

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

WYDEN FOR OREGON

ADDRESS (number and street)

PO BOX 3271

Check if different  
than previously  
reported. (ACC)

PORTLAND

OR

97208

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00436998

3. IS THIS  
REPORTNEW  
(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  
Year-End Report (YE)July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y Y Y

in the  
State of(d) 30-Day  
POST-Election  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M /

D D /

Y Y Y Y Y Y

07

01

2025

through

M M /

D D /

Y Y Y Y Y Y

12

31

2025

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

Michels, Stephen, , ,

Signature of Treasurer

Michels, Stephen, , ,

Date

M M /

D D /

Y Y Y Y Y Y

01

29

2026

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

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

WYDEN FOR OREGON

Report Covering the Period: From: MM / DD / YYYY 07 / 01 / 2025 To: MM / DD / YYYY 12 / 31 / 2025

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2025		17532.76
(b) Cash on Hand at Beginning of Reporting Period.....	27760.99	
(c) Total Receipts (from Line 19) .....	185609.50	271749.61
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	213370.49	289282.37
7. Total Disbursements (from Line 31) .....	182713.96	258625.84
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	30656.53	30656.53
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 the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov)

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

**WYDEN FOR OREGON**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	2	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	2	5

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).....	114600.00	159408.11
(ii) Unitemized .....	682.50	3514.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	115282.50	162922.61
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	70325.00	108825.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	185607.50	271747.61
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).....	2.00	2.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	185609.50	271749.61
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	185609.50	271749.61

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	14213.96	29125.84
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	14213.96	29125.84
22. Transfers to Affiliated/Other Party Committees.....	168500.00	229500.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	182713.96	258625.84
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	182713.96	258625.84

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	185607.50	271747.61
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	185607.50	271747.61
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	14213.96	29125.84
37. Offsets to Operating Expenditures (from Line 15, page 3).....	2.00	2.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	14211.96	29123.84

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 6 OF 70  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. Adams, John, , ,**

Mailing Address 2931 Mallard Lane

City  
GermantownState  
TNZip Code  
38138FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
The Conrad Pearson ClinicOccupation (for Individual)  
Urologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 30 / 2025

Transaction ID : SA11AI.6790

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**B. Bhowmilk, Rachann, , ,**

Mailing Address 3832 Gramercy St. NW

City  
WashingtonState  
DCZip Code  
20016FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 21 / 2025

Transaction ID : SA11AI.6871

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Contribution earmarked through ActBlue

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

**C. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

55637.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 21 / 2025

Transaction ID : SA11AI.6871.0

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

2000.00

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

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

FOR LINE NUMBER: PAGE 7 OF 70  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. Bishop, Floyd, , ,**

Mailing Address 8660 Copper Creek Drive

City  
Newburgh

State  
IN

Zip Code  
47630

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Paducah & Louisville Railway

Occupation (for Individual)  
SVP & Chief Operating Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 10 / 07 / 2025

Transaction ID : SA11AI.6845

Amount of Each Receipt this Period

375.00

☐ Memo Item

Contribution earmarked through ActBlue

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

**B. ActBlue**

Mailing Address PO Box 441146

City  
Somerville

State  
MA

Zip Code  
02144

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

41887.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 10 / 07 / 2025

Transaction ID : SA11AI.6845.0

Amount of Each Receipt this Period

375.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

**C. Bishop, Shawn, , ,**

Mailing Address 5706 Quebec Street

City  
Berwyn Heights

State  
MD

Zip Code  
20740

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Akin Gump

Occupation (for Individual)  
Health Policy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 12 / 16 / 2025

Transaction ID : SA11AI.6936

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Contribution earmarked through ActBlue

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1875.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 OF 70  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

### A. ActBlue

Mailing Address PO Box 441146

City  
Somerville

State  
MA

Zip Code  
02144

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

78222.00

Date of Receipt

12 / 16 / 2025

Transaction ID : SA11AI.6936.0

Amount of Each Receipt this Period

1500.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

### B. Broe, Pat, , ,

Mailing Address 252 Clayton Street

City  
Denver

State  
CO

Zip Code  
80206

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

The Broe Group

Founder, Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

12 / 17 / 2025

Transaction ID : SA11AI.6921

Amount of Each Receipt this Period

600.00

☐ Memo Item

Contribution earmarked through ActBlue

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

### C. ActBlue

Mailing Address PO Box 441146

City  
Somerville

State  
MA

Zip Code  
02144

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

79322.00

Date of Receipt

12 / 17 / 2025

Transaction ID : SA11AI.6921.0

Amount of Each Receipt this Period

600.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

SUBTOTAL of Receipts This Page (optional)..... ►

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

600.00



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 OF 70  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. Broe, Pat, , ,**

Mailing Address 252 Clayton Street

City  
Denver

State  
CO

Zip Code  
80206

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

The Broe Group

Occupation (for Individual)

Founder, Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

12 / 17 / 2025

Transaction ID : SA11AI.6923

Amount of Each Receipt this Period

400.00

☐ Memo Item

Contribution earmarked through ActBlue

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

**B. ActBlue**

Mailing Address PO Box 441146

City  
Somerville

State  
MA

Zip Code  
02144

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

79722.00

Date of Receipt

12 / 17 / 2025

Transaction ID : SA11AI.6923.0

Amount of Each Receipt this Period

400.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

**C. Buscher, John, , ,**

Mailing Address 1100 Russell Road

City  
Alexandria

State  
VA

Zip Code  
22301

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

JGB & Associates

Occupation (for Individual)

Public Policy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

12 / 29 / 2025

Transaction ID : SA11AI.6769

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Contribution earmarked through ActBlue

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1400.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 10 OF 70  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

82734.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 29 / 2025

Transaction ID : SA11AI.6769.0

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

**B. Campbell, Jack, , ,**

Mailing Address 3950 E Bridgewater Lane

City  
FayettevilleState  
ARZip Code  
72703FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Capitol Counsel

Occupation (for Individual)

Attorney/Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 29 / 2025

Transaction ID : SA11AI.6772

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Contribution earmarked through ActBlue

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

**C. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

83734.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 29 / 2025

Transaction ID : SA11AI.6772.0

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

1000.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 OF 70  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. Carasso, Adam, , ,**

Mailing Address 1821 Belmont Road NW

City  
Washington

State  
DC

Zip Code  
20009

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Capitol Counsel

Occupation (for Individual)  
Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

10 / 17 / 2025

Transaction ID : SA11AI.6912

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Contribution earmarked through ActBlue

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

**B. ActBlue**

Mailing Address PO Box 441146

City  
Somerville

State  
MA

Zip Code  
02144

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

47137.00

Date of Receipt

10 / 17 / 2025

Transaction ID : SA11AI.6912.0

Amount of Each Receipt this Period

2000.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

**C. Colovas, Stephen, , ,**

Mailing Address 1530 Key Blvd.

City  
Arlington

State  
VA

Zip Code  
22209

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CSI

Occupation (for Individual)  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

11 / 19 / 2025

Transaction ID : SA11AI.6892

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Contribution earmarked through ActBlue

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

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

3000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 12 OF 70  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

67147.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 19 / 2025

Transaction ID : SA11AI.6892.0

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

**B. Crum, Jim, , ,**

Mailing Address 37 Decatur Avenue

City  
AnnapolisState  
MDZip Code  
21403FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Van Scoyoc Associates

Occupation (for Individual)

Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 24 / 2025

Transaction ID : SA11AI.6859

Amount of Each Receipt this Period

500.00

☐ Memo Item

Contribution earmarked through ActBlue

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

**C. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

66147.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 24 / 2025

Transaction ID : SA11AI.6859.0

Amount of Each Receipt this Period

500.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

500.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 OF 70  
(check only one)

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

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

NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. Dedrick, Mark, , ,**

Mailing Address 528 Tennessee Avenue NE

City  
Washington

State  
DC

Zip Code  
20002

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Summit Strategies LLC

Occupation (for Individual)  
Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 30 / 2025

Transaction ID : SA11AI.6701

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Contribution earmarked through ActBlue

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

**B. ActBlue**

Mailing Address PO Box 441146

City  
Somerville

State  
MA

Zip Code  
02144

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

41512.00

Date of Receipt

09 / 30 / 2025

Transaction ID : SA11AI.6701.0

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

**C. Dinino, Paul, , ,**

Mailing Address 9216 LeVelle Drive

City  
Chevy Chase

State  
MD

Zip Code  
20815

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DiNino Associates, LLC

Occupation (for Individual)  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

12 / 31 / 2025

Transaction ID : SA11AI.6761

Amount of Each Receipt this Period

500.00

☐ Memo Item

Contribution earmarked through ActBlue

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1500.00

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

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

FOR LINE NUMBER: PAGE 14 OF 70  
 (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)

**WYDEN FOR OREGON**

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

## **A. ActBlue**

Mailing Address PO Box 441146

City  
Somerville

State  
MA

Zip Code  
02144

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

106234.50

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 / 31 / 2025

**Transaction ID : SA11Al.6761.0**

Amount of Each Receipt this Period

500.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

## **B. Furman, Jane, , ,**

Mailing Address 2473 SW Military Road

City  
Portland

State  
OR

Zip Code  
97219

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Not Employed

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 / 17 / 2025

**Transaction ID : SA11Al.6818**

Amount of Each Receipt this Period

10000.00

☐ Memo Item

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

## **C. Furman, William, , ,**

Mailing Address 2473 SW Military Road

City  
Portland

State  
OR

Zip Code  
97219

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Greenbrier Companies

President and CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 / 17 / 2025

**Transaction ID : SA11Al.6816**

Amount of Each Receipt this Period

10000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

20000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 15 OF 70  
(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)

**WYDEN FOR OREGON**

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

**A. Giovaniello, Jerry, , ,**

Mailing Address 108 Gresham Place

City  
Falls ChurchState  
VAZip Code  
22046FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 10 / 2025

Transaction ID : SA11AI.6842

Amount of Each Receipt this Period

750.00

☐ Memo Item

Contribution earmarked through ActBlue

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

**B. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

42637.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 10 / 2025

Transaction ID : SA11AI.6842.0

Amount of Each Receipt this Period

750.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

**C. Gore, Abigail, , ,**

Mailing Address 1831 Westberry Court

City  
West LinnState  
ORZip Code  
97068FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
Holland & Knight LLPOccupation (for Individual)  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 29 / 2025

Transaction ID : SA11AI.6704

Amount of Each Receipt this Period

500.00

☐ Memo Item

Contribution earmarked through ActBlue

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

1250.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 16 OF 70  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

37487.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 29 / 2025

Transaction ID : SA11AI.6704.0

Amount of Each Receipt this Period

500.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

**B. Graefe, Frederick, , ,**

Mailing Address 319 Constitution Avenue NE

City  
WashingtonState  
DCZip Code  
20002FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Law Offices of Frederick Graef

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 29 / 2025

Transaction ID : SA11AI.6713

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Contribution earmarked through ActBlue

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

**C. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

39012.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 29 / 2025

Transaction ID : SA11AI.6713.0

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

1000.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 17 OF 70  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. Graefe, Frederick, , ,**

Mailing Address 319 Constitution Avenue NE

City  
WashingtonState  
DCZip Code  
20002FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Law Offices of Frederick GraefOccupation (for Individual)  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 24 / 2025

Transaction ID : SA11AI.6895

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Contribution earmarked through ActBlue

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

**B. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

68147.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 24 / 2025

Transaction ID : SA11AI.6895.0

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

**C. Graf, Alexander, , ,**

Mailing Address 100 Hodges Lane

City  
Takoma ParkState  
MDZip Code  
20912FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Alston & BirdOccupation (for Individual)  
Senior Policy Advisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 01 / 2025

Transaction ID : SA11AI.6805

Amount of Each Receipt this Period

500.00

☐ Memo Item

Contribution earmarked through ActBlue

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

1500.00

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

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

FOR LINE NUMBER: PAGE 18 OF 70  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

## **A. ActBlue**

Mailing Address PO Box 441146

City  
Somerville

State  
MA

Zip Code  
02144

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

68647.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 / 01 / 2025

**Transaction ID : SA11AI.6805.0**

Amount of Each Receipt this Period

500.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

## **B. Green, James, , ,**

Mailing Address 408 New Jersey Avenue SE

City  
Washington

State  
DC

Zip Code  
20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Mercury Strategies, LLC

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 / 03 / 2025

**Transaction ID : SA11AI.6797**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Contribution earmarked through ActBlue

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

## **C. ActBlue**

Mailing Address PO Box 441146

City  
Somerville

State  
MA

Zip Code  
02144

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

69647.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 / 03 / 2025

**Transaction ID : SA11AI.6797.0**

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 19 OF 70  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. Grunberg, Carole, , ,**Mailing Address 2415 20th Street NW  
Apt. 10City  
WashingtonState  
DCZip Code  
20009FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NoneOccupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 18 / 2025

Transaction ID : SA11AI.6808

Amount of Each Receipt this Period

3000.00

☐ Memo Item

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

**B. Hall, Jerry, , ,**

Mailing Address 1605 Windy Ridge Drive

City  
BrentwoodState  
TNZip Code  
37027FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Patriot RailOccupation (for Individual)  
COO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 18 / 2025

Transaction ID : SA11AI.6719

Amount of Each Receipt this Period

725.00

☐ Memo Item

Contribution earmarked through ActBlue

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

**C. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

36487.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 18 / 2025

Transaction ID : SA11AI.6719.0

Amount of Each Receipt this Period

725.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

3725.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 OF 70  
(check only one)

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

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

NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. Head, Martha, , ,**

Mailing Address 1616 West 22nd Street

City  
Minneapolis

State  
MN

Zip Code  
55405

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
09 / 22 / 2025

Transaction ID : SA11AI.6716

Amount of Each Receipt this Period

500.00

☐ Memo Item

Contribution earmarked through ActBlue

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

**B. ActBlue**

Mailing Address PO Box 441146

City  
Somerville

State  
MA

Zip Code  
02144

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

36987.00

Date of Receipt

MM / DD / YYYY  
09 / 22 / 2025

Transaction ID : SA11AI.6716.0

Amount of Each Receipt this Period

500.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

**C. Hirsh, Bruce, , ,**

Mailing Address 2849 McGill Terrace NW

City  
Washington

State  
DC

Zip Code  
20008

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self

Occupation (for Individual)  
Trade Policy Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY  
10 / 20 / 2025

Transaction ID : SA11AI.6879

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Contribution earmarked through ActBlue

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

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

1500.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 21 OF 70  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

52137.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2025

Transaction ID : SA11AI.6879.0

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

**B. Howley, Lisa, , ,**

Mailing Address 4052 NE 8th Avenue

City  
PortlandState  
ORZip Code  
97212FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Holland &amp; Knight LLP

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2025

Transaction ID : SA11AI.6698

Amount of Each Receipt this Period

500.00

☐ Memo Item

Contribution earmarked through ActBlue

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

**C. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

40512.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2025

Transaction ID : SA11AI.6698.0

Amount of Each Receipt this Period

500.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

500.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 OF 70  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. Jackson, Carlos, , ,**

Mailing Address 1762 Redwood Terrace NW

City  
Washington

State  
DC

Zip Code  
20012

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Cornerstone Government Affairs

Occupation (for Individual)  
Government Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

12 / 15 / 2025

Transaction ID : SA11AI.6939

Amount of Each Receipt this Period

500.00

☐ Memo Item

Contribution earmarked through ActBlue

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

**B. ActBlue**

Mailing Address PO Box 441146

City  
Somerville

State  
MA

Zip Code  
02144

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75222.00

Date of Receipt

12 / 15 / 2025

Transaction ID : SA11AI.6939.0

Amount of Each Receipt this Period

500.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

**C. James, Claudia, , ,**

Mailing Address 3167 19th St N

City  
Arlington

State  
VA

Zip Code  
22201

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Cogent Strategies

Occupation (for Individual)  
Managing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

12 / 19 / 2025

Transaction ID : SA11AI.6811

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1500.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 23 OF 70  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. Jones, David, , ,**

Mailing Address 700 13th Street NW

City  
WshingtonState  
DCZip Code  
20005FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Capitol CounselOccupation (for Individual)  
Founding Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2025

Transaction ID : SA11AI.6886

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Contribution earmarked through ActBlue

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

**B. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

53137.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2025

Transaction ID : SA11AI.6886.0

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

**C. Kardon, Joshua, , ,**

Mailing Address 38643 SE 70th Street

City  
WashougalState  
WAZip Code  
98671FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Three Arch StrategiesOccupation (for Individual)  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 24 / 2025

Transaction ID : SA11AI.6861

Amount of Each Receipt this Period

7000.00

☐ Memo Item

Contribution earmarked through ActBlue

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

8000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 24 OF 70  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

65647.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 24 / 2025

Transaction ID : SA11AI.6861.0

Amount of Each Receipt this Period

7000.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

**B. Katz, Emily, , ,**

Mailing Address 6412 Dahlonge Road

City  
BethesdaState  
MDZip Code  
20816FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Van Scoyoc Associates

Occupation (for Individual)

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 21 / 2025

Transaction ID : SA11AI.6873

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Contribution Earmarked through ActBlue

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

**C. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

57137.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 21 / 2025

Transaction ID : SA11AI.6873.0

Amount of Each Receipt this Period

1500.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

1500.00



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

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

FOR LINE NUMBER: PAGE 25 OF 70  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. King, Ed, , ,**

Mailing Address 30414 LeBleu Road

City  
Eugene

State  
OR

Zip Code  
97405

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

King Estate Winery

Occupation (for Individual)

Vintner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

12 / 31 / 2025

Transaction ID : SA11AI.6752

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Contribution earmarked through ActBlue

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

**B. ActBlue**

Mailing Address PO Box 441146

City  
Somerville

State  
MA

Zip Code  
02144

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

95234.50

Date of Receipt

12 / 31 / 2025

Transaction ID : SA11AI.6752.0

Amount of Each Receipt this Period

10000.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

**C. King, Jodee, , ,**

Mailing Address 30414 LeBleu Road

City  
Eugene

State  
OR

Zip Code  
97405

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

12 / 31 / 2025

Transaction ID : SA11AI.6754

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Contribution earmarked through ActBlue

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

20000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 26 OF 70  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

105234.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2025

Transaction ID : SA11AI.6754.0

Amount of Each Receipt this Period

10000.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

**B. L'Esperance, Nicole, , ,**

Mailing Address 1010 Massachusetts Avenue N

City  
WashingtonState  
DCZip Code  
20001FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Bristol Myers Squibb

Occupation (for Individual)

Director, Federal Government Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 04 / 2025

Transaction ID : SA11AI.6794

Amount of Each Receipt this Period

250.00

☐ Memo Item

Contribution earmarked through ActBlue

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

**C. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

73397.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 04 / 2025

Transaction ID : SA11AI.6794.0

Amount of Each Receipt this Period

250.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

250.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 27 OF 70  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. Laing, Sally, , ,**

Mailing Address 3732 N Nelson Street

City  
ArlingtonState  
VAZip Code  
22207FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Akin Gump

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2025

Transaction ID : SA11AI.6888

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Contribution earmarked through ActBlue

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

**B. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

54137.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2025

Transaction ID : SA11AI.6888.0

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

**C. Lieberman, Bruce, , ,**Mailing Address 555 5th Avenue  
Suite 1700City  
New YorkState  
NYZip Code  
10017FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Anacostia and Pacific Co. Inc.

Occupation (for Individual)

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2025

Transaction ID : SA11AI.6849

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1250.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 OF 70  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. Matthias-Bennetch, Paul, , ,**

Mailing Address 22655 Crown Court

City  
West Linn

State  
OR

Zip Code  
97068

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Holland & Knight LLP

Occupation (for Individual)  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 30 / 2025

Transaction ID : SA11AI.6695

Amount of Each Receipt this Period

500.00

☐ Memo Item

Contribution earmarked through ActBlue

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

**B. ActBlue**

Mailing Address PO Box 441146

City  
Somerville

State  
MA

Zip Code  
02144

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

40012.00

Date of Receipt

09 / 30 / 2025

Transaction ID : SA11AI.6695.0

Amount of Each Receipt this Period

500.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

**C. Merrigan, John, , ,**

Mailing Address 7839 Old Dominion Drive

City  
McLean

State  
VA

Zip Code  
22102

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Mayer Brown

Occupation (for Individual)  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

10 / 17 / 2025

Transaction ID : SA11AI.6913

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Contribution earmarked through ActBlue

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

3500.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 29 OF 70  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50137.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2025**Transaction ID : SA11AI.6913.0**

Amount of Each Receipt this Period

3000.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

**B. Nicholson, Ian, , ,**

Mailing Address 6809 Deer Gap Court

City  
AlexandriaState  
VAZip Code  
22310FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

eBay

Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 21 / 2025**Transaction ID : SA11AI.6865**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Contribution earmarked through ActBlue

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

**C. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

54637.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 21 / 2025**Transaction ID : SA11AI.6865.0**

Amount of Each Receipt this Period

500.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

500.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 30 OF 70  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. OBrien, Daniel, , ,**

Mailing Address 3135 North Thomas Street

City  
ArlingtonState  
VAZip Code  
22207FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Hanwha QcellsOccupation (for Individual)  
Corporate Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 03 / 2025

Transaction ID : SA11AI.6799

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Contribution earmarked through ActBlue

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

**B. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

70647.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 03 / 2025

Transaction ID : SA11AI.6799.0

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

**C. Pagano, Ed, , ,**

Mailing Address 5841 Nebraska Avenue NW

City  
WashingtonState  
DCZip Code  
20015FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Akin GumpOccupation (for Individual)  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 16 / 2025

Transaction ID : SA11AI.6930

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Contribution earmarked through ActBlue

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

2000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 31 OF 70  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

76722.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 16 / 2025**Transaction ID : SA11AI.6930.0**

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

**B. Paul, Matthew, , ,**

Mailing Address 2912 Caulder Avenue

City  
Des MoinesState  
IAZip Code  
50321FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

CGA Group

Public Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2025**Transaction ID : SA11AI.6758**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Contribution earmarked through ActBlue

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

**C. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

105734.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2025**Transaction ID : SA11AI.6758.0**

Amount of Each Receipt this Period

500.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

500.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 32 OF 70  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. Pittleman, Ethan, , ,**

Mailing Address

City  
WashingtonState  
DCZip Code  
20008FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Capitol CounselOccupation (for Individual)  
Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 29 / 2025

Transaction ID : SA11AI.6775

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Contribution earmarked through ActBlue

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

**B. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

84734.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 29 / 2025

Transaction ID : SA11AI.6775.0

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

**C. Pomper, Brian, , ,**

Mailing Address 729 Lawton Street

City  
McLeanState  
VAZip Code  
22101FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Akin GumpOccupation (for Individual)  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2025

Transaction ID : SA11AI.6910

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Contribution earmarked through ActBlue

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

2000.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 33 OF 70  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

51137.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2025

Transaction ID : SA11AI.6910.0

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

**B. Raffaelli, John, , ,**Mailing Address 225 Strand Street  
Unit 501City  
AlexandriaState  
VAZip Code  
22314FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Capitol CounselOccupation (for Individual)  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 03 / 2025

Transaction ID : SA11AI.6801

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Contribution earmarked through ActBlue

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

**C. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

73147.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 03 / 2025

Transaction ID : SA11AI.6801.0

Amount of Each Receipt this Period

2500.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

2500.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 34 OF 70  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. Schnitzer Properties LLC**

Mailing Address PO Box 2708

City  
PortlandState  
ORZip Code  
97208FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2025

Transaction ID : SA11AI.6828

Amount of Each Receipt this Period

12000.00

☐ Memo ItemVerified federally permissible source; see partnership  
attribution below

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

**B. Schnitzer, Jordan, , ,**Mailing Address 1121 SW Salmon Street  
Suite 500City  
PortlandState  
ORZip Code  
97205FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Harsch Investment PropertiesOccupation (for Individual)  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2025

Transaction ID : SA11AI.6828.0

Amount of Each Receipt this Period

12000.00

☒ Memo Item

Partnership attribution

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

**C. Scofield, John, , ,**

Mailing Address 4471 Greenwich Parkway NW

City  
WashingtonState  
DCZip Code  
20007FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
S-3 GroupOccupation (for Individual)  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 16 / 2025

Transaction ID : SA11AI.6723

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Contribution earmarked through ActBlue

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

15500.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 35 OF 70  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35762.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 16 / 2025

Transaction ID : SA11AI.6723.0

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

**B. Shoched, Dana, , ,**

Mailing Address 10445 Jackman Road

City  
TermperanceState  
MIZip Code  
48182FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

o2Vape

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 11 / 2025

Transaction ID : SA11AI.6839

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Contribution earmarked through ActBlue

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

**C. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

45137.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 11 / 2025

Transaction ID : SA11AI.6839.0

Amount of Each Receipt this Period

2500.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

2500.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 36 OF 70  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. Sternhell, Alexander, , ,**

Mailing Address 27 Primrose Street

City  
Chevy ChaseState  
MDZip Code  
20815FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Sternhell GroupOccupation (for Individual)  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 29 / 2025

Transaction ID : SA11AI.6766

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Contribution earmarked through ActBlue

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

**B. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

81734.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 29 / 2025

Transaction ID : SA11AI.6766.0

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

**C. Stoll, Jennifer, , ,**

Mailing Address 3108 NW Luray Terrace

City  
PortlandState  
ORZip Code  
97210FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
OCHINOccupation (for Individual)  
Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 30 / 2025

Transaction ID : SA11AI.6692

Amount of Each Receipt this Period

500.00

☐ Memo Item

Contribution earmarked through actblue

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

1500.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 OF 70  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

### A. ActBlue

Mailing Address PO Box 441146

City  
Somerville

State  
MA

Zip Code  
02144

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

39512.00

Date of Receipt

MM / DD / YYYY  
09 / 30 / 2025

Transaction ID : SA11AI.6692.0

Amount of Each Receipt this Period

500.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

### B. Storhaug, Ronald, , ,

Mailing Address 201 E Street SE  
Apt 3

City  
Washington

State  
DC

Zip Code  
20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Cornerstone Government Affairs

Occupation (for Individual)  
Principal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY  
12 / 17 / 2025

Transaction ID : SA11AI.6927

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Contribution earmarked through ActBlue

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

### C. ActBlue

Mailing Address PO Box 441146

City  
Somerville

State  
MA

Zip Code  
02144

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

80722.00

Date of Receipt

MM / DD / YYYY  
12 / 17 / 2025

Transaction ID : SA11AI.6927.0

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Contribution earmarked through ActBlue

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

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

1000.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 OF 70  
(check only one)

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

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

NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. Tame, Jacqueline, , ,**

Mailing Address 6911 Elm Drive

City  
Alexandria

State  
VA

Zip Code  
22306

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Playground Global

Occupation (for Individual)  
Operating Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

12 / 16 / 2025

Transaction ID : SA11AI.6932

Amount of Each Receipt this Period

500.00

☐ Memo Item

Contribution earmarked though ActBlue

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

**B. ActBlue**

Mailing Address PO Box 441146

City  
Somerville

State  
MA

Zip Code  
02144

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75722.00

Date of Receipt

12 / 16 / 2025

Transaction ID : SA11AI.6932.0

Amount of Each Receipt this Period

500.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

**C. Taylor, Courtney, , ,**

Mailing Address 3334 Stephenson Place NW

City  
Washington

State  
DC

Zip Code  
20015

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Clover Strategies

Occupation (for Individual)  
Founder

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

12 / 30 / 2025

Transaction ID : SA11AI.6763

Amount of Each Receipt this Period

500.00

☐ Memo Item

Contribution earmarked through ActBlue

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 39 OF 70  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

85234.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 30 / 2025

Transaction ID : SA11AI.6763.0

Amount of Each Receipt this Period

500.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

**B. Teitelbaum, Joshua, , ,**

Mailing Address 3920 Ingomar Street NW

City  
WashingtonState  
DCZip Code  
20015FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Akin Gump

Lawyer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 17 / 2025

Transaction ID : SA11AI.6919

Amount of Each Receipt this Period

500.00

☐ Memo Item

Contribution earmarked through ActBlue

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

**C. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

78722.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 17 / 2025

Transaction ID : SA11AI.6919.0

Amount of Each Receipt this Period

500.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

500.00

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

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

FOR LINE NUMBER: PAGE 40 OF 70  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. Towner, Stu, , ,**

Mailing Address 102 Briarhaven Road

City  
Carl Junction

State  
MO

Zip Code  
64834

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Jaguar Transport Holdings, LLC

Occupation (for Individual)  
Founder & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
09 / 29 / 2025

Transaction ID : SA11AI.6707

Amount of Each Receipt this Period

400.00

☐ Memo Item

Contribution earmarked through ActBlue

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

**B. ActBlue**

Mailing Address PO Box 441146

City  
Somerville

State  
MA

Zip Code  
02144

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

37887.00

Date of Receipt

MM / DD / YYYY  
09 / 29 / 2025

Transaction ID : SA11AI.6707.0

Amount of Each Receipt this Period

400.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

**C. Van Scoyoc, H. Stewart, , ,**

Mailing Address 131 Yarnick Road

City  
Great Falls

State  
VA

Zip Code  
22066

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Van Scoyoc Associates

Occupation (for Individual)  
Founder and CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY  
10 / 21 / 2025

Transaction ID : SA11AI.6877

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Contribution received through ActBlue

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1400.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 41 OF 70  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

58637.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 21 / 2025

Transaction ID : SA11AI.6877.0

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

**B. Webb, Richard, , ,**

Mailing Address 315 West 3rd

City  
PittsburgState  
KSZip Code  
66762FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Watco CompaniesOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 16 / 2025

Transaction ID : SA11AI.6854

Amount of Each Receipt this Period

1925.00

☐ Memo Item

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

**C. Webb, Stacey, , ,**

Mailing Address 215 West 3rd

City  
PittsburgState  
KSZip Code  
66762FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 16 / 2025

Transaction ID : SA11AI.6855

Amount of Each Receipt this Period

1925.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3850.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 42 OF 70

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

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. White, Jayme, , ,**

Mailing Address 61 Walnut Avenue

City  
Takoma ParkState  
MDZip Code  
20912FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Kelley Drye and Warren LLPOccupation (for Individual)  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 21 / 2025

Transaction ID : SA11AI.6876

Amount of Each Receipt this Period

500.00

☐ Memo Item

Contribution earmarked through ActBlue

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

**B. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

57637.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 21 / 2025

Transaction ID : SA11AI.6876.0

Amount of Each Receipt this Period

500.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

**C. Wiggins, Chani, , ,**Mailing Address 609 L Street NE  
Unit 2City  
WashingtonState  
DCZip Code  
20002FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Winn Strategies , LLCOccupation (for Individual)  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 09 / 2025

Transaction ID : SA11AI.6744

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Contribution earmarked through ActBlue

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

1500.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 OF 70  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

### A. ActBlue

Mailing Address PO Box 441146

City  
Somerville

State  
MA

Zip Code  
02144

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

74397.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 09 / 2025

Transaction ID : SA11AI.6744.0

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

### B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

### C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

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

0.00

114600.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 44 OF 70

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

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. ALLIANCE FOR RETIRED AMERICANS**

Mailing Address 815 16TH STREET NW 4TH FL - NORTH

City  
WASHINGTONState  
DCZip Code  
20006FEC ID number of contributing  
federal political committee.

C

C90017476

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 30 / 2025

Transaction ID : SA11C.6787

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

**B. ALSTON & BIRD PAC**Mailing Address THE ATLANTIC BUILDING  
950 F STREET, NWCity  
WASHINGTONState  
DCZip Code  
20004FEC ID number of contributing  
federal political committee.

C

C00395723

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 05 / 2025

Transaction ID : SA11C.6824

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**C. ALZHEIMERS IMPACT MOVEMENT POLITICAL ACTION COMMITTEE**

Mailing Address 225 N MICHIGAN AVE SUITE 1700

City  
CHICAGOState  
ILZip Code  
60601FEC ID number of contributing  
federal political committee.

C

C00486928

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 19 / 2025

Transaction ID : SA11C.6812

Amount of Each Receipt this Period

5000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

8500.00

**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 PageFOR LINE NUMBER: PAGE 45 OF 70  
(check only one)  

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

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. AMERICAN CRAFT SPIRITS ASSOCIATION PAC**

Mailing Address PO BOX 470

City  
OAKTONState  
VAZip Code  
22124FEC ID number of contributing  
federal political committee.

C

C00671479

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 15 / 2025

Transaction ID : SA11C.6726

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Contribution earmarked through ActBlue

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

**B. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

32262.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 15 / 2025

Transaction ID : SA11C.6726.0

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

**C. AMERICAN PORTABLE DIAGNOSTIC ASSOCIATION APDA-PAC**Mailing Address 1065 EXECUTIVE PKWY  
STE 220City  
ST LOUISState  
MOZip Code  
63141FEC ID number of contributing  
federal political committee.

C

C00347658

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 19 / 2025

Transaction ID : SA11C.6809

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

2000.00

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

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB  
.

Form/Schedule: SA11C  
Transaction ID : SA11C.6726

ActBlue Total earmarked through conduit; PAC limit not affected

Form/Schedule:  
Transaction ID:

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 47 OF 70  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON****A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
AMERICAN SHORT LINE AND REGIONAL RAILROAD ASSOCIATION - POLITICAL ACTION CMTE (ASLRRA-PAC)Mailing Address 50 F STREET NW  
SUITE 7020City  
WASHINGTONState  
DCZip Code  
20001FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 14 / 2025

Transaction ID : SA11C.6907

Amount of Each Receipt this Period

5000.00

☐ Memo Item**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
AMERICAN SHORT LINE AND REGIONAL RAILROAD ASSOCIATION - POLITICAL ACTION CMTE (ASLRRA-PAC)Mailing Address 50 F STREET NW  
SUITE 7020City  
WASHINGTONState  
DCZip Code  
20001FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 14 / 2025

Transaction ID : SA11C.6908

Amount of Each Receipt this Period

2550.00

☐ Memo Item**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
AMERICAN WOOD COUNCIL POLITICAL ACTION COMMITTEE (WOOD-PAC)Mailing Address 1101 K STREET NW  
SUITE 700City  
WASHINGTONState  
DCZip Code  
20005FEC ID number of contributing  
federal political committee.**C** C00602698

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 23 / 2025

Transaction ID : SA11C.6833

Amount of Each Receipt this Period

2500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10050.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 48 OF 70

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

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. ASSOCIATION FOR COMMUNITY AFFILIATED PLANS POLITICAL ACTION COMMITTEE**

Mailing Address 1155 15TH STREET NW, SUITE 600

City  
WASHINGTONState  
DCZip Code  
20005FEC ID number of contributing  
federal political committee.**C** C00831313

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 30 / 2025**Transaction ID : SA11C.6792**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**B. BEAM SUNTORY INC POLITICAL ACTION COMMITTEE**Mailing Address 1050 K STREET, NW  
SUITE 1040City  
WASHINGTONState  
DCZip Code  
20001FEC ID number of contributing  
federal political committee.**C** C00194126

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 10 / 2025**Transaction ID : SA11C.6826**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**C. COLLEGE OF AMERICAN PATHOLOGISTS POLITICAL ACTION COMMITTEE**Mailing Address 1001 G STREET NW  
SUITE 425 WESTCity  
WASHINGTONState  
DCZip Code  
20001FEC ID number of contributing  
federal political committee.**C** C00274944

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 02 / 2025**Transaction ID : SA11C.6837**

Amount of Each Receipt this Period

1000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 OF 70

(check only one)

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

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. COLLEGE OF AMERICAN PATHOLOGISTS POLITICAL ACTION COMMITTEE**Mailing Address 1001 G STREET NW  
SUITE 425 WESTCity  
WASHINGTONState  
DCZip Code  
20001FEC ID number of contributing  
federal political committee.**C**

C00274944

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 02 / 2025**Transaction ID : SA11C.6813**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**B. COLLEGE OF AMERICAN PATHOLOGISTS POLITICAL ACTION COMMITTEE**Mailing Address 1001 G STREET NW  
SUITE 425 WESTCity  
WASHINGTONState  
DCZip Code  
20001FEC ID number of contributing  
federal political committee.**C**

C00274944

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 30 / 2025**Transaction ID : SA11C.6832**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**C. DOMINION ENERGY, INC. POLITICAL ACTION COMMITTEE - DOMINION PAC**

Mailing Address 600 E. CANAL STREET, 8TH FLOOR

City  
RICHMONDState  
VAZip Code  
23219FEC ID number of contributing  
federal political committee.**C**

C00108209

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 19 / 2025**Transaction ID : SA11C.6900**

Amount of Each Receipt this Period

2500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

4500.00

**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 PageFOR LINE NUMBER: PAGE 50 OF 70  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. FLORIDA EAST COAST RAILWAY LLC PAC AKA FECR PAC**

Mailing Address 7150 PHILIPS HIGHWAY

City  
JACKSONVILLEState  
FLZip Code  
32256FEC ID number of contributing  
federal political committee.**C**

C00529966

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2025

**Transaction ID : SA11C.6851**

Amount of Each Receipt this Period

450.00

☐ Memo Item

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

**B. GLOBAL MEDICAL RESPONSE, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 6501 S FIDDLERS GREEN CIR STE 100

City

GREENWOOD VILLAGE

State

CO

Zip Code

80111

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

C00389585

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2025

**Transaction ID : SA11C.6904**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

**C. HOOPER, LUNDY, & BOOKMAN PC POLITICAL ACTION COMMITTEE**Mailing Address 401 9TH STREET, NW, SUITE 550  
SUITE 550

City

WASHINGTON

State

DC

Zip Code

90067

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

C00548404

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		30		2025

**Transaction ID : SA11C.6965**

Amount of Each Receipt this Period

2500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

5450.00

**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 PageFOR LINE NUMBER: PAGE 51 OF 70  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. INSPIRE BRANDS INC. POLITICAL ACTION COMMITTEE**

Mailing Address THREE GLENLAKE PARKWAY NE 14TH FL

City  
ATLANTAState  
GAZip Code  
30328FEC ID number of contributing  
federal political committee.**C**

C00492157

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 30 / 2025**Transaction ID : SA11C.6785**

Amount of Each Receipt this Period

2500.00

☐

Memo Item

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

**B. INSURED RETIREMENT INSTITUTE POLITICAL ACTION COMMITTEE (IRI PAC)**Mailing Address 1717 K ST, NW  
SUITE 900

City

WASHINGTON

State  
DCZip Code  
20006FEC ID number of contributing  
federal political committee.**C**

C00490474

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 25 / 2025**Transaction ID : SA11C.6683**

Amount of Each Receipt this Period

2500.00

☐

Memo Item

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

**C. INVENERGY LLC PAC**Mailing Address ONE SOUTH WACKER DRIVE  
SUITE 1800

City

CHICAGO

State  
ILZip Code  
60606FEC ID number of contributing  
federal political committee.**C**

C00437244

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 11 / 2025**Transaction ID : SA11C.6906**

Amount of Each Receipt this Period

1000.00

☐

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

6000.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 52 OF 70

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

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. JOHN HANCOCK LIFE INSURANCE COMPANY (USA) FEDERAL POLITICAL ACTION COMMITTEE**Mailing Address 197 CLARENDON STREET  
FLOOR 5City  
BOSTONState  
MAZip Code  
02116FEC ID number of contributing  
federal political committee.**C**

C00137265

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 18 / 2025

Transaction ID : SA11C.6679

Amount of Each Receipt this Period

1000.00

☐

Memo Item

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

**B. LINCOLN NATIONAL CORPORATION POLITICAL ACTION COMMITTEE (AKA LINCOLN FINANCIAL FEDERAL POL**

Mailing Address 150 N RADNOR CHESTER RD STE A305

City

RADNOR

State

PA

Zip Code

19087

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

C00110577

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 30 / 2025

Transaction ID : SA11C.6687

Amount of Each Receipt this Period

2500.00

☐

Memo Item

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

**C. MCGUIREWOODS FEDERAL PAC**Mailing Address GATEWAY PLAZA  
800 EAST CANAL STREET

City

RICHMOND

State

VA

Zip Code

23219

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

C00225342

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 12 / 2025

Transaction ID : SA11C.6848

Amount of Each Receipt this Period

5000.00

☐

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

8500.00

**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 53 OF 70

(check only one)

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

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. NATIONAL GROCERS ASSOCIATION GROCERS POLITICAL ACTION COMMITTEE**Mailing Address 601 PENNSYLVANIA AVE NW  
SUITE 375NCity  
WASHINGTON DCState  
DCZip Code  
20004FEC ID number of contributing  
federal political committee.**C** C00508770

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 06 / 2025**Transaction ID : SA11C.6822**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

**B. RAIL MOVES AMERICA PAC, INC.**

Mailing Address P.O. BOX 25

City  
NICHOLASVILLEState  
KYZip Code  
40340FEC ID number of contributing  
federal political committee.**C** C00884908

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 15 / 2025**Transaction ID : SA11C.6852**

Amount of Each Receipt this Period

825.00

☐ Memo Item

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

**C. S. C. JOHNSON & SON, INC POLITICAL ACTION COMMITTEE**

Mailing Address 1525 HOWE STREET

City  
RACINEState  
WIZip Code  
53403FEC ID number of contributing  
federal political committee.**C** C00342246

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 30 / 2025**Transaction ID : SA11C.6789**

Amount of Each Receipt this Period

2000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5325.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 54 OF 70  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. SAMMONS ENTERPRISES INC. POLITICAL ACTION COMMITTEE**Mailing Address 5949 SHERRY LANE  
SUITE 1900City  
DALLASState  
TXZip Code  
75225FEC ID number of contributing  
federal political committee.**C**

C00388777

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 25 / 2025

Transaction ID : SA11C.6681

Amount of Each Receipt this Period

2500.00

☐

Memo Item

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

**B. SUN LIFE FINANCIAL (U.S.) SERVICES COMPANY INC PAC SUN LIFE PAC**

Mailing Address 96 WORCESTER STREET

City

WELLESLEY

State  
MAZip Code  
02481FEC ID number of contributing  
federal political committee.**C**

C00677146

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 15 / 2025

Transaction ID : SA11C.6689

Amount of Each Receipt this Period

2500.00

☐

Memo Item

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

**C. SYNOPSISYS, INC. POLITICAL ACTION COMMITTEE (SYNOPSISYS PAC)**

Mailing Address 675 ALMANOR AVE

City

SUNNYVALE

State  
CAZip Code  
94085FEC ID number of contributing  
federal political committee.**C**

C00884767

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 20 / 2025

Transaction ID : SA11C.6902

Amount of Each Receipt this Period

1000.00

☐

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

6000.00

**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 PageFOR LINE NUMBER: PAGE 55 OF 70  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. THRIVENT FINANCIAL FOR LUTHERANS POLITICAL ACTION COMMITTEE**

Mailing Address PO BOX 1892

City  
APPLETONState  
WIZip Code  
54912FEC ID number of contributing  
federal political committee.**C**

C00121319

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 28 / 2025**Transaction ID : SA11C.6966**

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**B. THRIVENT FINANCIAL FOR LUTHERANS POLITICAL ACTION COMMITTEE**

Mailing Address PO BOX 1892

City  
APPLETONState  
WIZip Code  
54912FEC ID number of contributing  
federal political committee.**C**

C00121319

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 28 / 2025**Transaction ID : SA11C.6967**

Amount of Each Receipt this Period

2000.00

☐ Memo Item

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

**C. UNUM GROUP POLITICAL ACTION COMMITTEE (UNUMPAC)**

Mailing Address 1 FOUNTAIN SQUARE

City  
CHATTANOOGAState  
TNZip Code  
37402FEC ID number of contributing  
federal political committee.**C**

C00177436

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 11 / 2025**Transaction ID : SA11C.6835**

Amount of Each Receipt this Period

5000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

7500.00

**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 PageFOR LINE NUMBER: PAGE 56 OF 70  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. US RENAL CARE PAC**

Mailing Address 5851 LEGACY CIRCLE SUITE 900

City  
PLANOState  
TXZip Code  
75024FEC ID number of contributing  
federal political committee.**C**

C00639260

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 30 / 2025

Transaction ID : SA11C.6685

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

**B. VIZIENT, INC., POLITICAL ACTION COMMITTEE**Mailing Address 799 9TH STREET, N.W.  
SUITE 210City  
WASHINGTONState  
DCZip Code  
20001FEC ID number of contributing  
federal political committee.**C**

C00199497

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 08 / 2025

Transaction ID : SA11C.6815

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**C.**

Mailing Address

City

State

Zip Code

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

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

3500.00

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

70325.00



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 57 OF 70

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

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

Full Name (Last, First, Middle Initial)

**A. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144

Purpose of Disbursement

Credit card processing fees

Candidate Name

003

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2025

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input checked="" type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	0			2	0	2	5		

FEC Identification Number

**C****Transaction ID : SB21B.6722**

Amount of Each Disbursement this Period

177.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144

Purpose of Disbursement

Credit card processing fees

Candidate Name

003

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2025

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input checked="" type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	1			2	0	2	5		

FEC Identification Number

**C****Transaction ID : SB21B.6718**

Amount of Each Disbursement this Period

28.64

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144

Purpose of Disbursement

Credit card processing fees

Candidate Name

003

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2025

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input checked="" type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	8			2	0	2	5		

FEC Identification Number

**C****Transaction ID : SB21B.6715**

Amount of Each Disbursement this Period

19.75

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

226.14

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 58 OF 70

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

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

Full Name (Last, First, Middle Initial)

**A. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144

Purpose of Disbursement

Credit card processing fees

Candidate Name

003

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2025

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input checked="" type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			3	0			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21B.6691

Amount of Each Disbursement this Period

178.74

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144

Purpose of Disbursement

Credit card processing fees

Candidate Name

003

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2025

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input checked="" type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	2			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21B.6838

Amount of Each Disbursement this Period

143.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144

Purpose of Disbursement

Credit card processing fees

Candidate Name

003

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2025

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input checked="" type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	9			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21B.6909

Amount of Each Disbursement this Period

237.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

558.94

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 59 OF 70

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

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

Full Name (Last, First, Middle Initial)

**A. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144

Purpose of Disbursement

Credit card processing fees

Candidate Name

003

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2025

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input checked="" type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	2	5		

FEC Identification Number

**C** Transaction ID : **SB21B.6858**

Amount of Each Disbursement this Period

592.90

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144

Purpose of Disbursement

Credit card processing fees

Candidate Name

003

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2025

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input checked="" type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			2	3			2	0	2	5		

FEC Identification Number

**C** Transaction ID : **SB21B.6894**

Amount of Each Disbursement this Period

39.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144

Purpose of Disbursement

Credit card processing fees

Candidate Name

003

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2025

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input checked="" type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			3	0			2	0	2	5		

FEC Identification Number

**C** Transaction ID : **SB21B.6897**

Amount of Each Disbursement this Period

39.50

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

671.90

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 60 OF 70

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

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

Full Name (Last, First, Middle Initial)

**A. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144

Purpose of Disbursement

Credit card processing fees

Candidate Name

003

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2025

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input checked="" type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		0	7		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21B.6793

Amount of Each Disbursement this Period

207.38

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144

Purpose of Disbursement

Credit card processing fees

Candidate Name

003

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2025

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input checked="" type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		1	4		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21B.6747

Amount of Each Disbursement this Period

52.35

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144

Purpose of Disbursement

Credit card processing fees

Candidate Name

003

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2025

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input checked="" type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		2	1		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21B.6918

Amount of Each Disbursement this Period

237.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

496.73

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 61 OF 70

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

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

Full Name (Last, First, Middle Initial)

**A. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144

Purpose of Disbursement

Credit card processing fees

Candidate Name

003

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2025

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input checked="" type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			2	8			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21B.6751

Amount of Each Disbursement this Period

0.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144

Purpose of Disbursement

Credit card processing fees

Candidate Name

003

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2025

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input checked="" type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			3	1			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21B.6778

Amount of Each Disbursement this Period

1007.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Authorize.net**Mailing Address 10800 NE 8th Street  
Suite 600City  
BellevueState  
WAZip Code  
98004

Purpose of Disbursement

Credit card processing fees

Candidate Name

003

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2025

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input checked="" type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	2			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21B.6944

Amount of Each Disbursement this Period

25.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1032.75

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 62 OF 70

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

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

Full Name (Last, First, Middle Initial)

**A. Authorize.net**Mailing Address 10800 NE 8th Street  
Suite 600City  
BellevueState  
WAZip Code  
98004

Purpose of Disbursement

Credit card processing fees

Candidate Name

003

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2025

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input checked="" type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	2			2	0	2	5		

FEC Identification Number

**C**   
**Transaction ID : SB21B.6947**

Amount of Each Disbursement this Period

 25.00☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Authorize.net**Mailing Address 10800 NE 8th Street  
Suite 600City  
BellevueState  
WAZip Code  
98004

Purpose of Disbursement

Credit card processing fees

Candidate Name

003

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2025

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input checked="" type="checkbox"/>	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	4			2	0	2	5		

FEC Identification Number

**C**   
**Transaction ID : SB21B.6955**

Amount of Each Disbursement this Period

 25.00☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Authorize.net**Mailing Address 10800 NE 8th Street  
Suite 600City  
BellevueState  
WAZip Code  
98004

Purpose of Disbursement

Credit card processing fees

Candidate Name

003

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2025

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input checked="" type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			0	2			2	0	2	5		

FEC Identification Number

**C**   
**Transaction ID : SB21B.6952**

Amount of Each Disbursement this Period

 25.00☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶ 75.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 63 OF 70

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

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

Full Name (Last, First, Middle Initial)

**A. Bank of America**

Mailing Address PO Box 15731

City  
WilmingtonState  
DEZip Code  
19886

Purpose of Disbursement

Credit card processing fees

Candidate Name

003

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2025

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input checked="" type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	1			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21B.6673

Amount of Each Disbursement this Period

282.15

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Bank of America**

Mailing Address PO Box 15731

City  
WilmingtonState  
DEZip Code  
19886

Purpose of Disbursement

Credit card processing fees

Candidate Name

003

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2025

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input checked="" type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	1			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21B.6675

Amount of Each Disbursement this Period

222.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Bank of America**

Mailing Address PO Box 15731

City  
WilmingtonState  
DEZip Code  
19886

Purpose of Disbursement

Credit card processing fees

Candidate Name

003

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2025

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input checked="" type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	2			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21B.6943

Amount of Each Disbursement this Period

99.20

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

603.55

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 64 OF 70

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

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

Full Name (Last, First, Middle Initial)

**A. Bank of America**

Mailing Address PO Box 15731

City  
WilmingtonState  
DEZip Code  
19886

Purpose of Disbursement

Credit card processing fees

Candidate Name

003

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2025

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input checked="" type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	2			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21B.6946

Amount of Each Disbursement this Period

97.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Bank of America**

Mailing Address PO Box 15731

City  
WilmingtonState  
DEZip Code  
19886

Purpose of Disbursement

Credit card processing fees

Candidate Name

003

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2025

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input checked="" type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	3			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21B.6954

Amount of Each Disbursement this Period

347.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Bank of America**

Mailing Address PO Box 15731

City  
WilmingtonState  
DEZip Code  
19886

Purpose of Disbursement

Credit card processing fees

Candidate Name

003

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2025

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input checked="" type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			0	2			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21B.6951

Amount of Each Disbursement this Period

222.20

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

666.60

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



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 65 OF 70

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

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

Full Name (Last, First, Middle Initial)

**A. Columbia Bank Card Services**

Mailing Address PO Box 35142

City  
SeattleState  
WAZip Code  
98124

Purpose of Disbursement

Credit card payment

Candidate Name

001

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2025

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input checked="" type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	1			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21B.6678

Amount of Each Disbursement this Period

3485.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. The Henri**

Mailing Address 1301 Pennsylvania Ave NW

City  
WashingtonState  
DCZip Code  
20004

Purpose of Disbursement

Catering

Candidate Name

003

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2025

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input checked="" type="checkbox"/>	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	1			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21B.6678.c

Amount of Each Disbursement this Period

1100.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. The Monocle on Capitol Hill**

Mailing Address 107 D street NE Washington

City  
WashingtonState  
DCZip Code  
20002

Purpose of Disbursement

Catering

Candidate Name

003

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2025

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input checked="" type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	1			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21B.6678.

Amount of Each Disbursement this Period

484.20

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3485.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 66 OF 70

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

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

Full Name (Last, First, Middle Initial)

**A. The Henri**

Mailing Address 1301 Pennsylvania Ave NW

City  
WashingtonState  
DCZip Code  
20004

Purpose of Disbursement

Catering

Candidate Name

003

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2025

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input checked="" type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	1			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21B.6678.1

Amount of Each Disbursement this Period

1900.80

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Columbia Bank Card Services**

Mailing Address PO Box 35142

City  
SeattleState  
WAZip Code  
98124

Purpose of Disbursement

Credit card payment

Candidate Name

001

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2025

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input checked="" type="checkbox"/>	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	1			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21B.6739

Amount of Each Disbursement this Period

1047.92

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Cellar.com**

Mailing Address 300 Massachusetts Avenue NE

City  
WashingtonState  
DCZip Code  
20002

Purpose of Disbursement

Event expenses

Candidate Name

003

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2025

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input checked="" type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	1			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21B.6739.

Amount of Each Disbursement this Period

297.86

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1047.92

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 67 OF 70

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

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

Full Name (Last, First, Middle Initial)

**A. W. Millar and Co. Catering**

Mailing Address 1335 14th Street NW

City  
WashingtonState  
DCZip Code  
20005

Purpose of Disbursement

Catering

Candidate Name

003

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2025

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input checked="" type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	1			2	0	2	5		

FEC Identification Number

**C****Transaction ID : SB21B.6739.1**

Amount of Each Disbursement this Period

350.06

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. S-3 Group**

Mailing Address 318 C St NE

City  
WashingtonState  
DCZip Code  
20002

Purpose of Disbursement

Room Rental

Candidate Name

003

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2025

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input checked="" type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	1			2	0	2	5		

FEC Identification Number

**C****Transaction ID : SB21B.6739.2**

Amount of Each Disbursement this Period

400.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Columbia Bank Card Services**

Mailing Address PO Box 35142

City  
SeattleState  
WAZip Code  
98124

Purpose of Disbursement

Credit card payment

Candidate Name

001

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2025

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input checked="" type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			2	1			2	0	2	5		

FEC Identification Number

**C****Transaction ID : SB21B.6956**

Amount of Each Disbursement this Period

3304.04

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3304.04

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

Full Name (Last, First, Middle Initial)

**A. The Monocle on Capitol Hill**

Mailing Address 107 D street NE Washington

City  
WashingtonState  
DCZip Code  
20002

Purpose of Disbursement

Catering

Candidate Name

003

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2025

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input checked="" type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		2	1		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21B.6956.1

Amount of Each Disbursement this Period

2275.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Root and Stem Catering**Mailing Address 2941 Fairview Park Drive  
Suite 550City  
Falls ChurchState  
VAZip Code  
22042

Purpose of Disbursement

Catering

Candidate Name

003

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2025

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input checked="" type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		2	1		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21B.6956.1

Amount of Each Disbursement this Period

919.34

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Columbia Bank Card Services**

Mailing Address PO Box 35142

City  
SeattleState  
WAZip Code  
98124

Purpose of Disbursement

Credit Card Payment

Candidate Name

001

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2025

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input checked="" type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	2		2	2		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21B.6941

Amount of Each Disbursement this Period

1375.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1375.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 69 OF 70

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

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

Full Name (Last, First, Middle Initial)

**A. Hine Restaurant**

Mailing Address 300 7th Street SE

City  
WashingtonState  
DCZip Code  
20003

Purpose of Disbursement

Catering

Candidate Name

003

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2025

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input checked="" type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			2	2			2	0	5			

FEC Identification Number

C

Transaction ID : SB21B.6941.1

Amount of Each Disbursement this Period

1375.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Cornerstone Government Affairs**Mailing Address 800 Maine Avenue SW  
7th FloorCity  
WashingtonState  
DCZip Code  
20024

Purpose of Disbursement

Room rental fee

Candidate Name

003

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2025

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input checked="" type="checkbox"/>	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			1	0			2	0	5			

FEC Identification Number

C

Transaction ID : SB21B.6949

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

250.00

13793.57

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 70 OF 70

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

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

Full Name (Last, First, Middle Initial)

**A. HOLDING ONTO OREGON'S PRIORITIES**

Mailing Address PO Box 3314

City  
PortlandState  
ORZip Code  
97208

Purpose of Disbursement

Joint fundraising transfer

Candidate Name

008

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2025

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input checked="" type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3	/	3	1		/	2	0	5			

FEC Identification Number

C

Transaction ID : SB22.6958

Amount of Each Disbursement this Period

16000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WYDEN FOR SENATE**Mailing Address 1220 SW Morrison  
Suite 910City  
PORTLANDState  
ORZip Code  
97205

Purpose of Disbursement

Joint Fundraising Transfer

Candidate Name

WYDEN FOR SENATE

008

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2028

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9		/	3	0		/	2	0	5			

FEC Identification Number

C

Transaction ID : SB22.6732

Amount of Each Disbursement this Period

22500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WYDEN FOR SENATE**Mailing Address 1220 SW Morrison  
Suite 910City  
PORTLANDState  
ORZip Code  
97205

Purpose of Disbursement

Joint fundraising transfer

Candidate Name

WYDEN FOR SENATE

008

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2028

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3	/	3	1		/	2	0	5			

FEC Identification Number

C

Transaction ID : SB22.6957

Amount of Each Disbursement this Period

130000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

168500.00

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

168500.00