE 5th Av. Hillsboro OR 97123	parade entry Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-24-96	20. ⁰⁰
E. Full Name, Mailing Address and ZIP Code GTE Northwest Payment Processing Center Inglewood, CA 90313	phones Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-24-96	926. ³⁸
F. Full Name, Mailing Address and ZIP Code Good Impressions Printing Co. 7112 NE Emerson Portland, OR 97218	printing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-25-96	2,120. ⁰⁰
G. Full Name, Mailing Address and ZIP Code US Postmaster	postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-26-96	320. ⁰⁰
H. Full Name, Mailing Address and ZIP Code Bank of America Oregon Lake Grove Branch 16209 Bryant Rd. Lake Oswego, OR 97035	federal taxes Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-27-96	86. ³⁵
I. Full Name, Mailing Address and ZIP Code Bank of America Oregon Lake Grove Branch 16209 Bryant Rd. Lake Oswego, OR 97035	federal taxes withholding Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-27-96	1,759. ⁹⁰

SUBTOTAL of Disbursements This Page (optional)

8,452.93

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NAME OF COMMITTEE (in Full)

Bill Witt for Congress 1996

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Oregon Department of Revenue P.O. Box 14800 Salem, OR 97309	State taxes withholding Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-27-96	779.66
Bank of America Lake Grove Branch 16209 Bryant Rd. Lake Oswego, OR 97035	Service charges Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-2-96 5-7-96	35.50 2.15
Century Direct marketing P.O. Box 10283 Portland, OR 97210	mailing service Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-9-96	6234.26
U.S. Postmaster	postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-9-96	640.00
Scott Burge 52664 Eastview Dr. Scappoose, OR 97056	wages Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-15-96 5-20-96	150.00 258.18
Bank of America Lake Grove Branch 16209 Bryant Rd. Lake Oswego, OR 97035	Service charges Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-10-96	35.18
Scott Burge 52664 Eastview Dr. Scappoose, OR 97056	wages Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-25-96	408.18
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

8,543.11

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103,410.94

SCHEDULE B

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NAME OF COMMITTEE (in Full)

Bill White for Congress 1996

<p>A. Full Name, Mailing Address and ZIP Code <i>Bill White for Senate</i> <i>P.O. Box 230150</i> <i>Tigard, OR</i></p>	<p>Purpose of Disbursement <i>transfer authorized from Congress 1996 to Senate Committee</i> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <i>pay. outstanding</i></p>	<p>Date (month, day, year) <i>6-27-96</i></p>	<p>Amount of Each Disbursement This Period <i>584.50</i></p>
<p>B. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement <i>debt</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>
<p>C. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>
<p>D. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>
<p>E. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>
<p>F. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>
<p>G. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>
<p>H. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>
<p>I. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>

SUBTOTAL of Disbursements This Page (optional)

584.50

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584.50

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

 PAGE 1 OF 1
FOR LINE NUMBER 19(a)

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)

Bill White for Congress 1996

A. Full Name, Mailing Address and ZIP Code <i>William D. White</i> <i>13197 NW Helenka</i> <i>Portland, OR 97229</i>	Purpose of Disbursement <i>loan repayment</i> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) <i>5-10-96</i>	Amount of Each Disbursement This Period <i>3900.00</i>
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

3900.00

TOTAL This Period (last page this line number only)

3900.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 20(a)

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)

Bill Witt for Congress 1996

A. Full Name, Mailing Address and ZIP Code
Cornelius Ruffe
1635 SW Elm St.
Portland, OR 97201

Purpose of Disbursement
retard excess
contribution
Disbursement for: ☒ Primary ☐ General
☐ Other (specify)

Date (month,
day, year)
5-10-96

Amount of Each
Disbursement This Period
1000.00

B. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement
Disbursement for: ☐ Primary ☐ General
☐ Other (specify)

Date (month,
day, year)

Amount of Each
Disbursement This Period

C. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement
Disbursement for: ☐ Primary ☐ General
☐ Other (specify)

Date (month,
day, year)

Amount of Each
Disbursement This Period

D. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement
Disbursement for: ☐ Primary ☐ General
☐ Other (specify)

Date (month,
day, year)

Amount of Each
Disbursement This Period

E. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement
Disbursement for: ☐ Primary ☐ General
☐ Other (specify)

Date (month,
day, year)

Amount of Each
Disbursement This Period

F. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement
Disbursement for: ☐ Primary ☐ General
☐ Other (specify)

Date (month,
day, year)

Amount of Each
Disbursement This Period

G. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement
Disbursement for: ☐ Primary ☐ General
☐ Other (specify)

Date (month,
day, year)

Amount of Each
Disbursement This Period

H. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement
Disbursement for: ☐ Primary ☐ General
☐ Other (specify)

Date (month,
day, year)

Amount of Each
Disbursement This Period

I. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement
Disbursement for: ☐ Primary ☐ General
☐ Other (specify)

Date (month,
day, year)

Amount of Each
Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

1,000.00

TOTAL This Period (last page this line number only)

1,000.00

SCHEDULE C

(Revised 3/80)

LOANS

Page 1 of 2 for
LINE NUMBER 13(a)
(Use separate schedules
for each numbered line)

Name of Committee (in Full)

Bill Witt for Congress 1996

A. Full Name, Mailing Address and ZIP Code of Loan Source

William D. Witt
13197 NW Helen Ln
Portland OR 97229

Original Amount
of Loan

6000.00
(personal
funds)

Cumulative Payment
To Date

3900.00
5-10-96

Balance Outstanding
at Close of This Period

2100.00

Election: ☒ Primary ☐ General ☐ Other (specify):

Terms: Date Incurred 3-13-96 Date Due demand Interest Rate 0 %(apr)

Secured

List All Endorsers or Guarantors (if any) to Item A

1. Full Name, Mailing Address and ZIP Code

Name of Employer

Occupation

Amount Guaranteed Outstanding:
\$

2. Full Name, Mailing Address and ZIP Code

Name of Employer

Occupation

Amount Guaranteed Outstanding:
\$

3. Full Name, Mailing Address and ZIP Code

Name of Employer

Occupation

Amount Guaranteed Outstanding:
\$

B. Full Name, Mailing Address and ZIP Code of Loan Source

William D. Witt
13197 NW Helen Ln.
Portland, OR 97229

Original Amount
of Loan

95000.00
(personal
funds)

Cumulative Payment
To Date

0

Balance Outstanding
at Close of This Period

95000.00

Election: ☒ Primary ☐ General ☐ Other (specify):

Terms: Date Incurred 3-29-96 Date Due demand Interest Rate 0 %(apr)

Secured

List All Endorsers or Guarantors (if any) to Item B

1. Full Name, Mailing Address and ZIP Code

Name of Employer

Occupation

Amount Guaranteed Outstanding:
\$

2. Full Name, Mailing Address and ZIP Code

Name of Employer

Occupation

Amount Guaranteed Outstanding:
\$

3. Full Name, Mailing Address and ZIP Code

Name of Employer

Occupation

Amount Guaranteed Outstanding:
\$

SUBTOTALS This Period This Page (optional)

TOTALS This Period (last page in this line only)

97,100.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C

(Revised 3/80)

LOANS

Page 2 of 2 for
LINE NUMBER 13(a)
(Use separate schedules
for each numbered line)

Name of Committee (In Full)

Bill Witt for Congress 1996

A. Full Name, Mailing Address and ZIP Code of Loan Source <u>William D. Witt</u> <u>13197 NW Helen Ln.</u> <u>Portland, OR 97229</u>		Original Amount of Loan <u>12,000.00</u> <u>(personal funds)</u>	Cumulative Payment To Date <u>0</u>	Balance Outstanding at Close of This Period <u>12,000.00</u>
Election: <u>Primary</u> General Other (specify):		Terms: Date Incurred <u>5-1-96</u> Date Due <u>demand</u> Interest Rate <u>0</u> %(apr) Secured		
List All Endorsers or Guarantors (if any) to Item A				
1. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding: \$		

B. Full Name, Mailing Address and ZIP Code of Loan Source <u>William D. Witt</u> <u>13197 NW Helen Ln.</u> <u>Portland, OR 97229</u>		Original Amount of Loan <u>11,000.00</u> <u>(personal funds)</u>	Cumulative Payment To Date <u>0</u>	Balance Outstanding at Close of This Period <u>11,000.00</u>
Election: <u>Primary</u> General Other (specify):		Terms: Date Incurred <u>5-15-96</u> Date Due <u>demand</u> Interest Rate <u>0</u> %(apr) Secured		
List All Endorsers or Guarantors (if any) to Item B				
1. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding: \$		

SUBTOTALS This Period This Page (optional)	<u>23,000.00</u>
TOTALS This Period (last page in this line only)	<u>120,100.00</u>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 1 of 3 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<i>B:11 Mitt for Congress 1996</i>				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor <i>Ad Group / Industrial Litho P.O. Box 2626 Eugene, OR 97402</i>	<i>12464.44</i>	<i>3704.42</i>	<i>2,000.00</i>	<i>14,168.86</i>
Nature of Debt (Purpose): <i>printing</i>				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor <i>Executive Plaza P.O. Box 6746 Portland, OR 97228</i>	<i>2684.50</i>	<i>65.00</i>	<i>2,749.50</i>	<i>- 0 -</i>
Nature of Debt (Purpose): <i>rent</i>				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor <i>Good Impressions Printing 7112 NE Emerson Portland, OR 97218</i>	<i>1678.00</i>	<i>7,105.00</i>	<i>5067.00</i>	<i>3,716.00</i>
Nature of Debt (Purpose): <i>printing</i>				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor <i>GTE Northwest Payment Processing Center Inglewood, CA 90313</i>	<i>988.73</i>	<i>2410.04</i>	<i>1915.11</i>	<i>1483.66</i>
Nature of Debt (Purpose): <i>phones</i>				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor <i>McWilliams & Co. 3739 SE 8th Ave. Portland, OR 97202</i>	<i>1433.46</i>	<i>45,541.85</i>	<i>31,071.25</i>	<i>15,904.06</i>
Nature of Debt (Purpose): <i>consulting</i>				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor <i>Willco Systems FMC 16250 SW Upper Boones Ferry Portland, OR 97224</i>	<i>2967.54</i>	<i>354.17</i>	<i>0</i>	<i>3321.71</i>
Nature of Debt (Purpose): <i>repayment for services</i>				
1) SUBTOTALS This Period This Page (optional)				<i>38,594.29</i>
2) TOTALS This Period (last page in this line only)				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

SCHEDULE D
 (Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
B: 11 letter for Congress 1996				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Oregon Dept of Revenue Salem, OR	857.94	1637.32	2495.26	- 0 -
Nature of Debt (Purpose): <u>state</u> <u>withholding taxes</u>				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Gateway Communications 6600 NE 78th Ct. Portland, OR 97218	1946.50	0	1946.50	- 0 -
Nature of Debt (Purpose): <u>telemarketing</u>				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Guy Rogers & Assoc 748 Montebello Circle Chesapeake MA 23320	2050.00	2633.21	3,675.00	1,008.21
Nature of Debt (Purpose): <u>consulting</u>				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Tim Knopp P.O. Box 6145 Bend, OR 97708	2658.23	475.01	3,133.24	- 0 -
Nature of Debt (Purpose): <u>Expense Reimburse-</u> <u>ment only</u>				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Advanced Phone 8940 S. 700th Avenue Salt Lake City, UT 84070	4271.65	5368.64	6,609.25	3,031.04
Nature of Debt (Purpose): <u>telemarketing</u>				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Century Direct Marketing P.O. Box 10283 Portland, OR 97210	- 0 -	12,364.77	6,749.26	5615.51 (in dispute)
Nature of Debt (Purpose): <u>marketing</u>				
1) SUBTOTALS This Period This Page (optional)				9654.76
2) TOTALS This Period (last page in this line only)				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<i>B:11 W/H for Congress 1996</i>				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor <i>The Polling Company 1337 Connecticut Ave NW Washington, D.C. 20036 2d floor</i>	<i>- 0 -</i>	<i>5850.00</i>	<i>4500.00</i>	<i>1350.00</i>
Nature of Debt (Purpose): <i>polling</i>				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				<i>1350.00</i>
2) TOTALS This Period (last page in this line only)				<i>49,599.05</i>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				<i>120,100.00</i>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				<i>169,699.05</i>

96 "01" 616 "1650

Federal Election Commission
ENVELOPE REPLACEMENT PAGE
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EJC

PREPARER

7/20/96

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