

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
HEMCON INC POLITICAL ACTION COMMITTEE AKA HEMCON PAC

ADDRESS (number and street) 10575 SW CASCADE AVENUE SUITE 130  
 Check if different than previously reported. (ACC)  
TIGARD OR 97223

2. **FEC IDENTIFICATION NUMBER** C00411801 **CITY** TIGARD **STATE** OR **ZIP CODE** 97223  
3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)

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

5. Covering Period 07 01 2007 through 12 31 2007

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 John W. Morgan

Signature of Treasurer Electronically Filed by John W. Morgan Date 01 29 2008

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

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
HEMCON INC POLITICAL ACTION COMMITTEE AKA HEMCON PAC

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		30224.86
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period .....	30999.86									
(c) Total Receipts (from Line 19) .....	465.00	790.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	31464.86	31014.86								
7. Total Disbursements (from Line 31) .....	7150.00	6700.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	24314.86	24314.86								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
HEMCON INC POLITICAL ACTION COMMITTEE AKA HEMCON PAC

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

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	325.00	450.00
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	140.00	340.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	465.00	790.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	465.00	790.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	465.00	790.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	465.00	790.00

**DETAILED SUMMARY PAGE**

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	150.00	300.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	150.00	300.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7000.00	6400.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	7150.00	6700.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7150.00	6700.00

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	465.00	790.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	465.00	790.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	150.00	300.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	150.00	300.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 15  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

NAME OF COMMITTEE (In Full)  
HEMCON INC POLITICAL ACTION COMMITTEE AKA HEMCON PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Michael Radovan</p> <p>Mailing Address 10575 SW Cascade Ave. Ste. 130</p> <p>City State Zip Code Tigard OR 97223</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer HemCon, Inc. Occupation Executive</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">350.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">07 / 13 / 2007</span></p> <p><b>Transaction ID:</b> SA11AI.4368</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">25.00</span></p> <p>Payroll Deduct-\$25 Bi-Weekly</p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Michael Radovan</p> <p>Mailing Address 10575 SW Cascade Ave. Ste. 130</p> <p>City State Zip Code Tigard OR 97223</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer HemCon, Inc. Occupation Executive</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">375.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">07 / 27 / 2007</span></p> <p><b>Transaction ID:</b> SA11AI.4369</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">25.00</span></p> <p>Payroll Deduct-\$25 Bi-Weekly</p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Michael Radovan</p> <p>Mailing Address 10575 SW Cascade Ave. Ste. 130</p> <p>City State Zip Code Tigard OR 97223</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer HemCon, Inc. Occupation Executive</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">400.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">08 / 10 / 2007</span></p> <p><b>Transaction ID:</b> SA11AI.4371</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">25.00</span></p> <p>Payroll Deduct-\$25 Bi-Weekly</p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">75.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 7 / 15
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
HEMCON INC POLITICAL ACTION COMMITTEE AKA HEMCON PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Michael Radovan		Date of Receipt
	Mailing Address 10575 SW Cascade Ave. Ste. 130		<input type="text" value="08"/> / <input type="text" value="24"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Tigard	OR	97223
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
	Name of Employer HemCon, Inc.		Occupation Executive
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="425.00"/>	Transaction ID: SA11AI.4372
			Amount of Each Receipt this Period <input type="text" value="25.00"/>
			Payroll Deduct-\$25 Bi-Weekly

<b>B.</b>	Full Name (Last, First, Middle Initial) Michael Radovan		Date of Receipt
	Mailing Address 10575 SW Cascade Ave. Ste. 130		<input type="text" value="09"/> / <input type="text" value="07"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Tigard	OR	97223
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
	Name of Employer HemCon, Inc.		Occupation Executive
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="450.00"/>	Transaction ID: SA11AI.4379
			Amount of Each Receipt this Period <input type="text" value="25.00"/>
			Payroll Deduct-\$25 Bi-Weekly

<b>C.</b>	Full Name (Last, First, Middle Initial) Michael Radovan		Date of Receipt
	Mailing Address 10575 SW Cascade Ave. Ste. 130		<input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Tigard	OR	97223
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
	Name of Employer HemCon, Inc.		Occupation Executive
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="475.00"/>	Transaction ID: SA11AI.4380
			Amount of Each Receipt this Period <input type="text" value="25.00"/>
			Payroll Deduct-\$25 Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="75.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 8 / 15  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
HEMCON INC POLITICAL ACTION COMMITTEE AKA HEMCON PAC

**A.** Full Name (Last, First, Middle Initial)  
Michael Radovan

Mailing Address 10575 SW Cascade Ave.  
Ste. 130

City Tigard State OR Zip Code 97223

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

Name of Employer HemCon, Inc. Occupation Executive

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 05 / 2007  
**Transaction ID:** SA11AI.4390  
 Amount of Each Receipt this Period 25.00  
 Payroll Deduct-\$25 Bi-Weekly

**B.** Full Name (Last, First, Middle Initial)  
Michael Radovan

Mailing Address 10575 SW Cascade Ave.  
Ste. 130

City Tigard State OR Zip Code 97223

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

Name of Employer HemCon, Inc. Occupation Executive

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 19 / 2007  
**Transaction ID:** SA11AI.4391  
 Amount of Each Receipt this Period 25.00  
 Payroll Deduct-\$25 Bi-Weekly

**C.** Full Name (Last, First, Middle Initial)  
Michael Radovan

Mailing Address 10575 SW Cascade Ave.  
Ste. 130

City Tigard State OR Zip Code 97223

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

Name of Employer HemCon, Inc. Occupation Executive

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 02 / 2007  
**Transaction ID:** SA11AI.4399  
 Amount of Each Receipt this Period 25.00  
 Payroll Deduct-\$25 Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 75.00

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 9 / 15
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
HEMCON INC POLITICAL ACTION COMMITTEE AKA HEMCON PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Michael Radovan		Date of Receipt
	Mailing Address 10575 SW Cascade Ave. Ste. 130		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 6 / 2 0 0 7
	City	State	Zip Code
	Tigard	OR	97223
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
	Name of Employer HemCon, Inc.		Occupation Executive
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 575.00	Transaction ID: SA11AI.4400 Amount of Each Receipt this Period <input type="text"/> 25.00 Payroll Deduct-\$25 Bi-Weekly

<b>B.</b>	Full Name (Last, First, Middle Initial) Michael Radovan		Date of Receipt
	Mailing Address 10575 SW Cascade Ave. Ste. 130		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 3 0 / 2 0 0 7
	City	State	Zip Code
	Tigard	OR	97223
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
	Name of Employer HemCon, Inc.		Occupation Executive
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 600.00	Transaction ID: SA11AI.4403 Amount of Each Receipt this Period <input type="text"/> 25.00 Payroll Deduct-\$25 Bi-Weekly

<b>C.</b>	Full Name (Last, First, Middle Initial) Michael Radovan		Date of Receipt
	Mailing Address 10575 SW Cascade Ave. Ste. 130		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 2 / 1 4 / 2 0 0 7
	City	State	Zip Code
	Tigard	OR	97223
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
	Name of Employer HemCon, Inc.		Occupation Executive
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 625.00	Transaction ID: SA11AI.4405 Amount of Each Receipt this Period <input type="text"/> 25.00 Payroll Deduct-\$25 Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 75.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 10 / 15	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
HEMCON INC POLITICAL ACTION COMMITTEE AKA HEMCON PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Michael Radovan		Date of Receipt		
	Mailing Address 10575 SW Cascade Ave. Ste. 130		M M / D D / Y Y Y Y 1 2 / 2 8 / 2 0 0 7		
	City Tigard	State OR	Zip Code 97223	<b>Transaction ID:</b> SA11AI.4406	
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00		
	Name of Employer HemCon, Inc.	Occupation Executive	Payroll Deduct-\$25 Bi-Weekly		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	25.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	325.00

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
HEMCON INC POLITICAL ACTION COMMITTEE AKA HEMCON PAC

A.	Full Name (Last, First, Middle Initial) Silicon Valley Bank	Transaction ID: SB21B.4383 Date of Disbursement
	Mailing Address 8705 SW Nimbus Suite 240	<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2007"/>
	City Tigard State OR Zip Code 97008	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Fee	<input type="text" value="25.00"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Silicon Valley Bank	Transaction ID: SB21B.4394 Date of Disbursement
	Mailing Address 8705 SW Nimbus Suite 240	<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2007"/>
	City Tigard State OR Zip Code 97008	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Fee	<input type="text" value="25.00"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Silicon Valley Bank	Transaction ID: SB21B.4404 Date of Disbursement
	Mailing Address 8705 SW Nimbus Suite 240	<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2007"/>
	City Tigard State OR Zip Code 97008	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Fee	<input type="text" value="25.00"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="75.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

HEMCON INC POLITICAL ACTION COMMITTEE AKA HEMCON PAC

A.

Full Name (Last, First, Middle Initial)

Silicon Valley Bank

Mailing Address 8705 SW Nimbus  
Suite 240

City State Zip Code  
Tigard OR 97008

Purpose of Disbursement  
Bank Fee

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.4407

Date of Disbursement

1 2 / 3 1 / 2 0 0 7

Amount of Each Disbursement this Period

25.00

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

25.00

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

100.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
HEMCON INC POLITICAL ACTION COMMITTEE AKA HEMCON PAC

A.	Full Name (Last, First, Middle Initial) BRIAN BAIRD FOR CONGRESS	Transaction ID: SB23.4378
	Mailing Address PO Box 5016	Date of Disbursement 09 / 05 / 2007
	City Vancouver State WA Zip Code 98668	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name BRIAN N BAIRD	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) DAVE WU FOR US CONGRESS	Transaction ID: SB23.4398
	Mailing Address 818 SW Third Ave. #1182	Date of Disbursement 11 / 27 / 2007
	City Portland State OR Zip Code 97204	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name DAVID MR. WU	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 01	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FRIENDS OF GORDON SMITH	Transaction ID: SB23.4387
	Mailing Address 228 S WASHINGTON STE 115	Date of Disbursement 10 / 05 / 2007
	City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 400.00
	Purpose of Disbursement Contribution Candidate Name GORDON HAROLD SMITH	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2400.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
HEMCON INC POLITICAL ACTION COMMITTEE AKA HEMCON PAC

A.	Full Name (Last, First, Middle Initial) FRIENDS OF GORDON SMITH	Transaction ID: SB23.4388 Date of Disbursement 10 / 05 / 2007
	Mailing Address 228 S WASHINGTON STE 115	Amount of Each Disbursement this Period 600.00
	City ALEXANDRIA State VA Zip Code 22314	
	Purpose of Disbursement Contribution Candidate Name GORDON HAROLD SMITH	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) HOOLEY FOR CONGRESS	Transaction ID: SB23.4377 Date of Disbursement 09 / 05 / 2007
	Mailing Address PO BOX 2050	Amount of Each Disbursement this Period 1000.00
	City SALEM State OR Zip Code 97308	
	Purpose of Disbursement Contribution Candidate Name DARLENE HOOLEY	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 05	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) RUDY GIULIANI PRESIDENTIAL COMMITTEE INC	Transaction ID: SB23.4395 Date of Disbursement 11 / 02 / 2007
	Mailing Address C/O JOHN GROSS PROSKAUER ROSE LLP 1585 BROADWAY	Amount of Each Disbursement this Period 1000.00
	City NEW YORK State NY Zip Code 10036	
	Purpose of Disbursement Contribution Candidate Name RUDOLPH W. GIULIANI	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

2600.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
HEMCON INC POLITICAL ACTION COMMITTEE AKA HEMCON PAC

A.	Full Name (Last, First, Middle Initial) WYDEN FOR OREGON	Transaction ID: SB23.4385 Date of Disbursement 09 / 21 / 2007
	Mailing Address 2911 NE HANCOCK STREET	Amount of Each Disbursement this Period 2000.00
	City PORTLAND State OR Zip Code 97212	
	Purpose of Disbursement Joint Cmte Contrib-See Memo Candidate Name	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) WYDEN FOR SENATE	Transaction ID: SB23.4385.0 Date of Disbursement 09 / 21 / 2007
	Mailing Address 232 NE 9TH AVENUE	Amount of Each Disbursement this Period 2000.00
	City PORTLAND State OR Zip Code 97232	
	Purpose of Disbursement Contribution Candidate Name RONALD LEE WYDEN	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

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

2000.00

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

7000.00