

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

12FE4M5

CORNILLES FOR CONGRESS

ADDRESS (number and street)

PO BOX 2272

Check if different than previously reported. (ACC)

TUALATIN

OR

97062

2. FEC IDENTIFICATION NUMBER ▼

C C00464107

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

OR 01

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)
- Termination Report (TER)

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

- Primary (12P)  General (12G)  Runoff (12R)
- Convention (12C)  Special (12S)

Election on 01 / 31 / 2012 in the State of OR

(c) 30-Day POST-Election Report for the:

- General (30G)  Runoff (30R)  Special (30S)

Election on 01 / 31 / 2012 in the State of OR

5. Covering Period

01 / 12 / 2012 through 02 / 20 / 2012

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 Lisa Lisker

Signature of Treasurer Lisa Lisker

[Electronically Filed]

Date

03 / 01 / 2012

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

Office Use Only									
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**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**CORNILLES FOR CONGRESS**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	164519.77	1242302.56
(b) Total Contribution Refunds (from Line 20(d)) .....	500.00	19737.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	164019.77	1222565.56
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	309584.21	1244294.09
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	88.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	309584.21	1244206.09
8. Cash on Hand at Close of Reporting Period (from Line 27).....	26451.31	
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	

**For further information contact:**

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

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

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

CORNILLES FOR CONGRESS

Report Covering the Period: From: 01 / 12 / 2012 To: 02 / 20 / 2012

I. RECEIPTS

COLUMN A Total this Period

COLUMN B Election Cycle Total as of

COLUMN C Total for

01 / 31 / 2012 (date of general election)

02 / 01 / 2012 (date after general election)

through

02 / 20 / 2012 (last day of reporting period)

11. CONTRIBUTIONS

(other than loans) FROM:

- (a) Individuals/Persons Other than Political Committees
  - (i) Itemized (use Schedule A)

101276.11

897164.40

375.00

(ii) Unitemized

27943.66

187282.95

355.00

(iii) Total of contributions from individuals

129219.77

1084447.35

730.00

(b) Political Party Committees

0.00

0.00

0.00

(c) Other Political Committees

35300.00

157855.21

0.00

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 4 / 98

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
164519.77	1242302.56	730.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
0.00	88.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	0.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
164519.77	1242390.56	730.00

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 5 / 98

Write or Type Committee Name

**CORNILLES FOR CONGRESS**

Report Covering the Period: From:  /  /  To:  /  /

**II. DISBURSEMENTS**

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
<b>17. OPERATING EXPENDITURES</b>		
<input type="text" value="309584.21"/>	<input type="text" value="1244294.09"/>	<input type="text" value="31250.59"/>
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES</b>		
<input type="text" value="0.00"/>	<input type="text" value="20.75"/>	<input type="text" value="0.00"/>
<b>19. LOAN REPAYMENTS:</b>		
(a) Of Loans Made or Guaranteed by the Candidate		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Of All Other Loans		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>		
(a) Individuals/Persons Other Than Political Committees		
<input type="text" value="500.00"/>	<input type="text" value="19737.00"/>	<input type="text" value="0.00"/>
(b) Political Party Committees		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 98

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
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(c) Other Political Committees (such as PACs)

0.00	0.00	0.00
------	------	------

(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

500.00	19737.00	0.00
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21. OTHER DISBURSEMENTS

0.00	0.00	0.00
------	------	------

22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)

310084.21	1264051.84	31250.59
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**III. NET CONTRIBUTIONS (OTHER THAN LOANS)**

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

164019.77	1222565.56	730.00
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**IV. NET OPERATING EXPENDITURES**

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

309584.21	1244206.09	31250.59
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**V. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	172015.75
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	164519.77
25. SUBTOTAL (add Line 23 and Line 24).....	336535.52
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	310084.21
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	26451.31

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**WILLIAM B. ADAMS**

Mailing Address 16978 SW BLACKBERRY LANE

City BEAVERTON State OR Zip Code 97007

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

Name of Employer W. B. ADAMS CO Occupation PROPERTY CASUALTY INSURANCE

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date  
 \_\_\_\_\_ 950.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 19 / 2012

**Transaction ID : SA11AI.16238**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 100.00

Special General

**B.** Full Name (Last, First, Middle Initial)  
**WILLIAM B. ADAMS**

Mailing Address 16978 SW BLACKBERRY LANE

City BEAVERTON State OR Zip Code 97007

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

Name of Employer W. B. ADAMS CO Occupation PROPERTY CASUALTY INSURANCE

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2012

**Transaction ID : SA11AI.16239**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 50.00

Special General

**C.** Full Name (Last, First, Middle Initial)  
**ALLEN H ALLEY**

Mailing Address 1003 TERRACE DR

City LAKE OSWEGO State OR Zip Code 97034

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

Name of Employer The Alley Group Occupation Private Investor

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date  
 \_\_\_\_\_ 2400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 30 / 2012

**Transaction ID : SA11AI.16245**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2000.00

Special General

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

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

\_\_\_\_\_ 2150.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Sandra Andersen**

Mailing Address 6712 N. Cuter Cir.

City Portland State OR Zip Code 97217

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

Name of Employer Occupation Info Requested

Receipt For: 2012  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 27 / 2012

**Transaction ID : SA11AI.16205**

Amount of Each Receipt this Period  
 1000.00

Special General

**B.** Full Name (Last, First, Middle Initial)  
**STEPHEN M. ANDERSEN**

Mailing Address 6712 NORTH CUTTER CIRCLE

City PORTLAND State OR Zip Code 97217

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

Name of Employer Occupation  
**ANDERSEN CONSTRUTION** **CONTRACTOR**

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 27 / 2012

**Transaction ID : SA11AI.17040**

Amount of Each Receipt this Period  
 250.00

Special General

**C.** Full Name (Last, First, Middle Initial)  
**Randy Anderson**

Mailing Address 3063 Sweet Blossom Dr

City South Jordan State UT Zip Code 84095

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

Name of Employer Occupation  
**Advance Fiber Optics** **Engineer**

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 24 / 2012

**Transaction ID : SA11AI.16247**

Amount of Each Receipt this Period  
 250.00

Special General

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

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

1500.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Jarl Arnston**

Mailing Address 636 SE Gabbert Rd.

City Gresham State OR Zip Code 97080

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

Name of Employer Pacific Energy Group LLC Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 24 / 2012

**Transaction ID : SA11AI.16182**

Amount of Each Receipt this Period  
 1000.00

Special General

**B.** Full Name (Last, First, Middle Initial)  
**Jeffrey Arnston**

Mailing Address 801 Main St.

City Vancouver State WA Zip Code 98660

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

Name of Employer Albina Fuel Occupation Operations Manager

Receipt For: 2012  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 24 / 2012

**Transaction ID : SA11AI.16180**

Amount of Each Receipt this Period  
 1000.00

Special General

**C.** Full Name (Last, First, Middle Initial)  
**Lloyd Babler**

Mailing Address 3740 SW Shattuck Rd

City Portland State OR Zip Code 97221

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

Name of Employer Babler Brothers Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 20 / 2012

**Transaction ID : SA11AI.16126**

Amount of Each Receipt this Period  
 1000.00

Special General

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Lloyd Babler</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 21 / 2012	
Mailing Address 3740 SW Shattuck Rd		<b>Transaction ID : SA11AI.16255</b>	
City Portland	State OR	Zip Code 97221	Amount of Each Receipt this Period _____ 500.00 Special General
FEC ID number of contributing federal political committee.		C	
Name of Employer Babler Brothers	Occupation President		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Election Cycle-to-Date _____ 3000.00		

Full Name (Last, First, Middle Initial) <b>B. Patrick E Becker Jr</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 24 / 2012	
Mailing Address 6223 SW Meridian Way		<b>Transaction ID : SA11AI.16272</b>	
City Tualatin	State OR	Zip Code 97062	Amount of Each Receipt this Period _____ 250.00 Special General
FEC ID number of contributing federal political committee.		C	
Name of Employer Becker Capital Management	Occupation Investment Management		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Election Cycle-to-Date _____ 250.00		

Full Name (Last, First, Middle Initial) <b>C. RUTH BENDL</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 25 / 2012	
Mailing Address 10980 SW MUIRWOOD DRIVE		<b>Transaction ID : SA11AI.17057</b>	
City PORTLAND	State OR	Zip Code 97225	Amount of Each Receipt this Period _____ 50.00 Special General
FEC ID number of contributing federal political committee.		C	
Name of Employer N/A	Occupation RETIRED		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Election Cycle-to-Date _____ 355.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 800.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Andrew T Bergman</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 18 / 2012	
Mailing Address 15571 SW Harcourt Terr.		<b>Transaction ID : SA11AI.16277</b>	
City Tigard	State OR	Zip Code 97224	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period _____ 50.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Election Cycle-to-Date _____ 250.00		
		Special General	

Full Name (Last, First, Middle Initial) <b>B. Andrew T Bergman</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 22 / 2012	
Mailing Address 15571 SW Harcourt Terr.		<b>Transaction ID : SA11AI.16278</b>	
City Tigard	State OR	Zip Code 97224	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period _____ 31.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Election Cycle-to-Date _____ 281.00		
		Special General	

Full Name (Last, First, Middle Initial) <b>C. Karen P. Bettencourt</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 21 / 2012	
Mailing Address 6415 SW Burlingame Ave.		<b>Transaction ID : SA11AI.16283</b>	
City Portland	State OR	Zip Code 97239	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period _____ 250.00	
Name of Employer Gen. Manager	Occupation Austin Industries		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Election Cycle-to-Date _____ 750.00		
		Special General	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 331.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**RODERICK C BIRKLAND**

Mailing Address 1211 SW MYRTLE DR

City: PORTLAND State: OR Zip Code: 97201

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

Name of Employer: Alpenrose Dairy Occupation: President

Receipt For: 2012  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date: 2000.00

Date of Receipt: 01 / 18 / 2012

**Transaction ID : SA11AI.16089**

Amount of Each Receipt this Period: 1000.00

Special General

**B.** Full Name (Last, First, Middle Initial)  
**Donald W Blair**

Mailing Address 1600 SW Spring Street

City: Portland State: OR Zip Code: 97201

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

Name of Employer: Nike Inc. Occupation: Financial Executive

Receipt For: 2012  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date: 4750.00

Date of Receipt: 01 / 12 / 2012

**Transaction ID : SA11AI.12404**

Amount of Each Receipt this Period: 2500.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
**MARY E BLAIR**

Mailing Address 1600 SW SPRING ST

City: PORTLAND State: OR Zip Code: 97201

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

Name of Employer: N/A Occupation: Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date: 600.00

Date of Receipt: 01 / 12 / 2012

**Transaction ID : SA11AI.12405**

Amount of Each Receipt this Period: 2500.00

Contribution

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

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

6000.00

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

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

FOR LINE NUMBER: PAGE 13 OF 98  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Donald R. Blue**

Mailing Address 1725 NE 138th Pl.

City Portland State OR Zip Code 97230

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date  
 \_\_\_\_\_ 315.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 17 / 2012

**Transaction ID : SA11A1.17062**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 100.00

Special General

**B.** Full Name (Last, First, Middle Initial)  
**MYER J BORNSTEIN**

Mailing Address PO Box 188

City BELLINGHAM State WA Zip Code 98227

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date  
 \_\_\_\_\_ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 24 / 2012

**Transaction ID : SA11A1.16300**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

Special General

**C.** Full Name (Last, First, Middle Initial)  
**Rick A. Bosch**

Mailing Address 8780 SW Bomar Ct.

City Portland State OR Zip Code 97223

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

Name of Employer Heinz Mechanical Inc. Occupation Contractor

Receipt For: 2012  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
 \_\_\_\_\_ 4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 19 / 2012

**Transaction ID : SA11A1.16128**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2000.00

Special General

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

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

\_\_\_\_\_ 2600.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**LESLIE J BOYCE**

Mailing Address 15378 SW 82ND PL

City State Zip Code  
TIGARD OR 97224

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

Name of Employer Occupation  
N/A Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date  
**350.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**01 / 24 / 2012**

**Transaction ID : SA11AI.16303**

Amount of Each Receipt this Period  
**100.00**

Special General

**B.** Full Name (Last, First, Middle Initial)  
**James P. Brooks**

Mailing Address 4320 NE 261st Ave.

City State Zip Code  
Camas WA 98607

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2012  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
**2500.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**01 / 25 / 2012**

**Transaction ID : SA11AI.16187**

Amount of Each Receipt this Period  
**2500.00**

Special General

**C.** Full Name (Last, First, Middle Initial)  
**David W. Brown**

Mailing Address 13925 Fosberg Road

City State Zip Code  
Lake Oswego OR 97035

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

Name of Employer Occupation  
Obsidian Finance Group, LLC Business Owner

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date  
**1500.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**01 / 20 / 2012**

**Transaction ID : SA11AI.16311**

Amount of Each Receipt this Period  
**500.00**

Special General

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

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

**3100.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**KNUTE BUEHLER**

Mailing Address 1122 FOXWOOD PLACE

City State Zip Code  
BEND OR 97701

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

Name of Employer Occupation  
The Center for Orthopedic Care ORTHOPEDIC SURGEON

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date  
2200.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 23 / 2012

**Transaction ID : SA11AI.17067**

Amount of Each Receipt this Period  
200.00

Special General

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

Mailing Address 824 SW 18th St.

City State Zip Code  
Portland OR 97205

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

Name of Employer Occupation  
Self Real Estate Broker

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 23 / 2012

**Transaction ID : SA11AI.17069**

Amount of Each Receipt this Period  
50.00

Special General

**C.** Full Name (Last, First, Middle Initial)  
**Richard Calderwood**

Mailing Address 13110 NW Ridgetop St.

City State Zip Code  
Portland OR 97229

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

Name of Employer Occupation  
NVIDIA Corp. patent attorney

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date  
225.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 24 / 2012

**Transaction ID : SA11AI.16326**

Amount of Each Receipt this Period  
50.00

Special General

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

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

300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Jefferson Call**

Mailing Address 15150 NW Countryside ct

City Portland State OR Zip Code 97229

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

Name of Employer Century Dental Occupation Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2012

**Transaction ID : SA11Al.16327**

Amount of Each Receipt this Period  
**250.00**

Special General

**B.** Full Name (Last, First, Middle Initial)  
**MICHAEL CAREW**

Mailing Address 2127 NW IRVING ST.  
UNIT 201

City PORTLAND State OR Zip Code 97210

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

Name of Employer Cornilles for Congress Occupation Deputy Campaign Manager

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date **363.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 18 / 2012

**Transaction ID : SA11Al.16328**

Amount of Each Receipt this Period  
**10.00**

Special General

**C.** Full Name (Last, First, Middle Initial)  
**RAYMOND CAREW**

Mailing Address 100 HILTON AVE  
#802

City GARDEN CITY State NY Zip Code 11530

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

Name of Employer GDC CONSULTANTS Occupation COMMERCIAL REAL ESTATE CONSULTANT

Receipt For: 2012  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date **5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 24 / 2012

**Transaction ID : SA11Al.16147**

Amount of Each Receipt this Period  
**2500.00**

Special General

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

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

**2760.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Bruce Carpenter**

Mailing Address 30703 SW Peach Cove Road

City West Linn State OR Zip Code 97068

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

Name of Employer PGE Occupation management

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 14 / 2012

**Transaction ID : SA11AI.16331**

Amount of Each Receipt this Period  
 250.00

Special General

**B.** Full Name (Last, First, Middle Initial)  
**Adrianna Carr**

Mailing Address 24421 SW Valley View rd.

City West Linn State OR Zip Code 97068

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 26 / 2012

**Transaction ID : SA11AI.16202**

Amount of Each Receipt this Period  
 1000.00

Special General

**C.** Full Name (Last, First, Middle Initial)  
**Scott Casebeer**

Mailing Address PO Box 12456

City Salem State OR Zip Code 97309

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

Name of Employer Capitol Auto Group Occupation Auto Dealer

Receipt For: 2012  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 27 / 2012

**Transaction ID : SA11AI.16229**

Amount of Each Receipt this Period  
 1500.00

Special General

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

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

2750.00

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

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

FOR LINE NUMBER: PAGE 18 OF 98  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Donna M. Challinor**

Mailing Address 1853 SE Oak St.

City Hillsboro State OR Zip Code 97123

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 17 / 2012**

**Transaction ID : SA11AI.17073**

Amount of Each Receipt this Period  
**100.00**

Special General

**B.** Full Name (Last, First, Middle Initial)  
**Joseph P Cleary**

Mailing Address 4545 S.W. Greenhills Way

City Portland State OR Zip Code 97221

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

Name of Employer Bar Mingo Occupation Restaurant owner

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 24 / 2012**

**Transaction ID : SA11AI.16352**

Amount of Each Receipt this Period  
**500.00**

Special General

**C.** Full Name (Last, First, Middle Initial)  
**GLEN A CLEMANS**

Mailing Address 5 CENTERPOINTE DR  
STE 270

City LAKE OSWEGO State OR Zip Code 97035

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

Name of Employer CBG FINANCIAL Occupation FINANCIAL ADVISOR

Receipt For: 2012  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 20 / 2012**

**Transaction ID : SA11AI.16129**

Amount of Each Receipt this Period  
**1000.00**

Special General

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

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

**1600.00**

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

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

FOR LINE NUMBER: PAGE 19 OF 98  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MIKE CLUFF**

Mailing Address 6745 SW 90th Avenue

City Portland State OR Zip Code 97223

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary     General  
 Other (specify) S

Election Cycle-to-Date  
 \_\_\_\_\_ 206.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 22 / 2012

**Transaction ID : SA11A1.16355**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 31.00

Special General

**B.** Full Name (Last, First, Middle Initial)  
**MIKE CLUFF**

Mailing Address 6745 SW 90th Avenue

City Portland State OR Zip Code 97223

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary     General  
 Other (specify) S

Election Cycle-to-Date  
 \_\_\_\_\_ 233.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 25 / 2012

**Transaction ID : SA11A1.16356**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 27.00

Special General

**C.** Full Name (Last, First, Middle Initial)  
**MIKE CLUFF**

Mailing Address 6745 SW 90th Avenue

City Portland State OR Zip Code 97223

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary     General  
 Other (specify) S

Election Cycle-to-Date  
 \_\_\_\_\_ 258.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 28 / 2012

**Transaction ID : SA11A1.16359**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 25.00

Special General

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

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

\_\_\_\_\_ 83.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**J. W. Cobb**

Mailing Address P.O. Box 25663

City: Portland State: OR Zip Code: 97298

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

Name of Employer Info Requested: Occupation Info Requested:

Receipt For: 2012  
 Primary  General  
 Other (specify) **S**

Election Cycle-to-Date: 250.00

Date of Receipt: 01 / 18 / 2012

**Transaction ID : SA11AI.17076**

Amount of Each Receipt this Period: 250.00

Special General

**B.** Full Name (Last, First, Middle Initial)  
**Gary Coe**

Mailing Address 6255 SW Sheridan St.

City: Portland State: OR Zip Code: 97225

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

Name of Employer Info Requested: Occupation Info Requested:  
Supertow, LLC Business Owner

Receipt For: 2012  
 Primary  General  
 Other (specify) **S**

Election Cycle-to-Date: 1000.00

Date of Receipt: 01 / 17 / 2012

**Transaction ID : SA11AI.17079**

Amount of Each Receipt this Period: 250.00

Special General

**C.** Full Name (Last, First, Middle Initial)  
**Cal Collins**

Mailing Address 373 S. Sunshine Ln.

City: West Linn State: OR Zip Code: 97068

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

Name of Employer Info Requested: Occupation Info Requested:  
ESCO Corp. CEO

Receipt For: 2012  
 Primary  General  
 Other (specify) **S**

Election Cycle-to-Date: 250.00

Date of Receipt: 01 / 14 / 2012

**Transaction ID : SA11AI.17081**

Amount of Each Receipt this Period: 250.00

Special General

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Nicholas P. Collins Jr.**

Mailing Address 8700 SW Stono Drive

City Tualatin State OR Zip Code 97062

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

Name of Employer PAE Consulting Occupation Engineer

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 28 / 2012

**Transaction ID : SA11AI.17084**

Amount of Each Receipt this Period  
 700.00

Special General

**B.** Full Name (Last, First, Middle Initial)  
**Alex Corrigan**

Mailing Address 22328 SW 106th Ave.

City Tualatin State OR Zip Code 97062

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

Name of Employer Delap llp Occupation CPA

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2012

**Transaction ID : SA11AI.16377**

Amount of Each Receipt this Period  
 100.00

Special General

**C.** Full Name (Last, First, Middle Initial)  
**Paul S. Cosgrove**

Mailing Address 220 NW Skyline Blvd.

City Portland State OR Zip Code 97210

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

Name of Employer Lindsay Hart Neil + Weigler, LLP Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2012

**Transaction ID : SA11AI.16378**

Amount of Each Receipt this Period  
 500.00

Special General

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

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

1300.00

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

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

FOR LINE NUMBER: PAGE 22 OF 98  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MARK O COTTLE**

Mailing Address 15379 SW SUNSET

City State Zip Code  
SHERWOOD OR 97140

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

Name of Employer Occupation  
MARK O. COTTLE PC ATTORNEY

Receipt For: 2012  
 Primary     General  
 Other (specify) S

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 16 / 2012

**Transaction ID : SA11A1.16379**

Amount of Each Receipt this Period  
250.00

Special General

**B.** Full Name (Last, First, Middle Initial)  
**ABBY CROUCH**

Mailing Address 651 NW 92ND PLACE

City State Zip Code  
PORTLAND OR 97229

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

Name of Employer Occupation  
DOVE LEWIS EMERGENCY ANIMAL HO DONOR RELATIONS

Receipt For: 2012  
 Primary     General  
 Other (specify) S

Election Cycle-to-Date  
1050.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 17 / 2012

**Transaction ID : SA11A1.17102**

Amount of Each Receipt this Period  
250.00

Special General

**C.** Full Name (Last, First, Middle Initial)  
**Nancy R Dale**

Mailing Address 6998 SW Windemere Loop

City State Zip Code  
Portland OR 97225

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary     General  
 Other (specify) S

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 28 / 2012

**Transaction ID : SA11A1.16395**

Amount of Each Receipt this Period  
100.00

Special General

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

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

600.00

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

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

FOR LINE NUMBER: PAGE 23 OF 98  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Norman Daniels**

Mailing Address 1321 SE 75th Ct.

City Vancouver State WA Zip Code 98664

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

Name of Employer Occupation Info Requested

Receipt For: 2012  
 Primary     General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 26 / 2012

**Transaction ID : SA11AI.16203**

Amount of Each Receipt this Period  
 1000.00

Special General

**B.** Full Name (Last, First, Middle Initial)  
**Les Davis**

Mailing Address 6770 NW Centurt Blvd.

City Hillsboro State OR Zip Code 97124

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

Name of Employer Occupation  
Lithtex Printing Business owner

Receipt For: 2012  
 Primary     General  
 Other (specify) S

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 26 / 2012

**Transaction ID : SA11AI.16403**

Amount of Each Receipt this Period  
 500.00

Special General

**C.** Full Name (Last, First, Middle Initial)  
**Alan W DeBoer**

Mailing Address 2260 Morada Ln

City Ashland State OR Zip Code 97520

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

Name of Employer Occupation  
T C Chevrolet Auto Dealer

Receipt For: 2012  
 Primary     General  
 Other (specify) S

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 25 / 2012

**Transaction ID : SA11AI.16411**

Amount of Each Receipt this Period  
 250.00

Special General

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

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

1750.00

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

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

FOR LINE NUMBER: PAGE 24 OF 98  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**KEVIN DEWHITT**

Mailing Address 215 W. ST. JAMES PL.

City State Zip Code  
LONGVIEW WA 98632

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

Name of Employer Occupation  
Agilyx Chief Technology Officer

Receipt For: 2012  
 Primary     General  
 Other (specify) S

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 20 / 2012

**Transaction ID : SA11AI.16419**

Amount of Each Receipt this Period  
 250.00

Special General

**B.** Full Name (Last, First, Middle Initial)  
**Rickey I dice**

Mailing Address 63790 Johnson ranch

City State Zip Code  
bend OR 97701

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

Name of Employer Occupation  
patrick enviromental Emergency services

Receipt For: 2012  
 Primary     General  
 Other (specify) S

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 21 / 2012

**Transaction ID : SA11AI.16421**

Amount of Each Receipt this Period  
 500.00

Special General

**C.** Full Name (Last, First, Middle Initial)  
**AMANDA N. DICKSON**

Mailing Address 5331 SW NATCHEZ STREET

City State Zip Code  
TUALATIN OR 97062

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

Name of Employer Occupation  
legacy meridian park hospital on-call RN

Receipt For: 2012  
 Primary     General  
 Other (specify) S

Election Cycle-to-Date  
560.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 25 / 2012

**Transaction ID : SA11AI.16422**

Amount of Each Receipt this Period  
 310.00

Special General

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

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

1060.00



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

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

FOR LINE NUMBER: PAGE 25 OF 98  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Chris Dudley**

Mailing Address 1150 Fairway Road

City State Zip Code  
Lake Oswego OR 97034

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

Name of Employer Occupation  
Filigree Advisors Financial Advisor

Receipt For: 2012  
 Primary     General  
 Other (specify) **S**

Election Cycle-to-Date  
**1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 27 / 2012**

**Transaction ID : SA11AI.16440**

Amount of Each Receipt this Period  
**500.00**

Special General

**B.** Full Name (Last, First, Middle Initial)  
**PAUL DUEBER**

Mailing Address PO BOX 549

City State Zip Code  
CANNON BEACH OR 97110

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

Name of Employer Occupation  
self private investigator

Receipt For: 2012  
 Primary     General  
 Other (specify) **S**

Election Cycle-to-Date  
**300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 25 / 2012**

**Transaction ID : SA11AI.16441**

Amount of Each Receipt this Period  
**100.00**

Special General

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

Mailing Address 5080 SW Saum Way

City State Zip Code  
Tualatin OR 97062

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

Name of Employer Occupation  
Sunset peds Physician

Receipt For: 2012  
 Primary     General  
 Other (specify) **S**

Election Cycle-to-Date  
**350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 21 / 2012**

**Transaction ID : SA11AI.16475**

Amount of Each Receipt this Period  
**250.00**

Special General

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

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

**850.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Rick A. Evans**

Mailing Address 8225 SW Tualatin-Sherwood Rd.

City Tualatin State OR Zip Code 97062

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

Name of Employer Info Requested Occupation Info Requested

Receipt For: 2012  
 Primary  General  
 Other (specify) **S**

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 21 / 2012**

**Transaction ID : SA11AI.17118**

Amount of Each Receipt this Period  
 250.00

Special General

**B.** Full Name (Last, First, Middle Initial)  
**LES R FAHEY**

Mailing Address 8148 NW THOMPSON ROAD

City PORTLAND State OR Zip Code 97229

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

Name of Employer Info Requested Occupation Info Requested  
**SELF CONSULTANT**

Receipt For: 2012  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 20 / 2012**

**Transaction ID : SA11AI.16127**

Amount of Each Receipt this Period  
 1000.00

Special General

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

Mailing Address 1300 SW Forest Meadows Way

City Lake Oswego State OR Zip Code 97034

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

Name of Employer Info Requested Occupation Info Requested  
**Columbia Helicopters Business Executive**

Receipt For: 2012  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 20 / 2012**

**Transaction ID : SA11AI.16124**

Amount of Each Receipt this Period  
 1000.00

Special General

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

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

Mailing Address 6215 SW Dolph Dr.

City Portland State OR Zip Code 97219

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

Name of Employer Trail Blazers, Inc. Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 25 / 2012

**Transaction ID : SA11AI.17120**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Special General

**B.** Full Name (Last, First, Middle Initial)  
**Patricia A Fisher**

Mailing Address 6901 SE Oaks Park Way  
OYC, slip #21

City Portland State OR Zip Code 97202

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

Name of Employer \_\_\_\_\_ Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date  
 \_\_\_\_\_ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 24 / 2012

**Transaction ID : SA11AI.16487**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

Special General

**C.** Full Name (Last, First, Middle Initial)  
**JAMES A FLYNN**

Mailing Address 1016 SW MYRTLE DR.

City PORTLAND State OR Zip Code 97201

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

Name of Employer New & Neville Real Estate Occupation Real Estate Broker

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date  
 \_\_\_\_\_ 750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 16 / 2012

**Transaction ID : SA11AI.16488**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Special General

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

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

\_\_\_\_\_ 1000.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**ROBERT C FOTHERINGHAM**

Mailing Address 218 NE Hillwood Ter.

City Hillsboro State OR Zip Code 97124

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

Name of Employer VIAL FOTHERINGHAM LLP Occupation ATTORNEY

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 16 / 2012

**Transaction ID : SA11Al.16489**

Amount of Each Receipt this Period  
 500.00

Special General

**B.** Full Name (Last, First, Middle Initial)  
**ELAINE FRANKLIN**

Mailing Address 11760 SW RIVERWOOD RD

City PORTLAND State OR Zip Code 97219

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

Name of Employer N/A Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 18 / 2012

**Transaction ID : SA11Al.16491**

Amount of Each Receipt this Period  
 250.00

Special General

**C.** Full Name (Last, First, Middle Initial)  
**Barbara L. Gaffney**

Mailing Address 1430 SW Barnes Ln.

City Portland State OR Zip Code 97221

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

Name of Employer Self Employed Occupation Management Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 17 / 2012

**Transaction ID : SA11Al.17130**

Amount of Each Receipt this Period  
 750.00

Special General

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 29 OF 98  
(check only one)  
 11a 12   
  11b 13a   
  11c 13b   
  11d 14   
  15

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Roger B. Gatewood**

Mailing Address 123 Bay Point Dr. NE

City St. Petersburg State FL Zip Code 33704

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

Name of Employer Self Occupation Homebuilder

Receipt For: 2012  
 Primary     General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 26 / 2012

**Transaction ID : SA11AI.16223**

Amount of Each Receipt this Period  
 2500.00

Special General

**B.** Full Name (Last, First, Middle Initial)  
**Shaun D. George**

Mailing Address 22254 SW Fisk Ter.

City Sherwood State OR Zip Code 97140

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

Name of Employer Info Requested Occupation Info Requested

Receipt For: 2012  
 Primary     General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 27 / 2012

**Transaction ID : SA11AI.16209**

Amount of Each Receipt this Period  
 1500.00

Special General

**C.** Full Name (Last, First, Middle Initial)  
**SHIRLEY A. GLOS**

Mailing Address 14235 SW COVEN CT.

City TIGARD State OR Zip Code 97224

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

Name of Employer Vigilant Occupation Assistant Pres.

Receipt For: 2012  
 Primary     General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 23 / 2012

**Transaction ID : SA11AI.16175**

Amount of Each Receipt this Period  
 1000.00

Special General

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**SHIRLEY A. GLOS**

Mailing Address 14235 SW COVEN CT.

City State Zip Code  
TIGARD OR 97224

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

Name of Employer Occupation  
Vigilant Assistant Pres.

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 28 / 2012

**Transaction ID : SA11AI.16514**

Amount of Each Receipt this Period  
500.00

Special General

**B.** Full Name (Last, First, Middle Initial)  
**Rich Golb**

Mailing Address 20215 SE Fernridge Dr.

City State Zip Code  
Kamas WA 98607

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

Name of Employer Occupation  
Pacific Comm Business Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 18 / 2012

**Transaction ID : SA11AI.16518**

Amount of Each Receipt this Period  
500.00

Special General

**C.** Full Name (Last, First, Middle Initial)  
**James C. Griggs**

Mailing Address 260 Washington St. S.

City State Zip Code  
Salem OR 97302

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

Name of Employer Occupation  
Info Requested Info Requested

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 18 / 2012

**Transaction ID : SA11AI.17148**

Amount of Each Receipt this Period  
250.00

Special General

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**BEVERLY J HAMES**

Mailing Address **PO BOX 23115**

City **TIGARD** State **OR** Zip Code **97281**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2012  
 Primary  General  
 Other (specify) **S**

Election Cycle-to-Date  
**350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 16 / 2012**

**Transaction ID : SA11A1.17153**

Amount of Each Receipt this Period  
**100.00**

Special General

**B.** Full Name (Last, First, Middle Initial)  
**Kathleen Hanel**

Mailing Address **1795 8th St.  
Apt. 115**

City **Hood River** State **OR** Zip Code **97031**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2012  
 Primary  General  
 Other (specify) **S**

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 13 / 2012**

**Transaction ID : SA11A1.17155**

Amount of Each Receipt this Period  
**500.00**

Special General

**C.** Full Name (Last, First, Middle Initial)  
**DELEE HAUSBINE**

Mailing Address **9215 SW STONO DR**

City **TUALATIN** State **OR** Zip Code **97062**

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

Name of Employer **N/A** Occupation **HOMEMAKER**

Receipt For: 2012  
 Primary  General  
 Other (specify) **S**

Election Cycle-to-Date  
**300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 25 / 2012**

**Transaction ID : SA11A1.16551**

Amount of Each Receipt this Period  
**100.00**

Special General

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

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

**700.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Pamela Hauge</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 16 / 2012	
Mailing Address 69131 Bay Dr.		<b>Transaction ID : SA11AI.16552</b>	
City Sisters	State OR	Zip Code 97759	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Hauge Provisions of Oregon Inc.	Occupation Pamela Hauge		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Election Cycle-to-Date 350.00		
		Special General	

Full Name (Last, First, Middle Initial) <b>B. Pamela Hauge</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 29 / 2012	
Mailing Address 69131 Bay Dr.		<b>Transaction ID : SA11AI.16553</b>	
City Sisters	State OR	Zip Code 97759	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Hauge Provisions of Oregon Inc.	Occupation Pamela Hauge		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Election Cycle-to-Date 600.00		
		Special General	

Full Name (Last, First, Middle Initial) <b>C. Lester J. Hawkins</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 27 / 2012	
Mailing Address 4473 SE Aldercrest Rd.		<b>Transaction ID : SA11AI.16554</b>	
City Milwaukie	State OR	Zip Code 97222	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Oregon Decorative Rock	Occupation Business Owner/Operator		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Election Cycle-to-Date 500.00		
		Special General	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**SANDRA D. HEIDECKE**

Mailing Address 6017 NE B

City Hillsboro State OR Zip Code 97124

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

Name of Employer SELF Occupation Artist

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date  
 \_\_\_\_\_ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 26 / 2012

**Transaction ID : SA11AI.16558**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 100.00

Special General

**B.** Full Name (Last, First, Middle Initial)  
**FLOYD E. HOLCOM**

Mailing Address 100 39TH STREET

City Astoria State OR Zip Code 97103

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

Name of Employer Pier 39 - Astoria Occupation Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 16 / 2012

**Transaction ID : SA11AI.16579**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

Special General

**C.** Full Name (Last, First, Middle Initial)  
**CURTIS R HOLZGANG**

Mailing Address 9645 SW EAGLE CT

City Beaverton State OR Zip Code 97008

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date  
 \_\_\_\_\_ -350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 28 / 2012

**Transaction ID : SA11AI.16584**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

Special General

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

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

\_\_\_\_\_ 1100.00

\_\_\_\_\_

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

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

FOR LINE NUMBER: PAGE 34 OF 98  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**I. B. Holzman**

Mailing Address 3724 SW 50th

City Portland State OR Zip Code 97221

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

Name of Employer Reliable Credit Occupation Finance

Receipt For: 2012  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date  
 \_\_\_\_\_ 4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 25 / 2012

**Transaction ID : SA11A1.16184**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2000.00

Special General

**B.** Full Name (Last, First, Middle Initial)  
**Harold H. Huffman**

Mailing Address PO Box 910

City Winchester State OR Zip Code 97495

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

Name of Employer C2S Timber, LLC Occupation Construction/Timber opr

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 19 / 2012

**Transaction ID : SA11A1.17192**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Special General

**C.** Full Name (Last, First, Middle Initial)  
**Scott T. Inukai**

Mailing Address 664 Oak Meadow Dr.

City Lake Oswego State OR Zip Code 97034

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

Name of Employer Dick's Auto Group Occupation Auto Dealer

Receipt For: 2012  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 25 / 2012

**Transaction ID : SA11A1.16189**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Special General

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

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

\_\_\_\_\_ 3250.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Shannon M Inukai Cuffee**

Mailing Address 15179 NW Casey Drive

City State Zip Code  
Portland OR 97229

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

Name of Employer Occupation  
Dick's Auto Group Car Dealer

Receipt For: 2012  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 17 / 2012

**Transaction ID : SA11AI.16088**

Amount of Each Receipt this Period  
1000.00

Special General

**B.** Full Name (Last, First, Middle Initial)  
**Benton H. Johnson**

Mailing Address 20360 SW Shelley Ct.

City State Zip Code  
Aloha OR 97007

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date  
520.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 16 / 2012

**Transaction ID : SA11AI.16605**

Amount of Each Receipt this Period  
100.00

Special General

**C.** Full Name (Last, First, Middle Initial)  
**Benton H. Johnson**

Mailing Address 20360 SW Shelley Ct.

City State Zip Code  
Aloha OR 97007

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date  
720.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 24 / 2012

**Transaction ID : SA11AI.16604**

Amount of Each Receipt this Period  
200.00

Special General

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

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

1300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Benton H. Johnson**

Mailing Address 20360 SW Shelley Ct.

City Aloha State OR Zip Code 97007

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify) **S**

Election Cycle-to-Date **820.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 28 / 2012**

**Transaction ID : SA11AI.16606**

Amount of Each Receipt this Period  
**100.00**

Special General

**B.** Full Name (Last, First, Middle Initial)  
**JOEL KIRK JORGENSEN**

Mailing Address 18685 NW LAPINE ST

City PORTLAND State OR Zip Code 97229

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

Name of Employer FIRST Real Estate Consulting Occupation Real Estate Appraiser

Receipt For: 2012  
 Primary  General  
 Other (specify) **S**

Election Cycle-to-Date **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 26 / 2012**

**Transaction ID : SA11AI.16614**

Amount of Each Receipt this Period  
**100.00**

Special General

**C.** Full Name (Last, First, Middle Initial)  
**DENISE JULIAN**

Mailing Address 15711 SE RIVERSHORE DR

City VANCOUVER State WA Zip Code 98683

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

Name of Employer N/A Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date **3500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 23 / 2012**

**Transaction ID : SA11AI.16173**

Amount of Each Receipt this Period  
**2500.00**

Special General

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

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

**2700.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**David Kelley**

Mailing Address 6848 SW 67TH AVE

City: PORTLAND State: OR Zip Code: 97223

FEC ID number of contributing federal political committee: C

Name of Employer: N/A Occupation: retired

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date: 300.00

Date of Receipt: 01 / 22 / 2012

**Transaction ID : SA11AI.16623**

Amount of Each Receipt this Period: 100.00

Special General

**B.** Full Name (Last, First, Middle Initial)  
**Jeff M. Kemp**

Mailing Address 34043 Bennett Rd.

City: Warren State: OR Zip Code: 97053

FEC ID number of contributing federal political committee: C

Name of Employer: Pacific Stainless Occupation: President

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date: 1200.00

Date of Receipt: 01 / 16 / 2012

**Transaction ID : SA11AI.17204**

Amount of Each Receipt this Period: 1200.00

Special General

**C.** Full Name (Last, First, Middle Initial)  
**Jon A. Kimmett**

Mailing Address 2116 NE 28th Ave

City: Portland State: OR Zip Code: 97212

FEC ID number of contributing federal political committee: C

Name of Employer: Self Occupation: Real Estate Investor

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date: 1000.00

Date of Receipt: 01 / 25 / 2012

**Transaction ID : SA11AI.16636**

Amount of Each Receipt this Period: 500.00

Special General

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

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

1800.00

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

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

FOR LINE NUMBER: PAGE 38 OF 98  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**GORDON J. KING**

Mailing Address 15715 NW Saint Andrews Dr.

City: PORTLAND    State: OR    Zip Code: 97229

FEC ID number of contributing federal political committee: C

Name of Employer: Retired    Occupation: Retired

Receipt For: 2012  
 Primary     General  
 Other (specify) S

Election Cycle-to-Date: 1500.00

Date of Receipt: 01 / 21 / 2012

**Transaction ID : SA11AI.17206**

Amount of Each Receipt this Period: 250.00

Special General

**B.** Full Name (Last, First, Middle Initial)  
**J.W. Laird**

Mailing Address 15616 NW Overton Dr

City: Beaverton    State: OR    Zip Code: 97006

FEC ID number of contributing federal political committee: C

Name of Employer: Retired    Occupation: Retired

Receipt For: 2012  
 Primary     General  
 Other (specify) S

Election Cycle-to-Date: 750.00

Date of Receipt: 01 / 17 / 2012

**Transaction ID : SA11AI.17215**

Amount of Each Receipt this Period: 250.00

Special General

**C.** Full Name (Last, First, Middle Initial)  
**Anna M Lancaster**

Mailing Address 8560 SW Maricopa Drive

City: Tualatin    State: OR    Zip Code: 97062

FEC ID number of contributing federal political committee: C

Name of Employer: Self-Anna Lancaster Fine Art & Michael    Occupation: Fine & Graphic Artist

Receipt For: 2012  
 Primary     General  
 Other (specify) S

Election Cycle-to-Date: 250.00

Date of Receipt: 01 / 25 / 2012

**Transaction ID : SA11AI.16665**

Amount of Each Receipt this Period: 50.00

Special General

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

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

550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Anna M Lancaster</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 29 / 2012	
Mailing Address 8560 SW Maricopa Drive		<b>Transaction ID : SA11AI.16666</b>	
City Tualatin	State OR	Zip Code 97062	Amount of Each Receipt this Period _____ 50.00 Special General
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self-Anna Lancaster Fine Art & Michael	Occupation Fine & Graphic Artist		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Election Cycle-to-Date _____ 300.00		

Full Name (Last, First, Middle Initial) <b>B. SCOTT C LARSEN</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 20 / 2012	
Mailing Address 2020 CEMETERY RD		<b>Transaction ID : SA11AI.16668</b>	
City MCMINNVILLE	State OR	Zip Code 97128	Amount of Each Receipt this Period _____ 100.00 Special General
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Larsen Motor Company, LLC	Occupation Auto Dealer		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Election Cycle-to-Date _____ 350.00		

Full Name (Last, First, Middle Initial) <b>C. DONNA K LEAHY</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 24 / 2012	
Mailing Address 34175 SW PEAKS VIEW DR		<b>Transaction ID : SA11AI.16191</b>	
City HILLSBORO	State OR	Zip Code 97123	Amount of Each Receipt this Period _____ 1000.00 Special General
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer KEN LEAHY CONSTRUCTION	Occupation CORPORATE SECRETARY		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	Election Cycle-to-Date _____ 3000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 1150.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**David J. Loftus**

Mailing Address 16220 SW Bell Rd.

City State Zip Code  
Sherwood OR 97140

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

Name of Employer Occupation Info Requested  
Info Requested

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 13 / 2012

**Transaction ID : SA11A1.17228**

Amount of Each Receipt this Period  
500.00

Special General

**B.** Full Name (Last, First, Middle Initial)  
**VERONICA A. MACDONALD**

Mailing Address 2454 NW WESTOVER RD. #504

City State Zip Code  
PORTLAND OR 97210

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

Name of Employer Occupation Info Requested  
Retired Retired

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date  
350.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 20 / 2012

**Transaction ID : SA11A1.16705**

Amount of Each Receipt this Period  
100.00

Special General

**C.** Full Name (Last, First, Middle Initial)  
**Gary Manchester**

Mailing Address 1025 NW Couch Street  
Unit 520

City State Zip Code  
Portland OR 97209

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

Name of Employer Occupation Info Requested  
American Heating Owner

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date  
750.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 24 / 2012

**Transaction ID : SA11A1.16710**

Amount of Each Receipt this Period  
500.00

Special General

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

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

1100.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MELVIN J MARK**

Mailing Address 111 SW COLUMBIA ST  
STE 1380

City PORTLAND State OR Zip Code 97201

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

Name of Employer Melvin Mark Properties Occupation Commercial Real Estate

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 24 / 2012

**Transaction ID : SA11AI.16715**

Amount of Each Receipt this Period  
500.00

Special General

**B.** Full Name (Last, First, Middle Initial)  
**JOAN MAYHEW**

Mailing Address 15098 SW CABERNET DRIVE

City PORTLAND State OR Zip Code 97224

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

Name of Employer N/A Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 30 / 2012

**Transaction ID : SA11AI.17236**

Amount of Each Receipt this Period  
100.00

Special General

**C.** Full Name (Last, First, Middle Initial)  
**Diane McAravey**

Mailing Address 22047 SW Fisk Terrace

City Sherwood State OR Zip Code 97140

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date  
900.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 20 / 2012

**Transaction ID : SA11AI.16730**

Amount of Each Receipt this Period  
200.00

Special General

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MALCOLM K MCIVER</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 26 / 2012	
Mailing Address 7860 SW NORTHVALE WAY		<b>Transaction ID : SA11AI.16225</b>	
City PORTLAND	State OR	Zip Code 97225	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00	
Name of Employer Commerce Properties	Occupation Real Estate		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	Election Cycle-to-Date 5000.00		

Full Name (Last, First, Middle Initial) <b>B. WILLIAM E MILAN</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 21 / 2012	
Mailing Address 31392 SW KENSINGTON DR		<b>Transaction ID : SA11AI.16754</b>	
City WILSONVILLE	State OR	Zip Code 97070	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 51.00	
Name of Employer N/A	Occupation RETIRED		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Election Cycle-to-Date 201.00		

Full Name (Last, First, Middle Initial) <b>C. Robert J Miller</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 16 / 2012	
Mailing Address 1130 SW King Ave.		<b>Transaction ID : SA11AI.17598</b>	
City Portland	State OR	Zip Code 97205	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 629.12	
Name of Employer Trailblazer Foods	Occupation President & CEO		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	Election Cycle-to-Date 2629.12		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3180.12
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JC Milne**

Mailing Address 1312 SW 16th Ave.

City Portland State OR Zip Code 97201

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

Name of Employer JC Milne Real Properties Occupation Engineer

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date  
 \_\_\_\_\_ 375.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 09 / 2012

**Transaction ID : SA11AI.17247**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 375.00

Special General

**B.** Full Name (Last, First, Middle Initial)  
**Richard Mincheff**

Mailing Address 1658 Village Park Ln.

City Lake Oswego State OR Zip Code 97034

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 20 / 2012

**Transaction ID : SA11AI.17250**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 200.00

Special General

**C.** Full Name (Last, First, Middle Initial)  
**Jeannena Mitchell**

Mailing Address 15015 NW West Union Rd.

City Portland State OR Zip Code 97229

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

Name of Employer Info Requested Occupation Info Requested

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date  
 \_\_\_\_\_ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 27 / 2012

**Transaction ID : SA11AI.17251**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 100.00

Special General

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

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

\_\_\_\_\_ 675.00

\_\_\_\_\_

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

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

FOR LINE NUMBER: PAGE 44 OF 98  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**RODNEY H MOORE**

Mailing Address 0305 SW MONTGOMERY STREET  
APT 506

City PORTLAND State OR Zip Code 97201

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

Name of Employer WEST COAST SEAFOOD PROCESSORS Occupation EXECUTIVE DIRECTOR

Receipt For: 2012  
 Primary     General  
 Other (specify) S

Election Cycle-to-Date  
650.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 17 / 2012

**Transaction ID : SA11AI.17255**

Amount of Each Receipt this Period  
 250.00

Special General

**B.** Full Name (Last, First, Middle Initial)  
**Will Moore**

Mailing Address P.O. Box 785

City Banks State OR Zip Code 97106

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

Name of Employer Moore Performance Group Occupation Management Consultant

Receipt For: 2012  
 Primary     General  
 Other (specify) S

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 17 / 2012

**Transaction ID : SA11AI.17256**

Amount of Each Receipt this Period  
 250.00

Special General

**C.** Full Name (Last, First, Middle Initial)  
**ROBERT O NELSON**

Mailing Address 11399 SW IRONWOOD LOOP

City TIGARD State OR Zip Code 97223

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

Name of Employer NELSON & COMPANY Occupation CPA

Receipt For: 2012  
 Primary     General  
 Other (specify) S

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 13 / 2012

**Transaction ID : SA11AI.17260**

Amount of Each Receipt this Period  
 750.00

Special General

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Pete Nickerson**

Mailing Address 11175 SW Riverwood Road

City Portland State OR Zip Code 97219

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

Name of Employer Self Occupation Business

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 31 / 2012

**Transaction ID : SA11A1.16793**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

Special General

**B.** Full Name (Last, First, Middle Initial)  
**MAUREEN OKERSTROM**

Mailing Address 40020 NW BANKS RD

City BANKS State OR Zip Code 97106

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

Name of Employer \_\_\_\_\_ Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 24 / 2012

**Transaction ID : SA11A1.16801**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Special General

**C.** Full Name (Last, First, Middle Initial)  
**Deborah L. Osborne**

Mailing Address 4085 NW 153rd Terr.

City Portland State OR Zip Code 97229

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

Name of Employer University of Portland Occupation Registered Nurse

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 18 / 2012

**Transaction ID : SA11A1.17267**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Special General

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

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

\_\_\_\_\_ 1000.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Joanne Owens**

Mailing Address 992 Paradise Ranch Rd.

City Fredericksburg State TX Zip Code 98624

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 30 / 2012

**Transaction ID : SA11AI.16809**

Amount of Each Receipt this Period  
 300.00

Special General

**B.** Full Name (Last, First, Middle Initial)  
**BOB PACKWOOD**

Mailing Address 11760 SW RIVERWOOD RD

City PORTLAND State OR Zip Code 97219

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 17 / 2012

**Transaction ID : SA11AI.17271**

Amount of Each Receipt this Period  
 500.00

Special General

**C.** Full Name (Last, First, Middle Initial)  
**Dr. Robert B. Pamplin Jr.**

Mailing Address 801 Terrace Drive

City Lake Oswego State OR Zip Code 97034

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

Name of Employer R.B. Pamplin Corporation Occupation Chairman/CEO

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 24 / 2012

**Transaction ID : SA11AI.17273**

Amount of Each Receipt this Period  
 500.00

Special General

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

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

1300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>DAN PECK</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 24 / 2012	
Mailing Address 17731 MANDEL LANE		<b>Transaction ID : SA11AI.16812</b>	
City SHERWOOD	State OR	Zip Code 97140	Amount of Each Receipt this Period _____ 199.99 Special General
FEC ID number of contributing federal political committee.		C	
Name of Employer Cornilles for Congress	Occupation Senior Field Director		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Election Cycle-to-Date _____ 436.98		

Full Name (Last, First, Middle Initial) <b>MICHELLE C PECK</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 16 / 2012	
Mailing Address 17731 SW MANDEL LN		<b>Transaction ID : SA11AI.17282</b>	
City SHERWOOD	State OR	Zip Code 97140	Amount of Each Receipt this Period _____ 250.00 Special General
FEC ID number of contributing federal political committee.		C	
Name of Employer BEZWECKEN	Occupation CUSTOMER SERVICE AGENT		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Election Cycle-to-Date _____ 700.00		

Full Name (Last, First, Middle Initial) <b>MICHELLE C PECK</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 22 / 2012	
Mailing Address 17731 SW MANDEL LN		<b>Transaction ID : SA11AI.16815</b>	
City SHERWOOD	State OR	Zip Code 97140	Amount of Each Receipt this Period _____ 31.00 Special General
FEC ID number of contributing federal political committee.		C	
Name of Employer BEZWECKEN	Occupation CUSTOMER SERVICE AGENT		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Election Cycle-to-Date _____ 731.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 480.99
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Anne C. Perri</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 16 / 2012	
Mailing Address 4975 SW 65th Ave.		<b>Transaction ID : SA11AI.16817</b>	
City Portland	State OR	Zip Code 97221	Amount of Each Receipt this Period _____ 250.00 Special General
FEC ID number of contributing federal political committee.		C	
Name of Employer Best Buy	Occupation Secretary/Treasurer		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Election Cycle-to-Date _____ 250.00		

Full Name (Last, First, Middle Initial) <b>B. CAROL B PETERSEN</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 24 / 2012	
Mailing Address 4485 SW TRAIL RD		<b>Transaction ID : SA11AI.16819</b>	
City TUALATIN	State OR	Zip Code 97062	Amount of Each Receipt this Period _____ 250.00 Special General
FEC ID number of contributing federal political committee.		C	
Name of Employer N/A	Occupation RETIRED		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Election Cycle-to-Date _____ 1250.00		

Full Name (Last, First, Middle Initial) <b>C. BRYCE PETERSON</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 18 / 2012	
Mailing Address 12165 SW AMES LANE		<b>Transaction ID : SA11AI.16820</b>	
City TIGARD	State OR	Zip Code 97224	Amount of Each Receipt this Period _____ 100.00 Special General
FEC ID number of contributing federal political committee.		C	
Name of Employer WASHINGTON STREET INVESTMENTS	Occupation INVESTMENT MANAGEMENT		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Election Cycle-to-Date _____ 1250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 600.00
<b>TOTAL</b> This Period (last page this line number only).....	_____



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**NANCY M PHILLIPS**

Mailing Address 15025 SW 137TH PL

City State Zip Code  
TIGARD OR 97224

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

Name of Employer Occupation  
PAC/WEST COMMUNICATIONS PUBLIC RELATIONS

Receipt For: 2012  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 25 / 2012**

**Transaction ID : SA11AI.16186**

Amount of Each Receipt this Period  
**1000.00**

Special General

**B.** Full Name (Last, First, Middle Initial)  
**SUSAN POZDENA**

Mailing Address 1711 NW ANDREW PL

City State Zip Code  
PORTLAND OR 97229

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

Name of Employer Occupation  
N/A retired

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date  
**300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 18 / 2012**

**Transaction ID : SA11AI.16844**

Amount of Each Receipt this Period  
**50.00**

Special General

**C.** Full Name (Last, First, Middle Initial)  
**Marvin Pratt**

Mailing Address 4110 Pacific Ave. #200

City State Zip Code  
Forest Grove OR 97116

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

Name of Employer Occupation  
Caring Places Management CEO

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 16 / 2012**

**Transaction ID : SA11AI.16845**

Amount of Each Receipt this Period  
**250.00**

Special General

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

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

**1300.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**George J. Puentes**

Mailing Address 4320 Croisan Ridge Way S.

City Salem State OR Zip Code 97302

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date  
 \_\_\_\_\_ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 13 / 2012

**Transaction ID : SA11AI.17286**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 150.00

Special General

**B.** Full Name (Last, First, Middle Initial)  
**DEREK J REYNOLDS**

Mailing Address 6860 SW NORSE HALL ROAD

City TUALATIN State OR Zip Code 97062

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

Name of Employer Reynolds Kennels Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date  
 \_\_\_\_\_ 550.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 23 / 2012

**Transaction ID : SA11AI.16858**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Special General

**C.** Full Name (Last, First, Middle Initial)  
**WILLIAM S RICHARDSON**

Mailing Address 10980 SW AVOCET CT

City BEAVERTON State OR Zip Code 97007

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

Name of Employer PORTLAND SPECIALTY BAKING Occupation COO

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date  
 \_\_\_\_\_ 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 16 / 2012

**Transaction ID : SA11AI.16863**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Special General

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

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

\_\_\_\_\_ 650.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Patricia J. Roberts**

Mailing Address PO Box 2406

City State Zip Code  
Gearhart OR 97138

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

Name of Employer Occupation  
Self Design Consultant/Investor

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date  
400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 18 / 2012

**Transaction ID : SA11A1.17297**

Amount of Each Receipt this Period  
250.00

Special General

**B.** Full Name (Last, First, Middle Initial)  
**Matt Roloff**

Mailing Address 22115 NW Imbrie Dr.  
Box 317

City State Zip Code  
Hillsboro OR 97124

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

Name of Employer Occupation  
Roloff Farms Owner

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date  
1750.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 20 / 2012

**Transaction ID : SA11A1.16872**

Amount of Each Receipt this Period  
500.00

Special General

**C.** Full Name (Last, First, Middle Initial)  
**KELVIN D ROMRELL**

Mailing Address 10165 SW LUSTER CT

City State Zip Code  
TUALATIN OR 97062

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

Name of Employer Occupation  
ADP Programmer

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date  
275.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 29 / 2012

**Transaction ID : SA11A1.16873**

Amount of Each Receipt this Period  
75.00

Special General

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

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

825.00

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

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

FOR LINE NUMBER: PAGE 52 OF 98  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JEAN L ROSENTHAL**

Mailing Address **711 SW BURLINGAME TER**

City **PORTLAND** State **OR** Zip Code **97239**

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

Name of Employer  
**INFORMATION REQUESTED**

Occupation  
**INFORMATION REQUESTED**

Receipt For: 2012  
 Primary     General  
 Other (specify) **S**

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 30 / 2012**

**Transaction ID : SA11A1.17303**

Amount of Each Receipt this Period  
**100.00**

Special General

**B.** Full Name (Last, First, Middle Initial)  
**JAIME J SAAVEDRA**

Mailing Address **4804 NW Bethany Blvd.  
Unit I2-234**

City **PORTLAND** State **OR** Zip Code **97229**

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

Name of Employer  
**Kryptiq**

Occupation  
**Senior Vice President**

Receipt For: 2012  
 Primary     General  
 Other (specify) **S**

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 16 / 2012**

**Transaction ID : SA11A1.16883**

Amount of Each Receipt this Period  
**250.00**

Special General

**C.** Full Name (Last, First, Middle Initial)  
**John Schanz**

Mailing Address **739 Parkes Run Lane**

City **Villanova** State **PA** Zip Code **19085**

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

Name of Employer  
**Comcast**

Occupation  
**Executive**

Receipt For: 2012  
 Primary     General  
 Other (specify) **Special-General**

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 26 / 2012**

**Transaction ID : SA11A1.16226**

Amount of Each Receipt this Period  
**1000.00**

Special General

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

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

**1350.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Christopher Schiess**

Mailing Address 27846 Green Oaks Dr.

City Eugene State OR Zip Code 97402

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify) **S**

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 13 / 2012**

**Transaction ID : SA11AI.17309**

Amount of Each Receipt this Period  
**100.00**

Special General

**B.** Full Name (Last, First, Middle Initial)  
**Steven J Sharp**

Mailing Address 3605 NW bliss rd

City Vancouver State WA Zip Code 98685

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

Name of Employer N/A Occupation Executive

Receipt For: 2012  
 Primary  General  
 Other (specify) **S**

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 26 / 2012**

**Transaction ID : SA11AI.16906**

Amount of Each Receipt this Period  
**500.00**

Special General

**C.** Full Name (Last, First, Middle Initial)  
**STEPHEN L SHEPARD**

Mailing Address PO BOX 82157

City PORTLAND State OR Zip Code 97007

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

Name of Employer M Benefit Solutions Occupation Managing Director

Receipt For: 2012  
 Primary  General  
 Other (specify) **Special-General**

Election Cycle-to-Date **4000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 24 / 2012**

**Transaction ID : SA11AI.16146**

Amount of Each Receipt this Period  
**3000.00**

Special General-Reattribution Requested

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

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

**3600.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Charmin B. Shiely**

Mailing Address 8080 SW Canyon Dr.

City Portland State OR Zip Code 97225

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

Name of Employer Schwabe Williamson & Wyatt Occupation attorney

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date  
 \_\_\_\_\_ 750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 20 / 2012

**Transaction ID : SA11AI.16909**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 100.00

Special General

**B.** Full Name (Last, First, Middle Initial)  
**MARK SHUHOLM**

Mailing Address 761 SW ASHDOWN CIR

City WEST LINN State OR Zip Code 97068

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

Name of Employer Northwest Polymers Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 16 / 2012

**Transaction ID : SA11AI.16910**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Special General

**C.** Full Name (Last, First, Middle Initial)  
**FORREST SIMMONS**

Mailing Address 11700 SW MILITARY LN

City PORTLAND State OR Zip Code 97219

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

Name of Employer N/A Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
 \_\_\_\_\_ 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 12 / 2012

**Transaction ID : SA11AI.12403**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Contribution

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

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

\_\_\_\_\_ 1350.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**David Slama**

Mailing Address 15711 SE Rivershore Dr.

City Vancouver State WA Zip Code 98638

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

Name of Employer Self Occupation Investor

Receipt For: 2012  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
 \_\_\_\_\_ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 23 / 2012

**Transaction ID : SA11AI.16171**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2500.00

Special General

**B.** Full Name (Last, First, Middle Initial)  
**Bill Smith**

Mailing Address 15 SW Colorado Ste. 1

City Bend State OR Zip Code 97702

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

Name of Employer Wm Smith Properties Occupation Real Estate

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 30 / 2012

**Transaction ID : SA11AI.17316**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

Special General

**C.** Full Name (Last, First, Middle Initial)  
**Richard F. Sohn**

Mailing Address 62 North River Dr.

City Roseburg State OR Zip Code 97470

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
 \_\_\_\_\_ 1300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 25 / 2012

**Transaction ID : SA11AI.16185**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Special General

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

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

\_\_\_\_\_ 4000.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**DEAN SORENSEN**

Mailing Address 22965 SW MIAMI PL

City TUALATIN State OR Zip Code 97062

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

Name of Employer GRAMOR DEVELOPMENT Occupation REAL ESTATE

Receipt For: 2012  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 22 / 2012

**Transaction ID : SA11A1.16144**

Amount of Each Receipt this Period  
1500.00

Special General

**B.** Full Name (Last, First, Middle Initial)  
**SUSANNE M SORENSEN**

Mailing Address 22965 SW MIAMI PL

City TUALATIN State OR Zip Code 97062

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

Name of Employer N/A Occupation HOMEMAKER

Receipt For: 2012  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 22 / 2012

**Transaction ID : SA11A1.16143**

Amount of Each Receipt this Period  
1500.00

Special General

**C.** Full Name (Last, First, Middle Initial)  
**EDGAR L STONE**

Mailing Address 4540 NW MALHUER AVE

City PORTLAND State OR Zip Code 97229

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

Name of Employer N/A Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 23 / 2012

**Transaction ID : SA11A1.16145**

Amount of Each Receipt this Period  
2500.00

Special General

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

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

5500.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**C R SWETT**

Mailing Address 2853 ROSECLIFFE PL

City LAKE OSWEGO State OR Zip Code 97034

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

Name of Employer N/A Occupation RETIRED

Receipt For: 1000  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 23 / 2012

**Transaction ID : SA11AI.16174**

Amount of Each Receipt this Period  
 1000.00

Special General

**B.** Full Name (Last, First, Middle Initial)  
**STEPHEN C. TAGMYER**

Mailing Address 5599 SW NATCHEZ ST

City TUALATIN State OR Zip Code 97062

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

Name of Employer Client First Group, Inc. Occupation CEBS

Receipt For: 2012  
 Primary  General  
 Other (specify) S

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 20 / 2012

**Transaction ID : SA11AI.16946**

Amount of Each Receipt this Period  
 250.00

Special General

**C.** Full Name (Last, First, Middle Initial)  
**ROBERT TERRY**

Mailing Address 34160 SW PEAKS VIEW DR

City HILLSBORO State OR Zip Code 97123

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

Name of Employer FISHER FARMS LLC Occupation OWNER

Receipt For: 2012  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 20 / 2012

**Transaction ID : SA11AI.16122**

Amount of Each Receipt this Period  
 2500.00

Special-General

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

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

3750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Mark D. Tiffie</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 22 / 2012	
Mailing Address 5565 NW Roanoke Ln Portland		<b>Transaction ID : SA11AI.16963</b>	
City Portland	State OR	Zip Code 97229	Amount of Each Receipt this Period _____ 31.00 Special General
FEC ID number of contributing federal political committee.		C	
Name of Employer A Cut Above Exteriors	Occupation President		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Election Cycle-to-Date _____ 531.00		

Full Name (Last, First, Middle Initial) <b>B. Christine T. Todd</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 27 / 2012	
Mailing Address 15334 SE Kensington Dr.		<b>Transaction ID : SA11AI.16207</b>	
City Clackamas	State OR	Zip Code 97015	Amount of Each Receipt this Period _____ 1000.00 Special General
FEC ID number of contributing federal political committee.		C	
Name of Employer Info Requested	Occupation Info Requested		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	Election Cycle-to-Date _____ 1000.00		

Full Name (Last, First, Middle Initial) <b>C. MARY TOOZE</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 12 / 2012	
Mailing Address 5500 SW HEWELL BLVD		<b>Transaction ID : SA11AI.16966</b>	
City PORTLAND	State OR	Zip Code 97221	Amount of Each Receipt this Period _____ 150.00 Special General
FEC ID number of contributing federal political committee.		C	
Name of Employer Retired	Occupation Retired		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Election Cycle-to-Date _____ 550.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 1181.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

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

FOR LINE NUMBER: PAGE 59 OF 98  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**E. H. Twietmeyer**

Mailing Address 123 NE 7th Ave.

City Portland State OR Zip Code 97232

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary     General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 17 / 2012

**Transaction ID : SA11AI.16085**

Amount of Each Receipt this Period  
 1000.00

Special General

**B.** Full Name (Last, First, Middle Initial)  
**CORNELL L ULLMAN**

Mailing Address 11830 PAYSON LN

City OREGON CITY State OR Zip Code 97045

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

Name of Employer N/A Occupation RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify) S

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 16 / 2012

**Transaction ID : SA11AI.16974**

Amount of Each Receipt this Period  
 50.00

Special General

**C.** Full Name (Last, First, Middle Initial)  
**ERWIN WEICHEL**

Mailing Address 2959 SW Schaeffer Rd.

City West Linn State OR Zip Code 97068

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

Name of Employer Erwin Weichel, D.M.D., M.S. Occupation Periodontist

Receipt For: 2012  
 Primary     General  
 Other (specify) S

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 28 / 2012

**Transaction ID : SA11AI.17001**

Amount of Each Receipt this Period  
 500.00

Special General

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

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

1550.00

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

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

FOR LINE NUMBER: PAGE 60 OF 98  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN M WIGHT**

Mailing Address **2122 SW 18TH AVENUE**

City **PORTLAND** State **OR** Zip Code **97201**

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

Name of Employer **N/A** Occupation **Retired**

Receipt For: 2012  
 Primary  General  
 Other (specify) **S**

Election Cycle-to-Date  
**350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 17 / 2012**

**Transaction ID : SA11AI.17012**

Amount of Each Receipt this Period  
**250.00**  
 Special General

**B.** Full Name (Last, First, Middle Initial)  
**PAUL K WILDE**

Mailing Address **4025 SW TRAIL RD**

City **TUALATIN** State **OR** Zip Code **97062**

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

Name of Employer **WEBTREDS INC** Occupation **CEO**

Receipt For: 2012  
 Primary  General  
 Other (specify) **S**

Election Cycle-to-Date  
**900.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 24 / 2012**

**Transaction ID : SA11AI.17346**

Amount of Each Receipt this Period  
**500.00**  
 Special General

**C.** Full Name (Last, First, Middle Initial)  
**GAIL WILHELMS**

Mailing Address **4353 TAM O'SHANTER WAY**

City **PORTLAND** State **OR** Zip Code **97229**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2012  
 Primary  General  
 Other (specify) **S**

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 30 / 2012**

**Transaction ID : SA11AI.17347**

Amount of Each Receipt this Period  
**250.00**  
 Special General

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

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

**1000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Scott A. Williams</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 27 / 2012	
Mailing Address 5189 Solar Heights		<b>Transaction ID : SA11AI.16228</b>	
City Eugene	State OR	Amount of Each Receipt this Period 2500.00	
Zip Code 97405		Special General	
FEC ID number of contributing federal political committee. C			
Name of Employer Hamilton Construction	Occupation Contractor		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	Election Cycle-to-Date 3500.00		

Full Name (Last, First, Middle Initial) <b>B. Pete L. Winemiller</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 26 / 2012	
Mailing Address 9624 Castle Rd.		<b>Transaction ID : SA11AI.17015</b>	
City Oklahoma City	State OK	Amount of Each Receipt this Period 250.00	
Zip Code 73162		Special General	
FEC ID number of contributing federal political committee. C			
Name of Employer Oklahoma City Thunder	Occupation Management		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) <b>C. Jeffrey M Wirth</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 30 / 2012	
Mailing Address 1 SW Columbia Street Suite 525		<b>Transaction ID : SA11AI.17020</b>	
City Portland	State OR	Amount of Each Receipt this Period 500.00	
Zip Code 97258		Special General	
FEC ID number of contributing federal political committee. C			
Name of Employer RMG Asset Management	Occupation Financial Advisor		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) S	Election Cycle-to-Date 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**CHRIS WOLCOTT**

Mailing Address 1075 W HIST COLUMBIA RIVER HWY

City TROUTDALE State OR Zip Code 97060

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2012  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
-400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 22 / 2012

**Transaction ID : SA11AI.16142**

Amount of Each Receipt this Period  
 2000.00

Special General

**B.** Full Name (Last, First, Middle Initial)  
**GUY R WOLCOTT**

Mailing Address 1075 W HIST COLUMBIA RIVER HWY

City TROUTDALE State OR Zip Code 97060

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

Name of Employer SELF Occupation BUSINESS OWNER

Receipt For: 2012  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
-2800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 22 / 2012

**Transaction ID : SA11AI.16141**

Amount of Each Receipt this Period  
 2000.00

Special General

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

4000.00

101276.11

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 98
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
ASSOCIATED GENERAL CONTRACTORS FEDERAL PAC OREGON-COLUMBIA CHAPTER

Mailing Address 9450 SW COMMERCE CIRCLE SUITE 200

City	State	Zip Code
WILSONVILLE	OR	97070

FEC ID number of contributing federal political committee. **C** C00324269

Name of Employer	Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)    Special-General

Election Cycle-to-Date  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 27 / 2012

**Transaction ID : SA11C.16219**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00  
 Special General

Full Name (Last, First, Middle Initial)  
**BUCK MCKEON FOR CONGRESS**

Mailing Address 23942 LYONS AVE #105

City	State	Zip Code
SANTA CLARITA	CA	91321

FEC ID number of contributing federal political committee. **C** C00258244

Name of Employer	Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)    Special-General

Election Cycle-to-Date  
 \_\_\_\_\_ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 24 / 2012

**Transaction ID : SA11C.16162**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2000.00  
 Special General

Full Name (Last, First, Middle Initial)  
**BUSINESS-INDUSTRY POLITICAL ACTION COMMITTEE**

Mailing Address 888 16TH STREET, NW

City	State	Zip Code
WASHINGTON	DC	20006

FEC ID number of contributing federal political committee. **C** C00001727

Name of Employer	Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)    Special-General

Election Cycle-to-Date  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 18 / 2012

**Transaction ID : SA11C.16112**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00  
 Special General

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 4000.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 98
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
CHEVRON EMPLOYEES POLITICAL ACTION COMMITTEE - CHEVRON CORPORATION

Mailing Address 6101 BOLLINGER CANYON ROAD  
ROOM 3400

City SAN RAMON State CA Zip Code 94583

FEC ID number of contributing federal political committee. **C** C00035006

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)    Special-Primary

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 23 / 2012

**Transaction ID : SA11C.16160**

Amount of Each Receipt this Period  
 2000.00

Special General

**B.** Full Name (Last, First, Middle Initial)  
CONSERVATIVE NATIONAL COMMITTEE (FKA-CONGRESSIONAL MAJORITY COMMITTEE)

Mailing Address PO BOX 101326

City ARLINGTON State VA Zip Code 22210

FEC ID number of contributing federal political committee. **C** C00139097

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)    Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 31 / 2012

**Transaction ID : SA11C.16236**

Amount of Each Receipt this Period  
 300.00

**C.** Full Name (Last, First, Middle Initial)  
DEALERS ELECTION ACTION COMMITTEE OF THE NATIONAL AUTOMOTIVE DEALERS ASSOCIATION

Mailing Address 8400 WESTPARK DRIVE

City MCLEAN State VA Zip Code 22102

FEC ID number of contributing federal political committee. **C** C00040998

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)    Special-Primary

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 24 / 2012

**Transaction ID : SA11C.16165**

Amount of Each Receipt this Period  
 5000.00

Special General

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

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

7300.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 98
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
FLIR SYSTEMS, INC. EMPLOYEES POLITICAL ACTION COMMITTEE (FLIRPAC)

Mailing Address 27700A SW PARKWAY AVE

City WILSONVILLE State OR Zip Code 97070

FEC ID number of contributing federal political committee. **C** C00411454

Name of Employer Occupation

Receipt For: 2500  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 14 / 2012

**Transaction ID : SA11C.16076**

Amount of Each Receipt this Period  
2500.00

Special General

**B.** Full Name (Last, First, Middle Initial)  
FREEDOM PROJECT; THE

Mailing Address 320 1ST STREET SE

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00305805

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 18 / 2012

**Transaction ID : SA11C.16115**

Amount of Each Receipt this Period  
5000.00

Special General

**C.** Full Name (Last, First, Middle Initial)  
FRIENDS OF JOHN BOEHNER

Mailing Address 7908 CINCINNATI DAYTON RD  
STE 1-2

City WEST CHESTER State OH Zip Code 45069

FEC ID number of contributing federal political committee. **C** C00237198

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 18 / 2012

**Transaction ID : SA11C.16114**

Amount of Each Receipt this Period  
2000.00

Special General

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

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

9500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 98
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF CONVENIENCE STORES POLITICAL ACTION COMMITTEE**

Mailing Address 1600 DUKE STREET

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C C00126763**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 23 / 2012

**Transaction ID : SA11C.16156**

Amount of Each Receipt this Period  
 2000.00

Special General

**B.** Full Name (Last, First, Middle Initial)  
**NEW PIONEERS PAC**

Mailing Address 228 S. WASHINGTON ST.  
SUITE 115

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C C00459123**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 18 / 2012

**Transaction ID : SA11C.16116**

Amount of Each Receipt this Period  
 5000.00

Special General

**C.** Full Name (Last, First, Middle Initial)  
**NW SUSTAINABLE RESOURCE POLITICAL ACTION COMMITTEE**

Mailing Address 920 SW 6TH AVE  
STE 1250

City PORTLAND State OR Zip Code 97204

FEC ID number of contributing federal political committee. **C C00455287**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) Special-Primary

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 22 / 2012

**Transaction ID : SA11C.16155**

Amount of Each Receipt this Period  
 2500.00

Special General

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

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

9500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 98
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**REPUBLICAN MAIN STREET PAC**

Mailing Address 1220 L STREET NW  
SUITE 100-263

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00165159

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 27 / 2012

**Transaction ID : SA11C.16216**

Amount of Each Receipt this Period  
2500.00

Special General

**B.** Full Name (Last, First, Middle Initial)  
**WELLS FARGO AND COMPANY EMPLOYEE PAC (AKA WELLS FARGO EMPLOYEE PAC)**

Mailing Address SIXTH AND MARQUETTE  
MAC N9305-084

City MINNEAPOLIS State MN Zip Code 55479

FEC ID number of contributing federal political committee. **C** C00034595

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) Special-General

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 20 / 2012

**Transaction ID : SA11C.16130**

Amount of Each Receipt this Period  
2500.00

Special General

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

5000.00

35300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 68 OF 98	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN EXPRESS</b>		Date of Disbursement MM / DD / YYYY 02 / 16 / 2012
Mailing Address PO BOX 650448		Amount of Each Disbursement this Period 635.87 <b>Transaction ID : SB17.17514</b>
City DALLAS	State TX	
Zip Code 75265	Purpose of Disbursement Credit Card Payment-See Memos	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input type="checkbox"/> General	State: District:
<input checked="" type="checkbox"/> Other (specify) Special-General		

Full Name (Last, First, Middle Initial) <b>B. ENTERPRISE</b>		Date of Disbursement MM / DD / YYYY 02 / 16 / 2012
Mailing Address 600 CORPORATE PARK DRIVE		Amount of Each Disbursement this Period 635.87 <b>Transaction ID : SB17.17514.0</b> <b>[MEMO ITEM]</b>
City ST LOUIS	State MO	
Zip Code 63105	Purpose of Disbursement Travel-Auto Rental	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input type="checkbox"/> General	State: District:
<input checked="" type="checkbox"/> Other (specify) Special-General		

Full Name (Last, First, Middle Initial) <b>c. Brittany Baker-Link</b>		Date of Disbursement MM / DD / YYYY 01 / 13 / 2012
Mailing Address 3610 SE Harrison St., #3		Amount of Each Disbursement this Period 603.31 <b>Transaction ID : SB17.17388</b>
City Portland	State OR	
Zip Code 97214	Purpose of Disbursement Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input type="checkbox"/> General	State: District:
<input checked="" type="checkbox"/> Other (specify) Special-General		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1239.18
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 98			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Brittany Baker-Link</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2012	
Mailing Address 3610 SE Harrison St., #3			Amount of Each Disbursement this Period 618.71	
City Portland	State OR	Zip Code 97214	Transaction ID : SB17.17474	
Purpose of Disbursement Travel-Mileage		Category/ Type 002		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Brittany Baker-Link</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2012	
Mailing Address 3610 SE Harrison St., #3			Amount of Each Disbursement this Period 618.71	
City Portland	State OR	Zip Code 97214	Transaction ID : SB17.17486	
Purpose of Disbursement Salary		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. BANK OF AMERICA</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2012	
Mailing Address 100 NORTH TRYON STREET			Amount of Each Disbursement this Period 12.00	
City CHARLOTTE	State NC	Zip Code 28255	Transaction ID : SB17.17409	
Purpose of Disbursement Bank Fee		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	642.32
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 98			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. BANK OF AMERICA</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2012
Mailing Address 100 NORTH TRYON STREET		Amount of Each Disbursement this Period 12.00 <b>Transaction ID : SB17.17420</b>
City CHARLOTTE State NC Zip Code 28255	Purpose of Disbursement Bank Fee 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. BANK OF AMERICA</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2012
Mailing Address 100 NORTH TRYON STREET		Amount of Each Disbursement this Period 25.00 <b>Transaction ID : SB17.17424</b>
City CHARLOTTE State NC Zip Code 28255	Purpose of Disbursement Bank Fee 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. BANK OF AMERICA</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2012
Mailing Address 100 NORTH TRYON STREET		Amount of Each Disbursement this Period 12.00 <b>Transaction ID : SB17.17426</b>
City CHARLOTTE State NC Zip Code 28255	Purpose of Disbursement Bank Fee 001 Category/Type	
Candidate Name	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	49.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 98			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. BANK OF AMERICA</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2012
Mailing Address 100 NORTH TRYON STREET		Amount of Each Disbursement this Period 12.00 <b>Transaction ID : SB17.17437</b>
City CHARLOTTE State NC Zip Code 28255	Purpose of Disbursement Bank Fee 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. BANK OF AMERICA</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2012
Mailing Address 100 NORTH TRYON STREET		Amount of Each Disbursement this Period 12.00 <b>Transaction ID : SB17.17439</b>
City CHARLOTTE State NC Zip Code 28255	Purpose of Disbursement Bank Fee 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. BANK OF AMERICA</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2012
Mailing Address 100 NORTH TRYON STREET		Amount of Each Disbursement this Period 25.00 <b>Transaction ID : SB17.17443</b>
City CHARLOTTE State NC Zip Code 28255	Purpose of Disbursement Bank Fee 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	49.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 98			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. BANK OF AMERICA</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2012
Mailing Address 100 NORTH TRYON STREET		Amount of Each Disbursement this Period 37.00
City CHARLOTTE State NC Zip Code 28255	Purpose of Disbursement Bank Fee 001 Category/Type	
Candidate Name		<b>Transaction ID : SB17.17447</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	State: District:	

Full Name (Last, First, Middle Initial) <b>B. BANK OF AMERICA</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2012
Mailing Address 100 NORTH TRYON STREET		Amount of Each Disbursement this Period 12.00
City CHARLOTTE State NC Zip Code 28255	Purpose of Disbursement Bank Fee 001 Category/Type	
Candidate Name		<b>Transaction ID : SB17.17451</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	State: District:	

Full Name (Last, First, Middle Initial) <b>C. BANK OF AMERICA</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2012
Mailing Address 100 NORTH TRYON STREET		Amount of Each Disbursement this Period 12.00
City CHARLOTTE State NC Zip Code 28255	Purpose of Disbursement Bank Fee 001 Category/Type	
Candidate Name		<b>Transaction ID : SB17.17455</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	61.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 98			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. BANK OF AMERICA</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2012
Mailing Address 100 NORTH TRYON STREET		Amount of Each Disbursement this Period 12.00 <b>Transaction ID : SB17.17482</b>
City CHARLOTTE State NC Zip Code 28255	Purpose of Disbursement Bank Fee 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. BANK OF AMERICA</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2012
Mailing Address 100 NORTH TRYON STREET		Amount of Each Disbursement this Period 12.00 <b>Transaction ID : SB17.17500</b>
City CHARLOTTE State NC Zip Code 28255	Purpose of Disbursement Bank Fee 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MICHAEL CAREW</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2012
Mailing Address 2127 NW IRVING ST. UNIT 201		Amount of Each Disbursement this Period 1601.89 <b>Transaction ID : SB17.17390</b>
City PORTLAND State OR Zip Code 97210	Purpose of Disbursement Salary 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1625.89
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 98			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MICHAEL CAREW</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2012	
Mailing Address 2127 NW IRVING ST. UNIT 201			Amount of Each Disbursement this Period 1645.65	
City PORTLAND	State OR	Zip Code 97210	Transaction ID : SB17.17488	
Purpose of Disbursement Salary		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>B. COMCAST</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2012	
Mailing Address PO BOX 34227			Amount of Each Disbursement this Period 310.21	
City SEATTLE	State WA	Zip Code 98124	Transaction ID : SB17.17403	
Purpose of Disbursement Utilites		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>c. Devin Conn</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2012	
Mailing Address 100 NE 162nd Ave.			Amount of Each Disbursement this Period 203.79	
City Portland	State OR	Zip Code 97230	Transaction ID : SB17.17392	
Purpose of Disbursement Salary		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General			
State: _____	District: _____			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2159.65
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 98		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Devin Conn</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2012
Mailing Address 100 NE 162nd Ave.		Amount of Each Disbursement this Period 226.00 <b>Transaction ID : SB17.17431</b>
City Portland	State OR	
Zip Code 97230	Purpose of Disbursement Travel-Mileage	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General

Full Name (Last, First, Middle Initial) <b>B. Devin Conn</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2012
Mailing Address 100 NE 162nd Ave.		Amount of Each Disbursement this Period 16.50 <b>Transaction ID : SB17.17476</b>
City Portland	State OR	
Zip Code 97230	Purpose of Disbursement Travel-Mileage	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General

Full Name (Last, First, Middle Initial) <b>C. Devin Conn</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2012
Mailing Address 100 NE 162nd Ave.		Amount of Each Disbursement this Period 208.79 <b>Transaction ID : SB17.17490</b>
City Portland	State OR	
Zip Code 97230	Purpose of Disbursement Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	451.29
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 98			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. ROBERT CORNILLES</b>		Date of Disbursement MM / DD / YYYY 02 / 07 / 2012
Mailing Address PO BOX 2272		Amount of Each Disbursement this Period 2269.19 <b>Transaction ID : SB17.17510</b>
City TUALATIN State OR Zip Code 97062	Purpose of Disbursement Travel-no vendor item required Candidate Name Category/Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 01	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	

Full Name (Last, First, Middle Initial) <b>B. Engelstad Consulting LLC</b>		Date of Disbursement MM / DD / YYYY 01 / 30 / 2012
Mailing Address PO Box 70342		Amount of Each Disbursement this Period 740.00 <b>Transaction ID : SB17.17468</b>
City Eugene State OR Zip Code 97401	Purpose of Disbursement Web Services Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	

Full Name (Last, First, Middle Initial) <b>c. Erin Casey Consulting</b>		Date of Disbursement MM / DD / YYYY 02 / 06 / 2012
Mailing Address 514 G St., SE		Amount of Each Disbursement this Period 2524.81 <b>Transaction ID : SB17.17506</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement Fundraising Consulting Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5534.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 77 OF 98	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Erin Casey Consulting</b>		Date of Disbursement MM / DD / YYYY 02 / 16 / 2012
Mailing Address 514 G St., SE		Amount of Each Disbursement this Period 2950.00 <b>Transaction ID : SB17.17512</b>
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Fundraising Consulting	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input type="checkbox"/> General	State: District:
<input checked="" type="checkbox"/> Other (specify) Special-General		

Full Name (Last, First, Middle Initial) <b>B. Front Porch Strategies LLC</b>		Date of Disbursement MM / DD / YYYY 01 / 20 / 2012
Mailing Address 243 N. 5th St., Ste. 330		Amount of Each Disbursement this Period 5016.51 <b>Transaction ID : SB17.17428</b>
City Columbus	State OH	
Zip Code 43215	Purpose of Disbursement Teleforum	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input type="checkbox"/> General	State: District:
<input checked="" type="checkbox"/> Other (specify) Special-General		

Full Name (Last, First, Middle Initial) <b>c. Fundly</b>		Date of Disbursement MM / DD / YYYY 02 / 20 / 2012
Mailing Address 70 Broadway Street		Amount of Each Disbursement this Period 4219.71 <b>Transaction ID : SB17.17518</b>
City Westford	State MA	
Zip Code 01886	Purpose of Disbursement Online Processing Fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input type="checkbox"/> General	State: District:
<input checked="" type="checkbox"/> Other (specify) Special-General		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	12186.22
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 78 OF 98	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Tiffany Grabenhorst</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2012
Mailing Address PO BOX 13470		Amount of Each Disbursement this Period 4500.00 <b>Transaction ID : SB17.17407</b>
City PORTLAND	State OR	
Zip Code 97232	Purpose of Disbursement Fundraising Consulting	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input type="checkbox"/> General	State: District:
<input checked="" type="checkbox"/> Other (specify) Special-General		

Full Name (Last, First, Middle Initial) <b>B. Tiffany Grabenhorst</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2012
Mailing Address PO BOX 13470		Amount of Each Disbursement this Period 4500.00 <b>Transaction ID : SB17.17498</b>
City PORTLAND	State OR	
Zip Code 97232	Purpose of Disbursement Fundraising Consulting	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input type="checkbox"/> General	State: District:
<input checked="" type="checkbox"/> Other (specify) Special-General		

Full Name (Last, First, Middle Initial) <b>c. Huckaby Davis Lisker</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2012
Mailing Address 228 S Washington Street Suite 115		Amount of Each Disbursement this Period 1081.35 <b>Transaction ID : SB17.17466</b>
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Compliance Consulting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input type="checkbox"/> General	State: District:
<input checked="" type="checkbox"/> Other (specify) Special-General		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10081.35
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 98			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Kenneth Jones</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2012
Mailing Address 8150 SW Barnes Rd., #R205		Amount of Each Disbursement this Period 669.18 <b>Transaction ID : SB17.17394</b>
City Portland	State OR	
Zip Code 97225	Purpose of Disbursement Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input type="checkbox"/> General	State: District:
<input checked="" type="checkbox"/> Other (specify) Special-General		

Full Name (Last, First, Middle Initial) <b>B. Kenneth Jones</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2012
Mailing Address 8150 SW Barnes Rd., #R205		Amount of Each Disbursement this Period 91.63 <b>Transaction ID : SB17.17435</b>
City Portland	State OR	
Zip Code 97225	Purpose of Disbursement Travel-Mileage	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input type="checkbox"/> General	State: District:
<input checked="" type="checkbox"/> Other (specify) Special-General		

Full Name (Last, First, Middle Initial) <b>C. Kenneth Jones</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2012
Mailing Address 8150 SW Barnes Rd., #R205		Amount of Each Disbursement this Period 25.91 <b>Transaction ID : SB17.17472</b>
City Portland	State OR	
Zip Code 97225	Purpose of Disbursement Travel-Mileage	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input type="checkbox"/> General	State: District:
<input checked="" type="checkbox"/> Other (specify) Special-General		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	786.72
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 98			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Kenneth Jones</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2012
Mailing Address 8150 SW Barnes Rd., #R205		Amount of Each Disbursement this Period 684.71 <b>Transaction ID : SB17.17492</b>
City Portland	State OR	
Zip Code 97225	Purpose of Disbursement Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input type="checkbox"/> General	State: District:
<input checked="" type="checkbox"/> Other (specify) Special-General		

Full Name (Last, First, Middle Initial) <b>B. Lyons Films LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2012
Mailing Address 16869 SW 65th Ave., #444		Amount of Each Disbursement this Period 5644.00 <b>Transaction ID : SB17.17417</b>
City Lake Oswego	State OR	
Zip Code 97035	Purpose of Disbursement Media Production	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input type="checkbox"/> General	State: District:
<input checked="" type="checkbox"/> Other (specify) Special-General		

Full Name (Last, First, Middle Initial) <b>C. Mastermind Video Productions</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2012
Mailing Address 13759 SW Benchview Terrace		Amount of Each Disbursement this Period 600.00 <b>Transaction ID : SB17.17400</b>
City Tigard	State OR	
Zip Code 97223	Purpose of Disbursement Media Production	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input type="checkbox"/> General	State: District:
<input checked="" type="checkbox"/> Other (specify) Special-General		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6928.71
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 81 OF 98	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Robert J Miller</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2012
Mailing Address 1130 SW King Ave.		Amount of Each Disbursement this Period 629.12 <b>Transaction ID : SB17.17599</b>
City Portland	State OR	
Zip Code 97205	Purpose of Disbursement In-kind - Event Catering	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input type="checkbox"/> General	State: District:
<input checked="" type="checkbox"/> Other (specify) Special-General		

Full Name (Last, First, Middle Initial) <b>B. MOORE INFORMATION, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2012
Mailing Address 2130 SW JEFFERSON ST., STE. 200		Amount of Each Disbursement this Period 5950.00 <b>Transaction ID : SB17.17413</b>
City PORTLAND	State OR	
Zip Code 97201	Purpose of Disbursement Polling	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input type="checkbox"/> General	State: District:
<input checked="" type="checkbox"/> Other (specify) Special-General		

Full Name (Last, First, Middle Initial) <b>c. O'Donnell Clark &amp; Crew LLP</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2012
Mailing Address 1650 NW Naito Pkwy, #303		Amount of Each Disbursement this Period 2385.00 <b>Transaction ID : SB17.17463</b>
City Portland	State OR	
Zip Code 97209	Purpose of Disbursement Legal Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input type="checkbox"/> General	State: District:
<input checked="" type="checkbox"/> Other (specify) Special-General		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8964.12
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 98			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Catie Osborne</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2012
Mailing Address 4085 NW 153rd Terrace		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17.17461</b>
City Portland	State OR	
Zip Code 97229	Purpose of Disbursement Administrative Consulting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input checked="" type="checkbox"/> Other (specify) Special-General	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Catie Osborne</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2012
Mailing Address 4085 NW 153rd Terrace		Amount of Each Disbursement this Period 24.98 <b>Transaction ID : SB17.17478</b>
City Portland	State OR	
Zip Code 97229	Purpose of Disbursement Office Supplies-Paper	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input checked="" type="checkbox"/> Other (specify) Special-General	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Mary Ann Ostrom</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2012
Mailing Address 3253 Fernside Blvd		Amount of Each Disbursement this Period 5000.00 <b>Transaction ID : SB17.17398</b>
City Alameda	State CA	
Zip Code 94501	Purpose of Disbursement Strategic Consulting	Category/ Type 001
Candidate Name	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6024.98
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 83 OF 98	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Mary Ann Ostrom</b>		Date of Disbursement MM / DD / YYYY 01 / 30 / 2012
Mailing Address 3253 Fernside Blvd		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : SB17.17470</b>
City Alameda State CA Zip Code 94501	Purpose of Disbursement Strategic Consulting Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Mary Ann Ostrom</b>		Date of Disbursement MM / DD / YYYY 02 / 02 / 2012
Mailing Address 3253 Fernside Blvd		Amount of Each Disbursement this Period 590.60 <b>Transaction ID : SB17.17504</b>
City Alameda State CA Zip Code 94501	Purpose of Disbursement Cell Phone Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Pacific Office Automation</b>		Date of Disbursement MM / DD / YYYY 01 / 18 / 2012
Mailing Address 14747 NW Greenbrier Pkwy., Suite A		Amount of Each Disbursement this Period 125.00 <b>Transaction ID : SB17.17411</b>
City Beaverton State OR Zip Code 97006	Purpose of Disbursement Copier Rental Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3215.60
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 98		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2012
Mailing Address 3060 Williams Dr., Ste. 200		Amount of Each Disbursement this Period 182.89 <b>Transaction ID : SB17.17384</b>
City Fairfax	State VA	
Zip Code 22031	Purpose of Disbursement Payroll Service	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input checked="" type="checkbox"/> Other (specify) Special-General	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2012
Mailing Address 3060 Williams Dr., Ste. 200		Amount of Each Disbursement this Period 1648.70 <b>Transaction ID : SB17.17386</b>
City Fairfax	State VA	
Zip Code 22031	Purpose of Disbursement Payroll Taxes	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input checked="" type="checkbox"/> Other (specify) Special-General	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2012
Mailing Address 3060 Williams Dr., Ste. 200		Amount of Each Disbursement this Period 74.64 <b>Transaction ID : SB17.17484</b>
City Fairfax	State VA	
Zip Code 22031	Purpose of Disbursement Payroll Service	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input checked="" type="checkbox"/> Other (specify) Special-General	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1906.23
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 98			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2012
Mailing Address 3060 Williams Dr., Ste. 200		Amount of Each Disbursement this Period 1545.46
City Fairfax	State VA	
Zip Code 22031	Purpose of Disbursement Payroll Taxes	<b>Transaction ID : SB17.17496</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. DAN PECK</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2012
Mailing Address 17731 MANDEL LANE		Amount of Each Disbursement this Period 919.19
City SHERWOOD	State OR	
Zip Code 97140	Purpose of Disbursement Salary	<b>Transaction ID : SB17.17396</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. DAN PECK</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2012
Mailing Address 17731 MANDEL LANE		Amount of Each Disbursement this Period 942.74
City SHERWOOD	State OR	
Zip Code 97140	Purpose of Disbursement Salary	<b>Transaction ID : SB17.17494</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3407.39
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 98			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Pinnacle Direct, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2012
Mailing Address 15260 113th St. N Stillwater		Amount of Each Disbursement this Period 5851.60 <b>Transaction ID : SB17.17380</b>
City Stillwater	State MN	
Zip Code 55082	Purpose of Disbursement Direct Mail Production	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input checked="" type="checkbox"/> Other (specify) Special-General	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Pinnacle Direct, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2012
Mailing Address 15260 113th St. N Stillwater		Amount of Each Disbursement this Period 4612.38 <b>Transaction ID : SB17.17415</b>
City Stillwater	State MN	
Zip Code 55082	Purpose of Disbursement Direct Mail Production	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input checked="" type="checkbox"/> Other (specify) Special-General	State: District:	

Full Name (Last, First, Middle Initial) <b>c. SRCP Media</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2012
Mailing Address 201 N Union Street Ste 200		Amount of Each Disbursement this Period 29653.23 <b>Transaction ID : SB17.17378</b>
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Media Buy	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input checked="" type="checkbox"/> Other (specify) Special-General	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	40117.21
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 98			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. SRCP Media</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2012
Mailing Address 201 N Union Street Ste 200		Amount of Each Disbursement this Period 11574.00 <b>Transaction ID : SB17.17405</b>
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Media Buy	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input checked="" type="checkbox"/> Other (specify) Special-General	State: District:	

Full Name (Last, First, Middle Initial) <b>B. SRCP Media</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2012
Mailing Address 201 N Union Street Ste 200		Amount of Each Disbursement this Period 92000.00 <b>Transaction ID : SB17.17422</b>
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Media Buy	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input checked="" type="checkbox"/> Other (specify) Special-General	State: District:	

Full Name (Last, First, Middle Initial) <b>c. SRCP Media</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2012
Mailing Address 201 N Union Street Ste 200		Amount of Each Disbursement this Period 20000.00 <b>Transaction ID : SB17.17441</b>
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Media Buy	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input checked="" type="checkbox"/> Other (specify) Special-General	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	123574.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 98		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. SRCP Media</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2012
Mailing Address 201 N Union Street Ste 200		Amount of Each Disbursement this Period 11449.00 <b>Transaction ID : SB17.17445</b>
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Media Buy	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input checked="" type="checkbox"/> Other (specify) Special-General	State: District:	

Full Name (Last, First, Middle Initial) <b>B. SRCP Media</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2012
Mailing Address 201 N Union Street Ste 200		Amount of Each Disbursement this Period 25235.94 <b>Transaction ID : SB17.17453</b>
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Media Buy	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input checked="" type="checkbox"/> Other (specify) Special-General	State: District:	

Full Name (Last, First, Middle Initial) <b>c. SRCP Media</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2012
Mailing Address 201 N Union Street Ste 200		Amount of Each Disbursement this Period 3500.00 <b>Transaction ID : SB17.17459</b>
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Media Buy	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input checked="" type="checkbox"/> Other (specify) Special-General	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	40184.94
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 98			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. US BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2012
Mailing Address PO BOX 790408		Amount of Each Disbursement this Period 4047.59
City ST LOUIS	State MO Zip Code 63179	
Purpose of Disbursement Credit Card Payment-See memos	Category/Type 001	<b>Transaction ID : SB17.17382</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Home Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2012
Mailing Address 4401 Southwest 110th Ave		Amount of Each Disbursement this Period 9.96
City Beaverton	State OR Zip Code 97005	
Purpose of Disbursement Office Supplies	Category/Type 001	<b>Transaction ID : SB17.17382.0</b> <b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. FRED-MEYER</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2012
Mailing Address 3800 SE 22ND AVE		Amount of Each Disbursement this Period 251.64
City PORTLAND	State OR Zip Code 97202	
Purpose of Disbursement Office Supplies/Postage	Category/Type 001	<b>Transaction ID : SB17.17382.1</b> <b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4047.59
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 98			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. FEDEX KINKOS</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2012
Mailing Address 8707 SW TUALATIN-SHERWOOD RD		Amount of Each Disbursement this Period 435.85
City TUALATIN State OR Zip Code 97062	Purpose of Disbursement Printing 001 Category/Type	
Candidate Name		Transaction ID : SB17.17382.2 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	

Full Name (Last, First, Middle Initial) <b>B. OHANA PARTY RENTAL</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2012
Mailing Address 9540 SW 125TH AVE		Amount of Each Disbursement this Period 155.25
City BEAVERTON State OR Zip Code 97005	Purpose of Disbursement Platform Rental 001 Category/Type	
Candidate Name		Transaction ID : SB17.17382.3 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	

Full Name (Last, First, Middle Initial) <b>C. OFFICE DEPOT</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2012
Mailing Address 6600 N MILITARY TRAIL		Amount of Each Disbursement this Period 59.13
City BOCA RATON State FL Zip Code 33496	Purpose of Disbursement Office Supplies 001 Category/Type	
Candidate Name		Transaction ID : SB17.17382.4 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 98			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Vesta Cricket</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2012		
Mailing Address 3180 SW Cedar Hills Blvd.			Amount of Each Disbursement this Period 300.00		
City Beaverton	State OR	Zip Code 97005	Transaction ID : SB17.17382.6		
Purpose of Disbursement Telephones		Category/ Type 001	[MEMO ITEM]		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>B. BEST BUY</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2012		
Mailing Address 7601 PENN AVE S			Amount of Each Disbursement this Period 34.99		
City RICHFIELD	State MN	Zip Code 55423	Transaction ID : SB17.17382.9		
Purpose of Disbursement Office Supplies		Category/ Type 001	[MEMO ITEM]		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>C. CONSTANT CONTACT</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2012		
Mailing Address 1601 TRAPELO RD			Amount of Each Disbursement this Period 75.00		
City WALTHAM	State MA	Zip Code 02451	Transaction ID : SB17.17382.11		
Purpose of Disbursement Email Service		Category/ Type 001	[MEMO ITEM]		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General				
State: _____	District: _____				

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 98			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. TARGET</b>		Date of Disbursement MM / DD / YYYY 01 / 12 / 2012
Mailing Address 1000 NICOLLET MALL		Amount of Each Disbursement this Period 94.81
City MINNEAPOLIS	State MN	
Zip Code 55403	Purpose of Disbursement Office Supplies	Transaction ID : SB17.17382.12
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. SECRETARY OF STATE OREGON</b>		Date of Disbursement MM / DD / YYYY 01 / 12 / 2012
Mailing Address 136 STATE CAPITOL		Amount of Each Disbursement this Period 2500.00
City SALEM	State OR	
Zip Code 97301	Purpose of Disbursement Filing Fee	Transaction ID : SB17.17382.13
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. VONAGE</b>		Date of Disbursement MM / DD / YYYY 01 / 12 / 2012
Mailing Address 23 MAIN STREET		Amount of Each Disbursement this Period 34.64
City HOLMDEL	State NJ	
Zip Code 07733	Purpose of Disbursement Telephones	Transaction ID : SB17.17382.14
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 98			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. US BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2012
Mailing Address PO BOX 790408		Amount of Each Disbursement this Period 3314.76
City ST LOUIS	State MO Zip Code 63179	
Purpose of Disbursement Credit Card Payment-See Memos	Category/Type 001	<b>Transaction ID : SB17.17457</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. FEDEX KINKOS</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2012
Mailing Address 8707 SW TUALATIN-SHERWOOD RD		Amount of Each Disbursement this Period 196.96
City TUALATIN	State OR Zip Code 97062	
Purpose of Disbursement Printing	Category/Type 001	<b>Transaction ID : SB17.17457.0</b> <b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. FRED-MEYER</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2012
Mailing Address 3800 SE 22ND AVE		Amount of Each Disbursement this Period 578.46
City PORTLAND	State OR Zip Code 97202	
Purpose of Disbursement Postage	Category/Type 001	<b>Transaction ID : SB17.17457.1</b> <b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3314.76
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 98			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Airtel Group</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2012
Mailing Address PO Box 11181		Amount of Each Disbursement this Period 1031.99
City Chattanooga	State TN	
Zip Code 37401	Purpose of Disbursement Telephone	Transaction ID : SB17.17457.4 <b>[MEMO ITEM]</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CONSTANT CONTACT</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2012
Mailing Address 1601 TRAPELO RD		Amount of Each Disbursement this Period 75.00
City WALTHAM	State MA	
Zip Code 02451	Purpose of Disbursement Email Service	Transaction ID : SB17.17457.6 <b>[MEMO ITEM]</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. VONAGE</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2012
Mailing Address 23 MAIN STREET		Amount of Each Disbursement this Period 35.71
City HOLMDEL	State NJ	
Zip Code 07733	Purpose of Disbursement Telephone	Transaction ID : SB17.17457.9 <b>[MEMO ITEM]</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 98			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. TARGET</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2012
Mailing Address 1000 NICOLLET MALL		Amount of Each Disbursement this Period 11.03
City MINNEAPOLIS	State MN	
Zip Code 55403	Purpose of Disbursement Office Supplies	Transaction ID : SB17.17457.10
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2012
Mailing Address 19190 SW 90TH		Amount of Each Disbursement this Period 65.82
City TUALATIN	State OR	
Zip Code 97062	Purpose of Disbursement Postage	Transaction ID : SB17.17457.13
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. World Forestry Center</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2012
Mailing Address 4033 SW Canyon Rd		Amount of Each Disbursement this Period 1000.00
City Portland	State OR	
Zip Code 97221	Purpose of Disbursement Election Night Rentals	Transaction ID : SB17.17457.14
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 98			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. US BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2012
Mailing Address PO BOX 790408		Amount of Each Disbursement this Period 14935.25 <b>Transaction ID : SB17.17480</b>
City ST LOUIS	State MO Zip Code 63179	
Purpose of Disbursement Credit Card Payment - See memos	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Front Porch Strategies LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2012
Mailing Address 243 N. 5th St., Ste. 330		Amount of Each Disbursement this Period 14935.25 <b>Transaction ID : SB17.17480.0</b> <b>[MEMO ITEM]</b>
City Columbus	State OH Zip Code 43215	
Purpose of Disbursement Telemarketing	Category/Type 004	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. US BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2012
Mailing Address PO BOX 790408		Amount of Each Disbursement this Period 17937.81 <b>Transaction ID : SB17.17516</b>
City ST LOUIS	State MO Zip Code 63179	
Purpose of Disbursement Credit Card Payment - See Memos	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	32873.06
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 98			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Front Porch Strategies LLC</b>		Date of Disbursement
Mailing Address 243 N. 5th St., Ste. 330		M M / D D / Y Y Y Y 02 / 17 / 2012
City Columbus	State OH	Zip Code 43215
Purpose of Disbursement Telemarketing	Amount of Each Disbursement this Period 17937.81	
Candidate Name	Transaction ID : SB17.17516.0	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012	[MEMO ITEM]
State: District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
Category/Type 004		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement
Mailing Address		M M / D D / Y Y Y Y
City	State	Zip Code
Purpose of Disbursement	Amount of Each Disbursement this Period	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	
State: District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement
Mailing Address		M M / D D / Y Y Y Y
City	State	Zip Code
Purpose of Disbursement	Amount of Each Disbursement this Period	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	
State: District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	309424.21

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 98			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**CORNILLES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MARILYN J MCIVER</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2012
Mailing Address 1265 SW DAVENPORT ST		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB20A.17449</b>
City PORTLAND	State OR	
Zip Code 97201		Category/ Type 010
Purpose of Disbursement Refund		
Candidate Name		Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code		Category/ Type
Purpose of Disbursement		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code		Category/ Type
Purpose of Disbursement		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	500.00
<b>TOTAL</b> This Period (last page this line number only).....	500.00