

# FEC FORM 3

## REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

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

Walden For Congress

ADDRESS (number and street) PO Box 1091

Check if different than previously reported. (ACC) Hood River OR 97031 0037

2. **FEC IDENTIFICATION NUMBER** C00333427 **CITY** **STATE** **ZIP CODE** STATE DISTRICT  
 3. IS THIS REPORT  NEW (N) OR  AMENDED (A) OR 02

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 \_\_\_\_\_ in the State of \_\_\_\_\_

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

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

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 01 01 2008 through 03 31 2008

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 Marta Simons

Signature of Treasurer Electronically Filed by Marta Simons Date 05 08 2008

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

Office Use Only								
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**FEC FORM 3**  
(Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

Walden For Congress

Report Covering the Period:

From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	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)).....	143494.72	873129.45
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	400.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	143494.72	872729.45
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	67608.45	328015.79
(b) Total Offsets to Operating Expenditures (from Line 14).....	30.93	36817.12
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	67577.52	291198.67
8. Cash on Hand at Close of Reporting Period (from Line 27).....	970835.01	
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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name  
Walden For Congress

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	8

**I. RECEIPTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than  
Political Committees

(i) Itemized (use Schedule A).....

53729.72

388845.76

(ii) Unitemized.....

15015.00

71376.00

(iii) TOTAL of contributions

68744.72

460221.76

from individuals..... ▶

0.00

1776.00

(b) Political Party Committees.....

(c) Other Political Committees  
(such as PACS).....

74750.00

411131.69

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS  
(other than loans)  
(add Lines 11(a)(iii), (b), (c), and (d))

143494.72

873129.45

12. TRANSFERS FROM OTHER  
AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS

(a) Made or Guaranteed by the  
Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS  
(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING  
EXPENDITURES  
(Refunds, Rebates, etc.).....

30.93

36817.12

15. OTHER RECEIPTS  
(Dividends, Interest, etc.).....

4274.34

15297.89

16. TOTAL RECEIPTS (add Lines  
11(e), 12, 13(c), 14, and 15)  
(Carry Total to Line 24, page 4)..... ▶

147799.99

925244.46

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES.....	67608.45	328015.79
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	400.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	400.00
21. OTHER DISBURSEMENTS.....	1000.00	61000.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	68608.45	389415.79

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	891643.47
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	147799.99
25. SUBTOTAL (add Line 23 and Line 24).....	1039443.46
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	68608.45
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	970835.01

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 90  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 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)  
Walden For Congress

**A.**

Full Name (Last, First, Middle Initial) Yong Choe		Date of Receipt MM / DD / YYYY 01 / 02 / 2008
Mailing Address 1001 L Street NW Apt. 610		Transaction ID: A-C22533
City Washington	State Zip Code DC 20001-6308	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Nat'l Assn of Chain Drug Stor	Occupation government relations	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 400.00	

**B.**

Full Name (Last, First, Middle Initial) Allan Henderson		Date of Receipt MM / DD / YYYY 01 / 09 / 2008
Mailing Address 3840 Belmont Drive		Transaction ID: A-C22552
City Hood River	State Zip Code OR 97031-7704	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Retired	Occupation Physician	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

**C.**

Full Name (Last, First, Middle Initial) Richard F. Sohn		Date of Receipt MM / DD / YYYY 01 / 11 / 2008
Mailing Address 62 N River Drive		Transaction ID: A-C22560
City Roseburg	State Zip Code OR 97470-9473	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1100.00
Name of Employer Lone Rock Timber Co	Occupation forester	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2100.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1900.00
<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 6 / 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Walden For Congress

**A.** Full Name (Last, First, Middle Initial)  
Joan L Staunton

Mailing Address 11539 Kestrel Road

City Klamath Falls State OR Zip Code 97601-8633

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

Name of Employer Retired Occupation Rancher

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt 01 / 16 / 2008

Transaction ID: A-C22563

Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Kathryn B. Decker

Mailing Address 4845 Jones Road SE

City Salem State OR Zip Code 97302-4832

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

Name of Employer Westcare Management Inc. Occupation Owner

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt 01 / 18 / 2008

Transaction ID: A-C22583

Amount of Each Receipt this Period 400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Robert M Decker

Mailing Address 4845 Jones Road SE

City Salem State OR Zip Code 97302-4832

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

Name of Employer Westcare Management Inc. Occupation Owner

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4600.00

Date of Receipt 01 / 18 / 2008

Transaction ID: A-C22581

Amount of Each Receipt this Period 300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 950.00

**TOTAL** 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 7 / 90  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Walden For Congress

**A.**

Full Name (Last, First, Middle Initial) Robert M Decker		Date of Receipt <table border="1" style="font-size: small;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>1</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	1		1	8		2	0	0	8													
Mailing Address 4845 Jones Road SE		<b>Transaction ID:</b> A-C22582																				
City Salem	State OR	Zip Code 97302-4832																				
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>2300.00</td></tr> </table>	2300.00																			
2300.00																						
Name of Employer Westcare Management Inc.	Occupation Owner	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)																				
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>4600.00</td></tr> </table>		4600.00																			
4600.00																						

**B.**

Full Name (Last, First, Middle Initial) Patsy Gasser		Date of Receipt <table border="1" style="font-size: small;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>1</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	1		1	8		2	0	0	8													
Mailing Address PO Box 452		<b>Transaction ID:</b> A-C22575																				
City Merrill	State OR	Zip Code 97633-0452																				
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>250.00</td></tr> </table>	250.00																			
250.00																						
Name of Employer Self	Occupation Farm Supply Sales	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)																				
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>850.00</td></tr> </table>		850.00																			
850.00																						

**C.**

Full Name (Last, First, Middle Initial) Dennis McVicker		Date of Receipt <table border="1" style="font-size: small;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>1</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	1		1	8		2	0	0	8													
Mailing Address 22517 NE 169th Street		<b>Transaction ID:</b> A-C22578																				
City Brush Prairie	State WA	Zip Code 98606-8718																				
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>250.00</td></tr> </table>	250.00																			
250.00																						
Name of Employer Tidewater	Occupation CEO	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)																				
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>250.00</td></tr> </table>		250.00																			
250.00																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<table border="1" style="width: 100%;"> <tr><td><b>2800.00</b></td></tr> </table>	<b>2800.00</b>
<b>2800.00</b>		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1" style="width: 100%; height: 20px;"> <tr><td> </td></tr> </table>	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 90

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Walden For Congress

**A.**

Full Name (Last, First, Middle Initial)  
John Pigott

Mailing Address 2416 E 6th Street

City State Zip Code  
Vancouver WA 98661-7719

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Tidewater General Manager

Receipt For: 2008 Election Cycle-to-Date ▼

Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
01 / 18 / 2008

**Transaction ID:** A-C22577

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Edward L. Ramsay

Mailing Address PO Box 797

City State Zip Code  
Crane OR 97732-0797

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Self rancher

Receipt For: 2008 Election Cycle-to-Date ▼

Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
01 / 18 / 2008

**Transaction ID:** A-C22584

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Peter W. Stott

Mailing Address 2896 SW Patton Road

City State Zip Code  
Portland OR 97201-1695

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Crown Pacific President

Receipt For: 2008 Election Cycle-to-Date ▼

Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
01 / 18 / 2008

**Transaction ID:** A-C22572

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 1000.00

**TOTAL** 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 9 / 90  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Walden For Congress

**A.** Full Name (Last, First, Middle Initial)  
Kurt Thomas

Mailing Address 5800 Georgia Drive

City Bakersfield State CA Zip Code 93308-9307

FEC ID number of contributing federal political committee. C

Name of Employer self employed Occupation cattle rancher

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt M M / D D / Y Y Y Y  
0 1 / 2 4 / 2 0 0 8

**Transaction ID:** A-C22598

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
John K. Williams

Mailing Address 64682 Cook Avenue # 99

City Bend State OR Zip Code 97701-9033

FEC ID number of contributing federal political committee. C

Name of Employer self Occupation forestry contractor

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt M M / D D / Y Y Y Y  
0 1 / 2 4 / 2 0 0 8

**Transaction ID:** A-C22598

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Donna McDonnell

Mailing Address 18160 Cottonwood Road # 760

City Sunriver State OR Zip Code 97707-9317

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt M M / D D / Y Y Y Y  
0 1 / 3 1 / 2 0 0 8

**Transaction ID:** A-C22616

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 2000.00

**TOTAL** 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 10 / 90  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Walden For Congress

**A.** Full Name (Last, First, Middle Initial)  
Ronald L. Saxton

Mailing Address 6187 SE Taylor Court

City State Zip Code  
Portland OR 97215-2827

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation Attorney

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1429.72

Date of Receipt M M / D D / Y Y Y Y  
0 2 / 0 6 / 2 0 0 8

**Transaction ID:** A-I23028

Amount of Each Receipt this Period 429.72

Inkind: mailing list  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Gonyea Timber Products

Mailing Address PO Box 269

City State Zip Code  
Springfield OR 97477-0055

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 2000.00

Date of Receipt M M / D D / Y Y Y Y  
0 2 / 1 3 / 2 0 0 8

**Transaction ID:** A-C22639

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Contribution from Partnership. Partners exceeding reporting threshold itemized as memos.

**C.** Full Name (Last, First, Middle Initial)  
Gonyea Timber Products

Mailing Address PO Box 269

City State Zip Code  
Springfield OR 97477-0055

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 2000.00

Date of Receipt M M / D D / Y Y Y Y  
0 2 / 1 3 / 2 0 0 8

**Transaction ID:** A-C22640

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Contribution from Partnership. Partners exceeding reporting threshold itemized as memos.

**SUBTOTAL** of Receipts This Page (optional) ..... 2429.72

**TOTAL** 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 11 / 90  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Walden For Congress

**A.**

Full Name (Last, First, Middle Initial)  
Charles Chackel

Mailing Address 61425 Tam McArthur Loop

City State Zip Code  
Bend OR 97702-1154

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

Name of Employer Combined Communications, Inc. Occupation Broadcasting/CEO

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 2 / 1 3 / 2 0 0 8

**Transaction ID:** A-C22633

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
David W Gonyea

Mailing Address PO Box 269

City State Zip Code  
Springfield OR 97477-0055

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

Name of Employer Gonyea Timber Products Occupation Partner

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 2 / 1 3 / 2 0 0 8

**Transaction ID:** A-PI132

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
Partnership Itemization Memo

**C.**

Full Name (Last, First, Middle Initial)  
J.H. Gonyea, II

Mailing Address PO Box 269

City State Zip Code  
Springfield OR 97477-0055

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

Name of Employer Timber Products Co. Occupation Manufacturing

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 2 / 1 3 / 2 0 0 8

**Transaction ID:** A-PI131

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
Partnership Itemization Memo

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **1000.00**

**TOTAL** 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 12 / 90

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Walden For Congress

**A.**

Full Name (Last, First, Middle Initial)  
Joseph H. Gonyea, III

Mailing Address 1810 Firland Boulevard

City Eugene State OR Zip Code 97405-4497

FEC ID number of contributing federal political committee. C

Name of Employer Wood Products Occupation Timber Products Company

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 02 / 13 / 2008

**Transaction ID:** A-C22636

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Patrick Morrissey

Mailing Address Sidley Austin LLP  
1501 K Street NW

City Washington State DC Zip Code 20005-1401

FEC ID number of contributing federal political committee. C

Name of Employer Sidley Austin Occupation Attorney

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt 02 / 13 / 2008

**Transaction ID:** A-C22641

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Victor Atiyeh

Mailing Address 519 SW Park Avenue  
Suite 208

City Portland State OR Zip Code 97205-3203

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation International Trade

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 02 / 14 / 2008

**Transaction ID:** A-C22647

Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 2250.00

**TOTAL** 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 13 / 90  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Walden For Congress

**A.** Full Name (Last, First, Middle Initial)  
Robert Bunn

Mailing Address 4130 SW Fairhaven Drive

City State Zip Code  
Corvallis OR 97333-1428

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	4	/	2	0	0	8

Transaction ID: A-C22664

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Cornelius R. Duffie

Mailing Address 1635 SW Elm Street

City State Zip Code  
Portland OR 97201-2398

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	4	/	2	0	0	8

Transaction ID: A-C22663

Amount of Each Receipt this Period  
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Edmund Hayes

Mailing Address 707 SW Washington Street Suite 934

City State Zip Code  
Portland OR 97205-3526

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	4	/	2	0	0	8

Transaction ID: A-C22672

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3250.00**

**TOTAL** 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 14 / 90  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Walden For Congress

**A.**

Full Name (Last, First, Middle Initial)  
Laura S. Meier

Mailing Address 2011 SW Carter Lane

City State Zip Code  
Portland OR 97201-2410

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

Name of Employer Self Occupation Community Volunteer

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
02 / 14 / 2008

**Transaction ID:** A-C22674

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
J. C. Milne

Mailing Address 1312 SW 16th Avenue Suite 101

City State Zip Code  
Portland OR 97201-2620

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

Name of Employer Retired Occupation Civil Engineer

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
02 / 14 / 2008

**Transaction ID:** A-C22673

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Susan Paulsen

Mailing Address 2445 NW Westover Road Unit 402

City State Zip Code  
Portland OR 97210-3153

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

Name of Employer Merrill Lynch Occupation Stock Broker

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
02 / 14 / 2008

**Transaction ID:** A-C22644

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1500.00**

**TOTAL** 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 15 / 90  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Walden For Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) M. James Mark</p> <p>Mailing Address 111 SW Columbia Street Suite 1380</p> <p>City State Zip Code Portland OR 97201-5845</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Melvin Mark Properties Real Estate Development</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;"><span style="border: 1px solid black; padding: 2px;">1000.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 2 / 1 5 / 2 0 0 8</span></p> <p><b>Transaction ID:</b> A-C22681</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">500.00</span></p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) John R. Murphy</p> <p>Mailing Address 3993 Spring Boulevard</p> <p>City State Zip Code Eugene OR 97405-4491</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Murphy Co Wood Products Executive</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;"><span style="border: 1px solid black; padding: 2px;">1000.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 2 / 1 5 / 2 0 0 8</span></p> <p><b>Transaction ID:</b> A-C22687</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">1000.00</span></p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Donna Woolley</p> <p>Mailing Address PO Box 43</p> <p>City State Zip Code Drain OR 97435-0043</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Eagle's View Management Executive</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;"><span style="border: 1px solid black; padding: 2px;">4600.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 2 / 1 5 / 2 0 0 8</span></p> <p><b>Transaction ID:</b> A-C22675</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">300.00</span></p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">1800.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 90  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Walden For Congress

**A.** Full Name (Last, First, Middle Initial)  
Donna Woolley  
Mailing Address PO Box 43  
City Drain State OR Zip Code 97435-0043  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Eagle's View Management Occupation Executive  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 4600.00  
Date of Receipt 02 / 15 / 2008  
Transaction ID: A-C22676  
Amount of Each Receipt this Period 2300.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
William Early  
Mailing Address 4310 SW Fairview Circus  
City Portland State OR Zip Code 97221-2714  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Jeld-Wen Foundation Occupation retired executive  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 500.00  
Date of Receipt 02 / 18 / 2008  
Transaction ID: A-C22717  
Amount of Each Receipt this Period 500.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Robert B. Kennedy  
Mailing Address 605 Hillside Avenue  
City Klamath Falls State OR Zip Code 97601-2209  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 250.00  
Date of Receipt 02 / 18 / 2008  
Transaction ID: A-C22709  
Amount of Each Receipt this Period 250.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3050.00  
**TOTAL** 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 17 / 90  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Walden For Congress

**A.** Full Name (Last, First, Middle Initial)  
Glenn Pelikan

Mailing Address 2836 NE 54th Avenue

City State Zip Code  
Portland OR 97213-3403

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
retired retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
0 2 / 1 8 / 2 0 0 8

**Transaction ID:** A-C22698

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address PO Box 1309

City State Zip Code  
Lakeview OR 97630-0174

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Retired Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
0 2 / 2 0 / 2 0 0 8

**Transaction ID:** A-C22741

Amount of Each Receipt this Period  
200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Wayne Giesy

Mailing Address PO Box 772

City State Zip Code  
Philomath OR 97370-0772

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Hull Oakes Lumber Co. Consultant

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
0 2 / 2 0 / 2 0 0 8

**Transaction ID:** A-C22731

Amount of Each Receipt this Period  
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 1300.00

**TOTAL** 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 18 / 90

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Walden For Congress

**A.**

Full Name (Last, First, Middle Initial)  
Mike C. Hawkins

Mailing Address PO Box 1388

City State Zip Code  
Medford OR 97501-0103

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Hawk Oil Owner

Receipt For: 2008 Election Cycle-to-Date ▼

Primary  General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
02 / 20 / 2008

**Transaction ID:** A-C22734

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Gregory J. Manning

Mailing Address 7238 SW Capitol Highway

City State Zip Code  
Portland OR 97219-2429

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
self commercial real estate

Receipt For: 2008 Election Cycle-to-Date ▼

Primary  General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

**Transaction ID:** A-C22748

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Laurette J. Robertson

Mailing Address 11432 NE Summit Ridge Drive

City State Zip Code  
Vancouver WA 98686-4122

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
self commercial real estate

Receipt For: 2008 Election Cycle-to-Date ▼

Primary  General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2008

**Transaction ID:** A-C22749

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 1000.00

**TOTAL** 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 19 / 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Walden For Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Todd Sheaffer		Date of Receipt
	Mailing Address 6663 SW 88th Place		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 2 / 2 0 0 8
	City	State	Zip Code
	Portland	OR	97223-7255
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: A-C22750
Name of Employer self		Occupation	Amount of Each Receipt this Period
self		commercial real estate	<input type="text"/> 500.00
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="text"/> 500.00	
<input type="checkbox"/> Other (specify) ▼			

<b>B.</b>	Full Name (Last, First, Middle Initial) Dietra Stivahtis		Date of Receipt
	Mailing Address 0430 SW Nebraska Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 2 / 2 0 0 8
	City	State	Zip Code
	Portland	OR	97239-3535
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: A-C22747
Name of Employer self		Occupation	Amount of Each Receipt this Period
self		commercial real estate	<input type="text"/> 250.00
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="text"/> 250.00	
<input type="checkbox"/> Other (specify) ▼			

<b>C.</b>	Full Name (Last, First, Middle Initial) Michael N. Wells		Date of Receipt
	Mailing Address 13260 Sandalwood Court		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 2 / 2 0 0 8
	City	State	Zip Code
	Lake Oswego	OR	97035-6766
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: A-C22746
Name of Employer Wells Development Co		Occupation	Amount of Each Receipt this Period
Wells Development Co		Managing Director	<input type="text"/> 500.00
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="text"/> 500.00	
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 20 / 90</span>
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 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)  
Walden For Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Ed Anderson</p> <p>Mailing Address 1054 Abbie Lane</p> <p>City State Zip Code Eugene OR 97401-2205</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation retired retired</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;"><span style="border: 1px solid black; padding: 2px;">250.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">02 / 27 / 2008</span></p> <p><b>Transaction ID:</b> A-C22758</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">250.00</span></p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
--	--

<p><b>B.</b> Full Name (Last, First, Middle Initial) Diana Powers Evans</p> <p>Mailing Address 1910 Madrona Avenue S</p> <p>City State Zip Code Salem OR 97302-3636</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Retired Rancher</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;"><span style="border: 1px solid black; padding: 2px;">350.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">02 / 27 / 2008</span></p> <p><b>Transaction ID:</b> A-C22753</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">100.00</span></p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
--	--

<p><b>C.</b> Full Name (Last, First, Middle Initial) William J. Moshofsky</p> <p>Mailing Address 10585 SW 161st Court</p> <p>City State Zip Code Beaverton OR 97007-8171</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Retired Retired</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;"><span style="border: 1px solid black; padding: 2px;">250.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">02 / 27 / 2008</span></p> <p><b>Transaction ID:</b> A-C22766</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">250.00</span></p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
---	--

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">600.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 90  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Walden For Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Jeff Robberson</p> <p>Mailing Address 2100 NE 3rd Street</p> <p>City State Zip Code Bend OR 97701-3607</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer: Robberson Ford      Occupation: auto dealer</p> <p>Receipt For: 2008  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <span style="border: 1px solid black; padding: 2px; float: right;">1000.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 2 / 2 7 / 2 0 0 8</span></p> <p><b>Transaction ID:</b> A-C22751</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; text-align: right;">1000.00</span></p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
--	--

<p><b>B.</b> Full Name (Last, First, Middle Initial) Steven Anderson</p> <p>Mailing Address 14100 Heritage Lane</p> <p>City State Zip Code Arlington OR 97812-6503</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer: Self      Occupation: Farmer</p> <p>Receipt For: 2008  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <span style="border: 1px solid black; padding: 2px; float: right;">1000.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 2 / 2 8 / 2 0 0 8</span></p> <p><b>Transaction ID:</b> A-C22785</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; text-align: right;">500.00</span></p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
--	---

<p><b>C.</b> Full Name (Last, First, Middle Initial) Henry L. Harbert</p> <p>Mailing Address 1801 Poplar Drive Apt. 74</p> <p>City State Zip Code Medford OR 97504-4672</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer: Self      Occupation: Dentist</p> <p>Receipt For: 2008  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <span style="border: 1px solid black; padding: 2px; float: right;">300.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 2 / 2 8 / 2 0 0 8</span></p> <p><b>Transaction ID:</b> A-C22788</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; text-align: right;">300.00</span></p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
---	---

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">1800.00</span>
<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 22 / 90  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Walden For Congress

**A.** Full Name (Last, First, Middle Initial)  
Steven D. Pratt

Mailing Address 2501 SW Ravensview Drive

City State Zip Code  
Portland OR 97201-1789

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

Name of Employer Occupation  
Esco Corp. Executive

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 0 8

**Transaction ID:** A-C22782

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Henry Swigert

Mailing Address 1425 SW 20th Avenue  
Suite 104

City State Zip Code  
Portland OR 97201-2485

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

Name of Employer Occupation  
Retired Executive

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 0 8

**Transaction ID:** A-C22773

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 61708 Brokentop Drive

City State Zip Code  
Bend OR 97702-1088

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

Name of Employer Occupation  
retired retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 0 8

**Transaction ID:** A-C22781

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2250.00

**TOTAL** 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 23 / 90  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Walden For Congress

**A.** Full Name (Last, First, Middle Initial)  
Eldon Buckner

Mailing Address 13967 Hunt Mountain Lane

City State Zip Code  
Baker City OR 97814-8197

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

Name of Employer Self Occupation Rancher

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

**Transaction ID:** A-C22803

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Theodore Freres

Mailing Address PO Box 451

City State Zip Code  
Stayton OR 97383-0451

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

Name of Employer Freres Lumber Company Occupation President

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

**Transaction ID:** A-C22792

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 2036 Grove Street

City State Zip Code  
Baker City OR 97814-2712

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

Name of Employer Self Occupation Rancher

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

**Transaction ID:** A-C22801

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **750.00**

**TOTAL** 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 24 / 90  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Walden For Congress

**A.**

Full Name (Last, First, Middle Initial)  
Charles Hofmann

Mailing Address 2580 1st Street

City State Zip Code  
Baker City OR 97814-2302

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

Name of Employer Self Occupation Physician

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
02 / 29 / 2008

**Transaction ID:** A-C22804

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Helen R. Scott

Mailing Address 346 Bickford Drive

City State Zip Code  
Grants Pass OR 97527-9603

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

Name of Employer Retired Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
02 / 29 / 2008

**Transaction ID:** A-C22793

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Jane G Mattoon

Mailing Address 6344 Cavalier Corridor

City State Zip Code  
Falls Church VA 22044-1203

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

Name of Employer Self Occupation Community Volunteer

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2150.00

Date of Receipt  
MM / DD / YYYY  
03 / 03 / 2008

**Transaction ID:** A-I22932

Amount of Each Receipt this Period  
650.00

Inkind: food & beverage

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1150.00**

**TOTAL** 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 25 / 90  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Walden For Congress

**A.** Full Name (Last, First, Middle Initial)  
Carlton Woodard  
Mailing Address 405 S 6th Street  
City State Zip Code  
Cottage Grove OR 97424-2479  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
retired Retired  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 500.00  
Date of Receipt: 03 / 05 / 2008  
Transaction ID: A-C22797  
Amount of Each Receipt this Period: 500.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
N. Gail Mitchell  
Mailing Address PO Box 171  
City State Zip Code  
Klamath Falls OR 97601-0305  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Retired Retired  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 250.00  
Date of Receipt: 03 / 07 / 2008  
Transaction ID: A-C22827  
Amount of Each Receipt this Period: 50.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Parrell Pedersen  
Mailing Address 11267 Kestrel Road  
City State Zip Code  
Klamath Falls OR 97601-8642  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
self Architect  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 250.00  
Date of Receipt: 03 / 07 / 2008  
Transaction ID: A-C22818  
Amount of Each Receipt this Period: 250.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **800.00**  
**TOTAL** 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 26 / 90  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Walden For Congress

**A.** Full Name (Last, First, Middle Initial)  
Brewster/Jory Associates

Mailing Address 499 S Capitol Street SW  
Suite 608

City Washington State DC Zip Code 20003-4049

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

Name of Employer Occupation

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 10 / 2008  
**Transaction ID: A-I23027**  
 Amount of Each Receipt this Period 250.00  
 Inkind: room rental fee  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
 Inkind from Partnership. Partners exceeding reporting threshold itemized as memos.

**B.** Full Name (Last, First, Middle Initial)  
Brewster/Jory Associates

Mailing Address 499 S Capitol Street SW  
Suite 608

City Washington State DC Zip Code 20003-4049

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

Name of Employer Occupation

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 10 / 2008  
**Transaction ID: A-I23029**  
 Amount of Each Receipt this Period 250.00  
 Inkind: room rental fee  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
 Inkind from Partnership. Partners exceeding reporting threshold itemized as memos.

**C.** Full Name (Last, First, Middle Initial)  
Bill K. Brewster

Mailing Address Brewster/Jory Associates  
499 S Capitol St. SW #608

City Washington State DC Zip Code 20003

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

Name of Employer Occupation  
Capitol Hill Consulting government relations

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 10 / 2008  
**Transaction ID: A-PI138**  
 Amount of Each Receipt this Period 250.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
 Partnership Itemization Memo

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 500.00

**TOTAL** 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 27 / 90  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Walden For Congress

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

Mailing Address 4528 Macomb Street NW

City Washington State DC Zip Code 20016-2753

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

Name of Employer Brewster/Jory Associates Occupation governmental affairs

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General    Other (specify) ▼  
 4450.00

Date of Receipt 03 / 10 / 2008

Transaction ID: A-PI140

Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**  
Partnership Itemization Memo

**B.** Full Name (Last, First, Middle Initial)  
Barbara Morris

Mailing Address 2336 S Queen Street

City Arlington State VA Zip Code 22202-1549

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

Name of Employer self Occupation gov't relations consultant

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General    Other (specify) ▼  
 250.00

Date of Receipt 03 / 12 / 2008

Transaction ID: A-C22901

Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 2730 NW Nightfall Circle

City Bend State OR Zip Code 97701-5437

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

Name of Employer Edge Wireless Occupation Manager

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General    Other (specify) ▼  
 1000.00

Date of Receipt 03 / 14 / 2008

Transaction ID: A-C22882

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1250.00**

**TOTAL** 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 28 / 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Walden For Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Wallace Henderson		Date of Receipt
	Mailing Address 1309 The Circle		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 14 / 2008
	City	State	Zip Code
	Austin	TX	78704-2419
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A-C22879
Name of Employer The Loeffler Group		Occupation Partner	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00
		<input type="text"/> 500.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b>	Full Name (Last, First, Middle Initial) Thomas J. Petrizzo		Date of Receipt
	Mailing Address 601 13th Street NW Suite 430		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 14 / 2008
	City	State	Zip Code
	Washington	DC	20005-3807
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A-C22893
Name of Employer Self		Occupation Legislative Affairs	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 500.00
		<input type="text"/> 500.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b>	Full Name (Last, First, Middle Initial) Mark Phillips		Date of Receipt
	Mailing Address 2625 N Potomac Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 14 / 2008
	City	State	Zip Code
	Arlington	VA	22207-1005
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A-C22878
Name of Employer Edwards & Associates		Occupation government relations	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00
		<input type="text"/> 2500.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 90  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d	
<input type="checkbox"/>	12	<input type="checkbox"/>	13a	<input type="checkbox"/>	13b	<input type="checkbox"/>	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)  
Walden For Congress

**A.**

Full Name (Last, First, Middle Initial) Jot Carpenter		Date of Receipt MM / DD / YYYY 03 / 18 / 2008
Mailing Address 1400 16th Street NW Suite 600		<b>Transaction ID:</b> A-C22908
City Washington	State Zip Code DC 20036-2225	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer CTIA	Occupation VP Gov't Affairs	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

**B.**

Full Name (Last, First, Middle Initial) Amanda R. Hill		Date of Receipt MM / DD / YYYY 03 / 18 / 2008
Mailing Address 444 New Jersey Avenue SE Apt. B		<b>Transaction ID:</b> A-C22903
City Washington	State Zip Code DC 20003-4058	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Capitol Hill Consulting	Occupation government relations	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

**C.**

Full Name (Last, First, Middle Initial) Gail MacKinnon		Date of Receipt MM / DD / YYYY 03 / 18 / 2008
Mailing Address 3753 Oliver Street NW		<b>Transaction ID:</b> A-C22909
City Washington	State Zip Code DC 20015-2531	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Time Warner	Occupation Gov't Relations	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<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 30 / 90  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Walden For Congress

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

Mailing Address 708 W Braddock Road

City State Zip Code  
Alexandria VA 22302-3601

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

Name of Employer Capitol Solutions Occupation Government Relations Consultant

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 3 / 1 8 / 2 0 0 8

**Transaction ID:** A-C22920

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Wiley Rein LLP

Mailing Address 1776 K Street NW

City State Zip Code  
Washington DC 20006-2304

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

Name of Employer Occupation

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 3 / 1 9 / 2 0 0 8

**Transaction ID:** A-C22929

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Contribution from Partnership. Partners exceeding reporting threshold itemized as memos.

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

Mailing Address 1101 16th Street NW Suite 500

City State Zip Code  
Washington DC 20036-4815

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

Name of Employer Bockorny Group Inc Occupation CEO

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 3 / 1 9 / 2 0 0 8

**Transaction ID:** A-C22936

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1750.00**

**TOTAL** 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 31 / 90  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Walden For Congress

**A.**

Full Name (Last, First, Middle Initial) Karl Gallant		Date of Receipt MM / DD / YYYY 03 / 19 / 2008
Mailing Address 1301 Pennsylvania Avenue NW Suite 500		<b>Transaction ID:</b> A-C22938
City Washington	State DC	Zip Code 20004-1701
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Aduston Consulting LLC	Occupation Consultant	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

**B.**

Full Name (Last, First, Middle Initial) Fred Granum		Date of Receipt MM / DD / YYYY 03 / 19 / 2008
Mailing Address 13585 NW Lariat Court		<b>Transaction ID:</b> A-C22925
City Portland	State OR	Zip Code 97229-7001
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Co-Operations, Inc	Occupation COO	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

**C.**

Full Name (Last, First, Middle Initial) James Hallstrom		Date of Receipt MM / DD / YYYY 03 / 19 / 2008
Mailing Address PO Box 2812		<b>Transaction ID:</b> A-C22910
City Eugene	State OR	Zip Code 97402-0304
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Zip-O-Log Mills, Inc.	Occupation President	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1500.00</b>
<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 32 / 90  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  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)  
Walden For Congress

**A.** Full Name (Last, First, Middle Initial)  
John J. Lively

Mailing Address 23 Hesketh Street

City State Zip Code  
Chevy Chase MD 20815-4224

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

Name of Employer Occupation  
The Fritts Group government relations

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1500.00

Date of Receipt  
MM / DD / YYYY  
03 / 19 / 2008

**Transaction ID:** A-C22940

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 4011 Lorcom Lane

City State Zip Code  
Arlington VA 22207-3936

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

Name of Employer Occupation  
The Fritts Group government relations

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2500.00

Date of Receipt  
MM / DD / YYYY  
03 / 19 / 2008

**Transaction ID:** A-C22943

Amount of Each Receipt this Period  
800.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Kathleen M. Ramsey

Mailing Address 4011 Lorcom Lane

City State Zip Code  
Arlington VA 22207-3936

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

Name of Employer Occupation  
The Fritts Group government relations

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2500.00

Date of Receipt  
MM / DD / YYYY  
03 / 19 / 2008

**Transaction ID:** A-C22944

Amount of Each Receipt this Period  
200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1500.00

**TOTAL** 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 33 / 90  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Walden For Congress

**A.** Full Name (Last, First, Middle Initial)  
Jerry Andres

Mailing Address 5540 SW 43rd Street

City State Zip Code  
Redmond OR 97756-9094

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

Name of Employer Occupation  
Eagle Crest CEO

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 24 / 2008

**Transaction ID:** A-C22962

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1889 E Highland Avenue

City State Zip Code  
Hermiston OR 97838-6733

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

Name of Employer Occupation  
Self Insurance Agent

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 24 / 2008

**Transaction ID:** A-C22959

Amount of Each Receipt this Period  
150.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Jacqueline Locke

Mailing Address 2111 Woodmont Road

City State Zip Code  
Alexandria VA 22307-1156

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

Name of Employer Occupation  
none homemaker

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 24 / 2008

**Transaction ID:** A-C22988

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1650.00**

**TOTAL** 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 34 / 90

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Walden For Congress

**A.**

Full Name (Last, First, Middle Initial)  
Jane G Mattoon

Mailing Address 6344 Cavalier Corridor

City Falls Church State VA Zip Code 22044-1203

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation Community Volunteer

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2150.00

Date of Receipt 03 / 24 / 2008

**Transaction ID:** A-C22952

Amount of Each Receipt this Period 1500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
The Honora Jack Fields

Mailing Address 434 New Jersey Avenue SE

City Washington State DC Zip Code 20003-4008

FEC ID number of contributing federal political committee. C

Name of Employer self Occupation Political Consultant

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 03 / 26 / 2008

**Transaction ID:** A-C22963

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Steve Irizarry

Mailing Address 1600 N Oak Street Apt. 1431

City Arlington State VA Zip Code 22209-2768

FEC ID number of contributing federal political committee. C

Name of Employer Capitol Hill Consult. Group Occupation Political Consultant

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 03 / 26 / 2008

**Transaction ID:** A-C22964

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 2500.00

**TOTAL** 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 35 / 90  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Walden For Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Greg King</p> <p>Mailing Address 6504 Koziara Drive</p> <p>City State Zip Code Burke VA 22015-4127</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Flir Political Consultant</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;"><span style="border: 1px solid black; padding: 2px;">1000.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 3 / 2 6 / 2 0 0 8</span></p> <p><b>Transaction ID:</b> A-C22965</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">1000.00</span></p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
--	---

<p><b>B.</b> Full Name (Last, First, Middle Initial) Timothy Kurth</p> <p>Mailing Address 333 Maryland Avenue NE</p> <p>City State Zip Code Washington DC 20002-5711</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation BlueWater Strategies LLC Political Consultant</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;"><span style="border: 1px solid black; padding: 2px;">500.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 3 / 2 6 / 2 0 0 8</span></p> <p><b>Transaction ID:</b> A-C22966</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">250.00</span></p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Roger Mott</p> <p>Mailing Address 7216 Countrywood Court</p> <p>City State Zip Code Springfield VA 22151-3320</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Verizon Gov't Relations</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;"><span style="border: 1px solid black; padding: 2px;">250.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 3 / 2 6 / 2 0 0 8</span></p> <p><b>Transaction ID:</b> A-C22967</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">250.00</span></p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">1500.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 90

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Walden For Congress

**A.**

Full Name (Last, First, Middle Initial)  
Jason Roe

Mailing Address 106 Summers Drive

City State Zip Code  
Alexandria VA 22301-2443

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Federal Strategy Group Political Consultant

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 26 / 2008

**Transaction ID:** A-C22968

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Paul Ryan

Mailing Address 1111 Army Navy Drive  
Apt. 1007

City State Zip Code  
Arlington VA 22202-2038

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
DCI Gov't Relations

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 26 / 2008

**Transaction ID:** A-C22968

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Ed Senn

Mailing Address 314 Kentucky Avenue SE

City State Zip Code  
Washington DC 20003-2322

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Verizon Political Consultant

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 26 / 2008

**Transaction ID:** A-C22970

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 1000.00

**TOTAL** 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 37 / 90

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Walden For Congress

**A.**

Full Name (Last, First, Middle Initial)  
Martha D. Fritts

Mailing Address 1919 Valleywood Road

City State Zip Code  
Mc Lean VA 22101-4931

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
retired retired

Receipt For: 2008 Election Cycle-to-Date ▼

Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 28 / 2008

**Transaction ID:** A-C22987

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Rodney Hoppe

Mailing Address 6208 Willow Pond Drive

City State Zip Code  
Fredericksburg VA 22407-8432

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Ryan Phillips Utrecht & Mack Partner

Receipt For: 2008 Election Cycle-to-Date ▼

Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 28 / 2008

**Transaction ID:** A-C22985

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Joanna McIntosh

Mailing Address 209 Princess Street

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Verizon VP

Receipt For: 2008 Election Cycle-to-Date ▼

Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 28 / 2008

**Transaction ID:** A-C22986

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 1750.00

**TOTAL** 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 38 / 90  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d	
<input type="checkbox"/>	12	<input type="checkbox"/>	13a	<input type="checkbox"/>	13b	<input type="checkbox"/>	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)  
Walden For Congress

**A.**

Full Name (Last, First, Middle Initial)  
Bryan Wolfe

Mailing Address 80897 Wolfe Lane

City Hermiston State OR Zip Code 97838-6285

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

Name of Employer self Occupation rancher

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: 03 / 28 / 2008  
Transaction ID: A-C22981  
Amount of Each Receipt this Period: 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Lou Ann Wolfe

Mailing Address 80897 Wolfe Lane

City Hermiston State OR Zip Code 97838-6285

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

Name of Employer Self Occupation Rancher

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt: 03 / 28 / 2008  
Transaction ID: A-C22980  
Amount of Each Receipt this Period: 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Cesar Conda

Mailing Address 901 7th Street NW Suite 200

City Washington State DC Zip Code 20001-3881

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

Name of Employer Navigators Occupation Gov't Relations Consultant

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 03 / 31 / 2008  
Transaction ID: A-C22995  
Amount of Each Receipt this Period: 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1000.00

**TOTAL** 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 39 / 90  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Walden For Congress

A.

Full Name (Last, First, Middle Initial)  
Jack M. Victory

Mailing Address 499 S Capitol Street SW  
Suite 608

City State Zip Code  
Washington DC 20003-4049

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

Name of Employer Occupation  
Capitol Hill Consulting Sr VP

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 31 / 2008

Transaction ID: A-C22992

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	53729.72

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 90  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Walden For Congress

**A.** Full Name (Last, First, Middle Initial)  
Microsoft Corporation PAC

Mailing Address 1401 I Street NW  
Suite 500

City Washington State DC Zip Code 20005-2214

FEC ID number of contributing federal political committee. **C** C00227546

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt 01 / 09 / 2008  
**Transaction ID: A-C22554**  
 Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Lone Rock PAC

Mailing Address PO Box 1127

City Roseburg State OR Zip Code 97470-0255

FEC ID number of contributing federal political committee. **C** C00126789

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt 01 / 11 / 2008  
**Transaction ID: A-C22558**  
 Amount of Each Receipt this Period 1500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
American College of Cardiology PAC

Mailing Address 2400 N Street NW

City Washington State DC Zip Code 20037-1153

FEC ID number of contributing federal political committee. **C** C00375360

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt 01 / 21 / 2008  
**Transaction ID: A-C22585**  
 Amount of Each Receipt this Period 2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 5000.00

**TOTAL** 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 41 / 90  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Walden For Congress

**A.** Full Name (Last, First, Middle Initial)  
American Health Care Association PAC

Mailing Address 1201 L Street NW

City State Zip Code  
Washington DC 20005-4024

FEC ID number of contributing federal political committee. **C** C00006080

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 1 / 2 1 / 2 0 0 8

**Transaction ID:** A-C22586

Amount of Each Receipt this Period  
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Archipac -The American Institute Of Architects

Mailing Address 1735 New York Avenue NW

City State Zip Code  
Washington DC 20006-5209

FEC ID number of contributing federal political committee. **C** C00139071

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 1 / 2 4 / 2 0 0 8

**Transaction ID:** A-C22595

Amount of Each Receipt this Period  
2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Altria Group Inc PAC

Mailing Address 101 Constitution Avenue NW  
Suite 400W

City State Zip Code  
Washington DC 20001-2155

FEC ID number of contributing federal political committee. **C** C00089136

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 1 / 2 8 / 2 0 0 8

**Transaction ID:** A-C22606

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5500.00**

**TOTAL** 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 42 / 90  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Walden For Congress

**A.** Full Name (Last, First, Middle Initial)  
Novartis Employee Good Govt Fund

Mailing Address 701 Pennsylvania Avenue NW  
Suite 725

City Washington State DC Zip Code 20004-2608

FEC ID number of contributing federal political committee. **C** C00033969

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 01 / 28 / 2008  
**Transaction ID:** A-C22607  
 Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Sidley Austin Good Government Fund

Mailing Address 1501 K Street NW

City Washington State DC Zip Code 20005-1401

FEC ID number of contributing federal political committee. **C** C00351270

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3500.00

Date of Receipt: 02 / 13 / 2008  
**Transaction ID:** A-C22642  
 Amount of Each Receipt this Period: 2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
American Crystal Sugar Co PAC

Mailing Address 101 3rd Street N

City Moorhead State MN Zip Code 56560-1952

FEC ID number of contributing federal political committee. **C** C00110338

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 7000.00

Date of Receipt: 02 / 22 / 2008  
**Transaction ID:** A-C22874  
 Amount of Each Receipt this Period: 2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 5500.00

**TOTAL** 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 43 / 90  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Walden For Congress

**A.** Full Name (Last, First, Middle Initial)  
American Osteopathic Assn PAC

Mailing Address 1090 Vermont Avenue NW  
Suite 510

City State Zip Code  
Washington DC 20005-4949

FEC ID number of contributing federal political committee. **C** C00113803

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 2 / 2 2 / 2 0 0 8

**Transaction ID:** A-C22870

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Honeywell Int'l (HIPAC)

Mailing Address 101 Constitution Avenue NW  
Suite 500W

City State Zip Code  
Washington DC 20001-2177

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 2 / 2 2 / 2 0 0 8

**Transaction ID:** A-C22871

Amount of Each Receipt this Period  
1500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
NAIOP-PAC

Mailing Address 1350 I Street NW  
Suite 550

City State Zip Code  
Washington DC 20005-3345

FEC ID number of contributing federal political committee. **C** C00233304

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 2 / 2 2 / 2 0 0 8

**Transaction ID:** A-C22800

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3500.00**

**TOTAL** 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 44 / 90  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Walden For Congress

**A.** Full Name (Last, First, Middle Initial)  
Nat'l Cattlemen's Beef Assn PAC

Mailing Address 1301 Pennsylvania Avenue NW  
Suite 300

City State Zip Code  
Washington DC 20004-1701

FEC ID number of contributing federal political committee. **C** C00028787

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 2 / 2 2 / 2 0 0 8

**Transaction ID:** A-C22877

Amount of Each Receipt this Period  
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
New York Life Insurance Company Political Action Committee

Mailing Address 1501 K Street NW  
Suite 575

City State Zip Code  
Washington DC 20005-1413

FEC ID number of contributing federal political committee. **C** C00158881

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 2 / 2 2 / 2 0 0 8

**Transaction ID:** A-C22876

Amount of Each Receipt this Period  
1500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Puget Sound Energy

Mailing Address PO Box 90868

City State Zip Code  
Bellevue WA 98009-0868

FEC ID number of contributing federal political committee. **C** C00101592

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 2 / 2 2 / 2 0 0 8

**Transaction ID:** A-C22873

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4500.00

**TOTAL** 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 45 / 90  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Walden For Congress

**A.** Full Name (Last, First, Middle Initial)  
The Williams Co (WILLCO PAC)  
 Mailing Address 1627 I Street NW  
Suite 900  
 City Washington State DC Zip Code 20006-4057  
 FEC ID number of contributing federal political committee. **C** C00040394  
 Name of Employer Occupation  
 Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 3000.00  
 Date of Receipt MM / DD / YYYY 02 / 22 / 2008  
**Transaction ID:** A-C22869  
 Amount of Each Receipt this Period 1000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Air Line Pilots Association PAC  
 Mailing Address 1625 Massachusetts Avenue NW  
Floor 8  
 City Washington State DC Zip Code 20036-2212  
 FEC ID number of contributing federal political committee. **C** C00035451  
 Name of Employer Occupation  
 Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 2500.00  
 Date of Receipt MM / DD / YYYY 03 / 14 / 2008  
**Transaction ID:** A-C22895  
 Amount of Each Receipt this Period 2500.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
eBay Inc Committee for Responsible Internet Commerce  
 Mailing Address 228 S Washington Street  
Suite 115  
 City Alexandria State VA Zip Code 22314-5404  
 FEC ID number of contributing federal political committee. **C** C00342394  
 Name of Employer Occupation  
 Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00  
 Date of Receipt MM / DD / YYYY 03 / 14 / 2008  
**Transaction ID:** A-C22896  
 Amount of Each Receipt this Period 1000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4500.00  
**TOTAL** 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 46 / 90  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Walden For Congress

**A.** Full Name (Last, First, Middle Initial)  
Honeywell Int'l (HIPAC)  
 Mailing Address 101 Constitution Avenue NW  
Suite 500W  
 City Washington State DC Zip Code 20001-2177  
 FEC ID number of contributing federal political committee. **C** C00096156  
 Name of Employer Occupation  
 Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼ 4000.00  
 Date of Receipt MM / DD / YYYY 03 / 14 / 2008  
**Transaction ID:** A-C22897  
 Amount of Each Receipt this Period 1000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Nat'l Community Pharmacists PAC  
 Mailing Address 100 Daingerfield Road  
 City Alexandria State VA Zip Code 22314-6302  
 FEC ID number of contributing federal political committee. **C** C00030809  
 Name of Employer Occupation  
 Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼ 2500.00  
 Date of Receipt MM / DD / YYYY 03 / 14 / 2008  
**Transaction ID:** A-C22891  
 Amount of Each Receipt this Period 1000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
United Services Automobile Association Employee Pac - Usaa Employee Pac  
 Mailing Address 601 Pennsylvania Avenue NW  
Suite 225  
 City Washington State DC Zip Code 20004-2601  
 FEC ID number of contributing federal political committee. **C** C00164145  
 Name of Employer Occupation  
 Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼ 1500.00  
 Date of Receipt MM / DD / YYYY 03 / 14 / 2008  
**Transaction ID:** A-C22894  
 Amount of Each Receipt this Period 1500.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 3500.00  
**TOTAL** 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 47 / 90  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Walden For Congress

**A.** Full Name (Last, First, Middle Initial)  
Washington Division of URS PAC

Mailing Address 2345 Crystal Drive  
Suite 708

City Arlington State VA Zip Code 22202-4801

FEC ID number of contributing federal political committee. **C** C00097550

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 6000.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 14 / 2008

**Transaction ID:** A-C22892

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Alltel Corporation Political Action Committee (apac)

Mailing Address 601 Pennsylvania Avenue NW  
Suite 720

City Washington State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. **C** C00216556

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 18 / 2008

**Transaction ID:** A-C22913

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
American Gas Assn GASPAC

Mailing Address 400 N Capitol Street NW

City Washington State DC Zip Code 20001-1511

FEC ID number of contributing federal political committee. **C** C00007450

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 18 / 2008

**Transaction ID:** A-C22907

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3000.00

**TOTAL** 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 48 / 90  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Walden For Congress

**A.** Full Name (Last, First, Middle Initial)  
AT&T PAC

Mailing Address 1133 21st Street NW  
Suite 900

City Washington State DC Zip Code 20036-3333

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 6000.00

Date of Receipt 03 / 18 / 2008  
**Transaction ID:** A-C22906  
 Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
CTIA PAC

Mailing Address 1400 16th Street NW  
Suite 600

City Washington State DC Zip Code 20036-2225

FEC ID number of contributing federal political committee. **C** C00262295

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 03 / 18 / 2008  
**Transaction ID:** A-C22923  
 Amount of Each Receipt this Period 2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
DirecTV Group PAC

Mailing Address 444 N Capitol Street NW  
Suite 728

City Washington State DC Zip Code 20001-1512

FEC ID number of contributing federal political committee. **C** C00331991

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3500.00

Date of Receipt 03 / 18 / 2008  
**Transaction ID:** A-C22905  
 Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4000.00

**TOTAL** 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 49 / 90  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Walden For Congress

**A.** Full Name (Last, First, Middle Initial)  
Oregon Farm Bureau Federation Federal PAC OFBFPAC

Mailing Address 3415 Commercial Street SE  
Suite 117

City State Zip Code  
Salem OR 97302-4897

FEC ID number of contributing federal political committee. **C** C00403691

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 18 / 2008

**Transaction ID:** A-C22926

Amount of Each Receipt this Period  
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Oregon Farm Bureau Federation Federal PAC OFBFPAC

Mailing Address 3415 Commercial Street SE  
Suite 117

City State Zip Code  
Salem OR 97302-4897

FEC ID number of contributing federal political committee. **C** C00403691

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 18 / 2008

**Transaction ID:** A-C22927

Amount of Each Receipt this Period  
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
T-Mobile PAC

Mailing Address 401 9th Street NW  
Suite 550

City State Zip Code  
Washington DC 20004-2141

FEC ID number of contributing federal political committee. **C** C00361758

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 18 / 2008

**Transaction ID:** A-C22916

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 5000.00

**TOTAL** 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 50 / 90  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  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)  
Walden For Congress

**A.** Full Name (Last, First, Middle Initial)  
Tuesday Group Political Action Committee

Mailing Address PO Box 11586

City Washington State DC Zip Code 20008-0786

FEC ID number of contributing federal political committee. **C** C00433060

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 7500.00

Date of Receipt 03 / 18 / 2008  
**Transaction ID:** A-C22902  
 Amount of Each Receipt this Period 2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
CBS Corporation PAC

Mailing Address 601 Pennsylvania Avenue NW # 540

City Washington State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. **C** C00423442

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 03 / 19 / 2008  
**Transaction ID:** A-C22935  
 Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Accenture PAC

Mailing Address 800 Connecticut Avenue NW Suite 600

City Washington State DC Zip Code 20006-2716

FEC ID number of contributing federal political committee. **C** C00300707

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 03 / 24 / 2008  
**Transaction ID:** A-C22948  
 Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4500.00

**TOTAL** 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 51 / 90  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  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)  
Walden For Congress

**A.** Full Name (Last, First, Middle Initial)  
Alaska Air Group PAC  
Mailing Address PO Box 68900  
City State Zip Code  
Seattle WA 98168-0900  
FEC ID number of contributing federal political committee. **C** C00024349  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00  
Date of Receipt: 03 / 24 / 2008  
Transaction ID: A-C22950  
Amount of Each Receipt this Period: 1000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
American Bankers Association BANKPAC  
Mailing Address 1120 Connecticut Avenue NW  
City State Zip Code  
Washington DC 20036-3902  
FEC ID number of contributing federal political committee. **C** C00004275  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 6500.00  
Date of Receipt: 03 / 24 / 2008  
Transaction ID: A-C22953  
Amount of Each Receipt this Period: 1500.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
American Bankers Association BANKPAC  
Mailing Address 1120 Connecticut Avenue NW  
City State Zip Code  
Washington DC 20036-3902  
FEC ID number of contributing federal political committee. **C** C00004275  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 6500.00  
Date of Receipt: 03 / 24 / 2008  
Transaction ID: A-C22954  
Amount of Each Receipt this Period: 1000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3500.00**  
**TOTAL** 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 52 / 90  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  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)  
Walden For Congress

**A.** Full Name (Last, First, Middle Initial)  
General Electric Co. PAC

Mailing Address 1299 Pennsylvania Avenue NW  
Suite 1100W

City State Zip Code  
Washington DC 20004-2400

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 3 / 2 4 / 2 0 0 8

**Transaction ID:** A-C22947

Amount of Each Receipt this Period  
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
McGuire Woods

Mailing Address Washington Square  
1050 Connecticut Avenue, NW

City State Zip Code  
Washington DC 20036-5317

FEC ID number of contributing federal political committee. **C** C00225342

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 3 / 2 4 / 2 0 0 8

**Transaction ID:** A-C22951

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Nat'l Funeral Directors PAC

Mailing Address 400 C Street NE

City State Zip Code  
Washington DC 20002-5818

FEC ID number of contributing federal political committee. **C** C00204008

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 3 / 2 4 / 2 0 0 8

**Transaction ID:** A-C22956

Amount of Each Receipt this Period  
1500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **4500.00**

**TOTAL** 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 53 / 90  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Walden For Congress

**A.** Full Name (Last, First, Middle Initial)  
Physical Therapy PAC

Mailing Address 1111 N Fairfax Street

City State Zip Code  
Alexandria VA 22314-1484

FEC ID number of contributing federal political committee. **C** C00012880

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
03 / 24 / 2008

**Transaction ID:** A-C22949

Amount of Each Receipt this Period  
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Physician Hospitals of America

Mailing Address 2600 S Minnesota Avenue  
Suite 202

City State Zip Code  
Sioux Falls SD 57105-4731

FEC ID number of contributing federal political committee. **C** C00394163

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt  
MM / DD / YYYY  
03 / 24 / 2008

**Transaction ID:** A-C22955

Amount of Each Receipt this Period  
1500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Syngenta Corporation PAC

Mailing Address 1399 New York Avenue NW  
Suite 750

City State Zip Code  
Washington DC 20005-4777

FEC ID number of contributing federal political committee. **C** C00363945

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
03 / 26 / 2008

**Transaction ID:** A-C22971

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **4500.00**

**TOTAL** 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 54 / 90  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Walden For Congress

**A.** Full Name (Last, First, Middle Initial)  
US Telecom Assn PAC

Mailing Address 607 14th Street NW

City Washington State DC Zip Code 20005-2000

FEC ID number of contributing federal political committee. **C** C00000984

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: MM / DD / YYYY  
03 / 26 / 2008

**Transaction ID:** A-C22974

Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Verizon Communications PAC

Mailing Address 1300 I Street NW Suite 400

City Washington State DC Zip Code 20005-3314

FEC ID number of contributing federal political committee. **C** C00186288

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 8000.00

Date of Receipt: MM / DD / YYYY  
03 / 26 / 2008

**Transaction ID:** A-C22972

Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Verizon Communications PAC

Mailing Address 1300 I Street NW Suite 400

City Washington State DC Zip Code 20005-3314

FEC ID number of contributing federal political committee. **C** C00186288

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 8000.00

Date of Receipt: MM / DD / YYYY  
03 / 26 / 2008

**Transaction ID:** A-C22973

Amount of Each Receipt this Period: 3000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 5000.00

**TOTAL** 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 55 / 90  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Walden For Congress

**A.** Full Name (Last, First, Middle Initial)  
ACRE PAC

Mailing Address 4301 Wilson Boulevard

City State Zip Code  
Arlington VA 22203-1867

FEC ID number of contributing federal political committee. **C** C00002972

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5465.75

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	8	/	2	0	0	8

**Transaction ID:** A-C22978

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
DCI PAC

Mailing Address 1828 L Street NW Suite 400

City State Zip Code  
Washington DC 20036-5115

FEC ID number of contributing federal political committee. **C** C00412395

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	8	/	2	0	0	8

**Transaction ID:** A-C22977

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Health Net Inc PAC

Mailing Address 2107 Wilson Boulevard Suite 900

City State Zip Code  
Arlington VA 22201-3096

FEC ID number of contributing federal political committee. **C** C00230789

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	8	/	2	0	0	8

**Transaction ID:** A-C22976

Amount of Each Receipt this Period  
1500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2750.00**

**TOTAL** 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 56 / 90  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  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)  
Walden For Congress

**A.** Full Name (Last, First, Middle Initial)  
Time Warner PAC

Mailing Address 800 Connecticut Avenue NW  
# 1200

City Washington State DC Zip Code 20006-2709

FEC ID number of contributing federal political committee. **C** C00431551

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 3 / 2 8 / 2 0 0 8

**Transaction ID:** A-C22975

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Doctors' Company Federal PAC (DOCPAC) ; The

Mailing Address 185 Greenwood Road

City Napa State CA Zip Code 94558-6270

FEC ID number of contributing federal political committee. **C** C00300376

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 3 / 3 1 / 2 0 0 8

**Transaction ID:** A-C22994

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
eBay Inc Committee for Responsible Internet Commerce

Mailing Address 228 S Washington Street  
Suite 115

City Alexandria State VA Zip Code 22314-5404

FEC ID number of contributing federal political committee. **C** C00342394

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 3 / 3 1 / 2 0 0 8

**Transaction ID:** A-C22996

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3000.00**

**TOTAL** 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 57 / 90  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  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)  
Walden For Congress

**A.** Full Name (Last, First, Middle Initial)  
Greenberg Traurig LLP PAC

Mailing Address 800 Connecticut Avenue NW  
Suite 500

City Washington State DC Zip Code 20006-2728

FEC ID number of contributing federal political committee. **C** C00266585

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 03 / 31 / 2008  
**Transaction ID:** A-C22993  
 Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
News America Holdings (FOX PAC)

Mailing Address 444 N Capitol Street NW  
Suite 740

City Washington State DC Zip Code 20001-1512

FEC ID number of contributing federal political committee. **C** C00330019

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 03 / 31 / 2008  
**Transaction ID:** A-C22997  
 Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Sprint Nextel PAC

Mailing Address 900 7th Street NW  
Suite 700

City Washington State DC Zip Code 20001-3886

FEC ID number of contributing federal political committee. **C** C00089342

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 03 / 31 / 2008  
**Transaction ID:** A-C22998  
 Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3000.00

**TOTAL** This Period (last page this line number only) ..... ► 74750.00

# 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 / 90
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Walden For Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) CRB Financial Services		Date of Receipt
	Mailing Address PO Box 1030		<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	The Dalles	OR	97058-9030
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	Transaction ID: A-M22865
Receipt For: 2008		Amount of Each Receipt this Period	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Election Cycle-to-Date ▼	<input type="text" value="1609.94"/>	
<input type="checkbox"/> Other (specify) ▼	<input type="text" value="15297.89"/>	interest income	
<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)			

<b>B.</b>	Full Name (Last, First, Middle Initial) CRB Financial Services		Date of Receipt
	Mailing Address PO Box 1030		<input type="text" value="02"/> / <input type="text" value="29"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	The Dalles	OR	97058-9030
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	Transaction ID: A-M22866
Receipt For: 2008		Amount of Each Receipt this Period	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Election Cycle-to-Date ▼	<input type="text" value="1141.45"/>	
<input type="checkbox"/> Other (specify) ▼	<input type="text" value="15297.89"/>	interest income	
<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)			

<b>C.</b>	Full Name (Last, First, Middle Initial) CRB Financial Services		Date of Receipt
	Mailing Address PO Box 1030		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	The Dalles	OR	97058-9030
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	Transaction ID: A-M23025
Receipt For: 2008		Amount of Each Receipt this Period	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Election Cycle-to-Date ▼	<input type="text" value="1522.95"/>	
<input type="checkbox"/> Other (specify) ▼	<input type="text" value="15297.89"/>	interest on money market	
<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="4274.34"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="4274.34"/>

# 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 59 / 90

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Walden For Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) America On Line</p> <p>Mailing Address 22000 Aol Way</p> <p>City Sterling State VA Zip Code 20166-9302</p> <p>Purpose of Disbursement internet service Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-S-4648 <b>Date of Disbursement</b> 01 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 25.90</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b> Subitemization of VISA(01-01/08)</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Cascade Political Consulting</p> <p>Mailing Address Brian Hard 15481 Tanger Drive</p> <p>City Lake Oswego State OR Zip Code 97035</p> <p>Purpose of Disbursement campaign management Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-22448 <b>Date of Disbursement</b> 01 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 5416.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Columbia River Insurance</p> <p>Mailing Address 606 State Street</p> <p>City Hood River State OR Zip Code 97031-1803</p> <p>Purpose of Disbursement rent Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-22447 <b>Date of Disbursement</b> 01 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 327.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

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

5743.00

**TOTAL** 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 60 / 90

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Walden For Congress

<p><b>A.</b> Complete Campaigns</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 610 Gateway Center Way Suite K</p> <p>City San Diego State CA Zip Code 92102-4548</p> <p>Purpose of Disbursement FEC software</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-S-4646</p> <p>Date of Disbursement 01 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 250.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b> Subitemization of VISA(01-01/08)</p>
<p><b>B.</b> Embarq Communication</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 660068</p> <p>City Dallas State TX Zip Code 75266-0068</p> <p>Purpose of Disbursement telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-22450</p> <p>Date of Disbursement 01 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 143.46</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Embarq Communications</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 219100</p> <p>City Kansas City State MO Zip Code 64121-9100</p> <p>Purpose of Disbursement telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-22451</p> <p>Date of Disbursement 01 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 64.31</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

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

207.77

**TOTAL** 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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Walden For Congress

A.	Full Name (Last, First, Middle Initial) Gorge Networks	Transaction ID: B-S-4643
	Mailing Address PO Box 1107	Date of Disbursement 01 / 01 / 2008
	City Hood River State OR Zip Code 97031-0038	Amount of Each Disbursement this Period 49.00
	Purpose of Disbursement internet service Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> Category/Type 001
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b> Subitemization of VISA(01-01/08)

B.	Full Name (Last, First, Middle Initial) Pitney Bowes	Transaction ID: B-E-22453
	Mailing Address PO Box 856390	Date of Disbursement 01 / 01 / 2008
	City Louisville State KY Zip Code 40285-6390	Amount of Each Disbursement this Period 768.99
	Purpose of Disbursement postage & delivery Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> Category/Type 001
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Print It	Transaction ID: B-E-22452
	Mailing Address 1802 Cascade Avenue	Date of Disbursement 01 / 01 / 2008
	City Hood River State OR Zip Code 97031-3122	Amount of Each Disbursement this Period 1772.00
	Purpose of Disbursement printing Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> Category/Type 001
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2540.99</b>
<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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Walden For Congress

A.

Full Name (Last, First, Middle Initial)  
Rodacamar Farms Inc

Mailing Address 3009 Dethman Ridge Road

City State Zip Code  
Hood River OR 97031-8528

Purpose of Disbursement  
bookkeeping  
Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼  
State: District:

Transaction ID: B-E-22449  
Date of Disbursement

01 / 01 / 2008

Amount of Each Disbursement this Period

2500.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)  
Seaside Vacation Homes

Mailing Address 2675 Sunset Boulevard

City State Zip Code  
Seaside OR 97138-5087

Purpose of Disbursement  
lodging  
Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼  
State: District:

Transaction ID: B-S-4651  
Date of Disbursement

01 / 01 / 2008

Amount of Each Disbursement this Period

738.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

Subitemization of VISA(01-01/08)

C.

Full Name (Last, First, Middle Initial)  
Staples

Mailing Address Jantzen Beach Center

City State Zip Code  
Portland OR 97205

Purpose of Disbursement  
office supplies  
Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼  
State: District:

Transaction ID: B-S-4645  
Date of Disbursement

01 / 01 / 2008

Amount of Each Disbursement this Period

165.48

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

Subitemization of VISA(01-01/08)

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

2500.00

TOTAL 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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Walden For Congress

A.

Full Name (Last, First, Middle Initial)  
The Westin Portland

Mailing Address 750 SW Alder Street

City Portland State OR Zip Code 97205-3412

Purpose of Disbursement  
food & beverage

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-S-4642

Date of Disbursement

01 / 01 / 2008

Amount of Each Disbursement this Period

45.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

Subitemization of VISA(01-01/08)

B.

Full Name (Last, First, Middle Initial)  
Tortilla Coast

Mailing Address 400 1st Street SE

City Washington State DC Zip Code 20003-1826

Purpose of Disbursement  
food & beverage

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-S-4652

Date of Disbursement

01 / 01 / 2008

Amount of Each Disbursement this Period

110.21

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

Subitemization of VISA(01-01/08)

C.

Full Name (Last, First, Middle Initial)  
US Postal Service

Mailing Address 408 Cascade Avenue

City Hood River State OR Zip Code 97031-7031

Purpose of Disbursement  
postage & delivery

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-S-4647

Date of Disbursement

01 / 01 / 2008

Amount of Each Disbursement this Period

205.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

Subitemization of VISA(01-01/08)

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

0.00

TOTAL 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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Walden For Congress

A.	Full Name (Last, First, Middle Initial) VISA	Transaction ID: B-E-22446 Date of Disbursement 01 / 01 / 2008
	Mailing Address PO Box 30131	Amount of Each Disbursement this Period 1765.52
	City Tampa State FL Zip Code 33630-3131	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement credit card payment Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Original vendors exceeding reporting threshold itemized as memo transactions.
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Marta Simons	Transaction ID: B-E-22623 Date of Disbursement 01 / 02 / 2008
	Mailing Address 2870 Prospect Avenue	Amount of Each Disbursement this Period 1500.00
	City Hood River State OR Zip Code 97031-1061	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement bookkeeping Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Authorize.Net	Transaction ID: B-E-22863 Date of Disbursement 01 / 03 / 2008
	Mailing Address 915 S 500 E Suite 200	Amount of Each Disbursement this Period 20.85
	City American Fork State UT Zip Code 84003-3373	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement internet billing Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3286.37</b>
<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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Walden For Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Columbia River Bank</p> <p>Mailing Address PO Box 980</p> <p>City Hood River State OR Zip Code 97031-0032</p> <p>Purpose of Disbursement credit card transaction billin Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-22864 <b>Date of Disbursement</b> 01 / 03 / 2008</p> <p>Amount of Each Disbursement this Period 412.52</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Allen's Clipping Service</p> <p>Mailing Address 621 SW Alder Street Suite 540</p> <p>City Portland State OR Zip Code 97205-3620</p> <p>Purpose of Disbursement news clipping service Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-22549 <b>Date of Disbursement</b> 01 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 92.85</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Postal Annex</p> <p>Mailing Address 2149 Cascade Avenue Suite 106A</p> <p>City Hood River State OR Zip Code 97031-1087</p> <p>Purpose of Disbursement postage &amp; delivery Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-22550 <b>Date of Disbursement</b> 01 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 13.05</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

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

518.42

**TOTAL** 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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Walden For Congress

A.

Full Name (Last, First, Middle Initial)  
Jackson Co GOP

Transaction ID: B-E-22587

Mailing Address PO Box 1801

Date of Disbursement

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

City Medford State OR Zip Code 97501-0142

Amount of Each Disbursement this Period

500.00
--------

Purpose of Disbursement  
Lincoln Day Dinner tickets

001  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Jackson Co GOP

Transaction ID: B-S-4654

Mailing Address PO Box 1801

Date of Disbursement

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

City Medford State OR Zip Code 97501-0142

Amount of Each Disbursement this Period

110.00
--------

Purpose of Disbursement  
reception tickets

001  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

[MEMO ITEM]

Subitemization of John Snider(01/18/08)

C.

Full Name (Last, First, Middle Initial)  
John W. Snider

Transaction ID: B-E-22588

Mailing Address 5090 Pleasant Creek Road

Date of Disbursement

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

City Rogue River State OR Zip Code 97537-4752

Amount of Each Disbursement this Period

343.32
--------

Purpose of Disbursement  
expense advance

001  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

Original vendors exceeding reporting threshold itemized as memo transactions.

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

843.32

TOTAL 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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Walden For Congress

A.

Full Name (Last, First, Middle Initial)  
Chalice Roy

Mailing Address 7849 Middy Lane

City State Zip Code  
Alexandria VA 22306-2723

Purpose of Disbursement  
fundraising  
Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼  
State: District:

Transaction ID: B-E-22590  
Date of Disbursement

01 / 21 / 2008

Amount of Each Disbursement this Period

2500.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)  
Stafford Studios

Mailing Address 6270 SE 29th Way

City State Zip Code  
Gresham OR 97080-8189

Purpose of Disbursement  
website design  
Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼  
State: District:

Transaction ID: B-E-22592  
Date of Disbursement

01 / 21 / 2008

Amount of Each Disbursement this Period

400.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)  
US Postal Service

Mailing Address 408 Cascade Avenue

City State Zip Code  
Hood River OR 97031-7031

Purpose of Disbursement  
business reply mail fee  
Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼  
State: District:

Transaction ID: B-E-22591  
Date of Disbursement

01 / 21 / 2008

Amount of Each Disbursement this Period

725.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

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

3625.00

TOTAL 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 68 / 90

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Walden For Congress

**A.**

Full Name (Last, First, Middle Initial)  
Peggy Sato

Mailing Address 875 Caroline Street S

City State Zip Code  
Salem OR 97302-5842

Purpose of Disbursement  
reimbursement for dinner expen  
Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President  
State: District:  
Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: B-E-22589  
Date of Disbursement

01 / 21 / 2008

Amount of Each Disbursement this Period

649.51

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Original vendors exceeding  
reporting threshold itemi-  
zed as memo transactions.

**B.**

Full Name (Last, First, Middle Initial)  
AT&T Mobility

Mailing Address PO Box 6463

City State Zip Code  
Carol Stream IL 60197-6463

Purpose of Disbursement  
wireless telephone  
Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President  
State: District:  
Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: B-E-22593  
Date of Disbursement

01 / 22 / 2008

Amount of Each Disbursement this Period

633.05

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)  
Embarq Communications

Mailing Address PO Box 219100

City State Zip Code  
Kansas City MO 64121-9100

Purpose of Disbursement  
telephone  
Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President  
State: District:  
Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: B-E-22594  
Date of Disbursement

01 / 22 / 2008

Amount of Each Disbursement this Period

63.99

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

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

1346.55

**TOTAL** 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 / 90

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Walden For Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Embarq Communication</p> <p>Mailing Address PO Box 660068</p> <p>City Dallas State TX Zip Code 75266-0068</p> <p>Purpose of Disbursement telephone, DSL &amp; fax Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-22612 <b>Date of Disbursement</b> 01 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 143.19</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) OR Mutual Insurance</p> <p>Mailing Address PO Box 3208</p> <p>City Portland State OR Zip Code 97208-3208</p> <p>Purpose of Disbursement property insurance Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-22613 <b>Date of Disbursement</b> 01 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 300.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Allen's Clipping Service</p> <p>Mailing Address 621 SW Alder Street Suite 540</p> <p>City Portland State OR Zip Code 97205-3620</p> <p>Purpose of Disbursement newspaper clipping Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-22618 <b>Date of Disbursement</b> 01 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 102.03</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

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

545.22

**TOTAL** 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)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Walden For Congress

A.	Full Name (Last, First, Middle Initial) America On Line	Transaction ID: B-S-4664 Date of Disbursement 01 / 31 / 2008
	Mailing Address 22000 Aol Way	Amount of Each Disbursement this Period 25.90
	City Sterling State VA Zip Code 20166-9302	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> Subitemization of VISA(01-31/08)
	Purpose of Disbursement internet services Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: B-E-22622 Date of Disbursement 01 / 31 / 2008
	Mailing Address PO Box 37291	Amount of Each Disbursement this Period 2597.60
	City Baltimore State MD Zip Code 21297-3291	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Original vendors exceeding reporting threshold itemized as memo transactions.
	Purpose of Disbursement credit card payment Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Gorge Networks	Transaction ID: B-S-4663 Date of Disbursement 01 / 31 / 2008
	Mailing Address PO Box 1107	Amount of Each Disbursement this Period 49.00
	City Hood River State OR Zip Code 97031-0038	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> Subitemization of VISA(01-31/08)
	Purpose of Disbursement internet services Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	2597.60
<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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Walden For Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Purchase Power</p> <p>Mailing Address PO Box 856042</p> <p>City Louisville State KY Zip Code 40285-6042</p> <p>Purpose of Disbursement postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-22620</p> <p>Date of Disbursement 01 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 106.99</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Star Catering</p> <p>Mailing Address 2000 Mount Vernon Avenue</p> <p>City Alexandria State VA Zip Code 22301-1310</p> <p>Purpose of Disbursement food &amp; beverages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-S-4666</p> <p>Date of Disbursement 01 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 1103.60</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b> Subitemization of Bank of America(01/31/08)</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) VISA</p> <p>Mailing Address PO Box 30131</p> <p>City Tampa State FL Zip Code 33630-3131</p> <p>Purpose of Disbursement credit card payment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-22621</p> <p>Date of Disbursement 01 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 74.90</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>Original vendors exceeding reporting threshold itemized as memo transactions.</p>

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

181.89

**TOTAL** 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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Walden For Congress

A.

Full Name (Last, First, Middle Initial)  
Willamette Valley Vineyards

Mailing Address Enchanted Way SW

City State Zip Code  
Turner OR 97392

Purpose of Disbursement  
wine purchase

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-S-4665  
Date of Disbursement

01 / 31 / 2008

Amount of Each Disbursement this Period

1494.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**[MEMO ITEM]**

Subitemization of Bank of America(01/31/08)

B.

Full Name (Last, First, Middle Initial)  
Cascade Political Consulting

Mailing Address Brian Hard  
15481 Tanger Drive

City State Zip Code  
Lake Oswego OR 97035

Purpose of Disbursement  
campaign management

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-E-22625  
Date of Disbursement

02 / 01 / 2008

Amount of Each Disbursement this Period

5416.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)  
Columbia River Insurance

Mailing Address 606 State Street

City State Zip Code  
Hood River OR 97031-1803

Purpose of Disbursement  
rent

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-E-22624  
Date of Disbursement

02 / 01 / 2008

Amount of Each Disbursement this Period

327.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

5743.00

**TOTAL** 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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Walden For Congress

A.

Full Name (Last, First, Middle Initial)  
Rodacamar Farms Inc

Transaction ID: B-E-22626  
Date of Disbursement

Mailing Address 3009 Dethman Ridge Road

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

City State Zip Code  
Hood River OR 97031-8528

Amount of Each Disbursement this Period

2500.00
---------

Purpose of Disbursement  
bookkeeping  
Candidate Name

001
-----

Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  Senate  President  
Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼  
State: District:

B.

Full Name (Last, First, Middle Initial)  
Marta Simons

Transaction ID: B-E-22627  
Date of Disbursement

Mailing Address 2870 Prospect Avenue

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

City State Zip Code  
Hood River OR 97031-1061

Amount of Each Disbursement this Period

1500.00
---------

Purpose of Disbursement  
Candidate Name

001
-----

Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  Senate  President  
Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼  
State: District:

C.

Full Name (Last, First, Middle Initial)  
Authorize.Net

Transaction ID: B-E-22867  
Date of Disbursement

Mailing Address 915 S 500 E  
Suite 200

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	4		2	0	0	8

City State Zip Code  
American Fork UT 84003-3373

Amount of Each Disbursement this Period

20.35
-------

Purpose of Disbursement  
internet billing  
Candidate Name

001
-----

Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  Senate  President  
Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼  
State: District:

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

4020.35
---------

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

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# 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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Walden For Congress

A.

Full Name (Last, First, Middle Initial)  
Columbia River Bank

Transaction ID: B-E-22868  
Date of Disbursement

Mailing Address PO Box 980

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	4		2	0	0	8

City State Zip Code  
Hood River OR 97031-0032

Amount of Each Disbursement this Period

73.13
-------

Purpose of Disbursement  
credit card transaction billin  
Candidate Name

001  
Category/  
Type

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Office Sought:  House  Senate  President  
Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼  
State: District:

B.

Full Name (Last, First, Middle Initial)  
Ronald L. Saxton

Transaction ID: B-I-23028  
Date of Disbursement

Mailing Address 6187 SE Taylor Court

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	6		2	0	0	8

City State Zip Code  
Portland OR 97215-2827

Amount of Each Disbursement this Period

429.72
--------

Purpose of Disbursement  
Inkind: mailing list  
Candidate Name

Category/  
Type

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Office Sought:  House  Senate  President  
Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼  
State: District:

C.

Full Name (Last, First, Middle Initial)  
Lowell's Print-Inn

Transaction ID: B-E-22833  
Date of Disbursement

Mailing Address 3303 SE Milwaukie Avenue

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

City State Zip Code  
Portland OR 97202-2746

Amount of Each Disbursement this Period

4670.39
---------

Purpose of Disbursement  
printing & postage  
Candidate Name

001  
Category/  
Type

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Office Sought:  House  Senate  President  
Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼  
State: District:

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

5173.24
---------

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

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# 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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Walden For Congress

A.

Full Name (Last, First, Middle Initial)  
American Express

Mailing Address PO Box 360001

City Ft Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement  
clothing

Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-E-22834

Date of Disbursement

02 / 15 / 2008

Amount of Each Disbursement this Period

4633.20

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Original vendors exceeding reporting threshold itemized as memo transactions.

B.

Full Name (Last, First, Middle Initial)  
American Express

Mailing Address PO Box 360001

City Ft Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement  
food & beverages

Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-E-22835

Date of Disbursement

02 / 15 / 2008

Amount of Each Disbursement this Period

512.78

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Original vendors exceeding reporting threshold itemized as memo transactions.

C.

Full Name (Last, First, Middle Initial)  
Costco

Mailing Address 1200 S Fern Street

City Arlington State VA Zip Code 22202-2862

Purpose of Disbursement  
food & beverages

Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-S-4668

Date of Disbursement

02 / 15 / 2008

Amount of Each Disbursement this Period

512.78

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**[MEMO ITEM]**  
Subitemization of American Express(02/15/08)

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

5145.98

TOTAL 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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Walden For Congress

A.	Full Name (Last, First, Middle Initial) Internal Revenue Service	Transaction ID: B-E-22837 Date of Disbursement
	Mailing Address Internal Revenue Service Center	<input type="text" value="02"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Ogden State UT Zip Code 84201-0027	Amount of Each Disbursement this Period
	Purpose of Disbursement 1120 POL Taxes	<input type="text" value="1280.00"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/Type <input type="text" value="001"/>
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Land's End Inc	Transaction ID: B-S-4667 Date of Disbursement
	Mailing Address 1 Lands End Lane	<input type="text" value="02"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Dodgeville State WI Zip Code 53595-0001	Amount of Each Disbursement this Period
	Purpose of Disbursement clothing	<input type="text" value="4633.20"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM] Subitemization of American Express(02/15/08)
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) OR Dept of Revenue	Transaction ID: B-E-22838 Date of Disbursement
	Mailing Address 14800 PO Box	<input type="text" value="02"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Salem State OR Zip Code 97310-0001	Amount of Each Disbursement this Period
	Purpose of Disbursement 1120 POL Taxes	<input type="text" value="601.00"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1881.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# 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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Walden For Congress

A.

Full Name (Last, First, Middle Initial)  
Klamath County GOP

Transaction ID: B-E-22839

Mailing Address PO Box 427

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	9		2	0	0	8

City State Zip Code  
Fort Klamath OR 97626-0427

Amount of Each Disbursement this Period

300.00
--------

Purpose of Disbursement  
event fee

001  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
American Express

Transaction ID: B-E-22840

Mailing Address PO Box 360001

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	7		2	0	0	8

City State Zip Code  
Ft Lauderdale FL 33336-0001

Amount of Each Disbursement this Period

718.45
--------

Purpose of Disbursement  
clothing

001  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Original vendors exceeding reporting threshold itemized as memo transactions.

C.

Full Name (Last, First, Middle Initial)  
Land's End Inc

Transaction ID: B-S-4670

Mailing Address 1 Lands End Lane

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	7		2	0	0	8

City State Zip Code  
Dodgeville WI 53595-0001

Amount of Each Disbursement this Period

718.45
--------

Purpose of Disbursement  
clothing

001  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**[MEMO ITEM]**  
Subitemization of American Express(02/27/08)

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

1018.45
---------

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

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**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Walden For Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Dorchester Conference</p> <p>Mailing Address 4089 Melissa Drive</p> <p>City Lake Oswego State OR Zip Code 97034-7205</p> <p>Purpose of Disbursement event sponsorship &amp; conference</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-22842</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Dorchester Conference</p> <p>Mailing Address 4089 Melissa Drive</p> <p>City Lake Oswego State OR Zip Code 97034-7205</p> <p>Purpose of Disbursement conference registration</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-22843</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 300.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Secretary of State</p> <p>Mailing Address 141 State Capitol</p> <p>City Salem State OR Zip Code 97310</p> <p>Purpose of Disbursement candidate filing fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-22845</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 1100.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

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

**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Walden For Congress

A.	Full Name (Last, First, Middle Initial) Cascade Political Consulting	Transaction ID: B-E-22848 Date of Disbursement 03 / 01 / 2008
	Mailing Address Brian Hard 15481 Tanger Drive	Amount of Each Disbursement this Period 5416.00
	City Lake Oswego State OR Zip Code 97035	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement campaign management Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

B.	Full Name (Last, First, Middle Initial) Chalice Roy	Transaction ID: B-E-22846 Date of Disbursement 03 / 01 / 2008
	Mailing Address 7849 Middy Lane	Amount of Each Disbursement this Period 2932.31
	City Alexandria State VA Zip Code 22306-2723	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement fundraising/blast faxes Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type
		Original vendors exceeding reporting threshold itemized as memo transactions.

C.	Full Name (Last, First, Middle Initial) Columbia River Insurance	Transaction ID: B-E-22847 Date of Disbursement 03 / 01 / 2008
	Mailing Address 606 State Street	Amount of Each Disbursement this Period 327.00
	City Hood River State OR Zip Code 97031-1803	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement rent Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>8675.31</b>
<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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Walden For Congress

A.	Full Name (Last, First, Middle Initial) Premiere Global Services	Transaction ID: B-S-4671 Date of Disbursement 03 / 01 / 2008
	Mailing Address Data Communications Div 1268 Payshire Circle	Amount of Each Disbursement this Period 432.31
	City Chicago State IL Zip Code 60674	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> Subitemization of Chalice Roy(03/01/08)
	Purpose of Disbursement blast faxes Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/ Type

B.	Full Name (Last, First, Middle Initial) Marta Simons	Transaction ID: B-E-22849 Date of Disbursement 03 / 01 / 2008
	Mailing Address 2870 Prospect Avenue	Amount of Each Disbursement this Period 1500.00
	City Hood River State OR Zip Code 97031-1061	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement bookkeeping Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/ Type

C.	Full Name (Last, First, Middle Initial) Columbia River Bank	Transaction ID: B-E-23014 Date of Disbursement 03 / 03 / 2008
	Mailing Address PO Box 980	Amount of Each Disbursement this Period 62.94
	City Hood River State OR Zip Code 97031-0032	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement credit card transaction billin Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1562.94
<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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Walden For Congress

A.

Full Name (Last, First, Middle Initial)  
Jane G Mattoon

Mailing Address 6344 Cavalier Corridor

City Falls Church State VA Zip Code 22044-1203

Purpose of Disbursement  
Inkind: food & beverage  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼  
State: District:

Transaction ID: B-I-22932  
Date of Disbursement

03 / 03 / 2008

Amount of Each Disbursement this Period

650.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)  
Authorize.Net

Mailing Address 915 S 500 E Suite 200

City American Fork State UT Zip Code 84003-3373

Purpose of Disbursement  
internet billing  
Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼  
State: District:

Transaction ID: B-E-23013  
Date of Disbursement

03 / 04 / 2008

Amount of Each Disbursement this Period

19.95

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)  
Allen's Clipping Service

Mailing Address 621 SW Alder Street Suite 540

City Portland State OR Zip Code 97205-3620

Purpose of Disbursement  
press clippings  
Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼  
State: District:

Transaction ID: B-E-22850  
Date of Disbursement

03 / 05 / 2008

Amount of Each Disbursement this Period

99.48

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

769.43

TOTAL 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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Walden For Congress

A.	Full Name (Last, First, Middle Initial) America On Line	Transaction ID: B-S-4678 Date of Disbursement 03 / 05 / 2008
	Mailing Address 22000 Aol Way	Amount of Each Disbursement this Period 25.90
	City Sterling State VA Zip Code 20166-9302	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> Subitemization of VISA(03-/05/08)
	Purpose of Disbursement internet service Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) AT&T Mobility	Transaction ID: B-E-22854 Date of Disbursement 03 / 05 / 2008
	Mailing Address PO Box 6463	Amount of Each Disbursement this Period 445.21
	City Carol Stream State IL Zip Code 60197-6463	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement telephone service Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Embarq Communication	Transaction ID: B-E-22853 Date of Disbursement 03 / 05 / 2008
	Mailing Address PO Box 660068	Amount of Each Disbursement this Period 143.19
	City Dallas State TX Zip Code 75266-0068	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement telephone service Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>588.40</b>
<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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Walden For Congress

A.

Full Name (Last, First, Middle Initial)  
Embarq Communications

Transaction ID: B-E-22852  
Date of Disbursement

Mailing Address PO Box 219100

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	5		2	0	0	8

City State Zip Code  
Kansas City MO 64121-9100

Amount of Each Disbursement this Period

64.00
-------

Purpose of Disbursement  
telephone service

001
-----

Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Gorge Networks

Transaction ID: B-S-4677  
Date of Disbursement

Mailing Address PO Box 1107

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	5		2	0	0	8

City State Zip Code  
Hood River OR 97031-0038

Amount of Each Disbursement this Period

49.00
-------

Purpose of Disbursement  
internet service

001
-----

Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**[MEMO ITEM]**

Subitemization of VISA(03-05/08)

C.

Full Name (Last, First, Middle Initial)  
Jake's Grill

Transaction ID: B-S-4675  
Date of Disbursement

Mailing Address 611 SW 10th Avenue

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	5		2	0	0	8

City State Zip Code  
Portland OR 97205-2725

Amount of Each Disbursement this Period

216.83
--------

Purpose of Disbursement  
meals

001
-----

Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**[MEMO ITEM]**

Subitemization of VISA(03-05/08)

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

64.00
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**TOTAL** This Period (last page this line number only) ..... ▶

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**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Walden For Congress

A.	Full Name (Last, First, Middle Initial) Postal Annex	Transaction ID: B-S-4680 Date of Disbursement 03 / 05 / 2008
	Mailing Address 2149 Cascade Avenue Suite 106A	Amount of Each Disbursement this Period 62.43
	City Hood River State OR Zip Code 97031-1087	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement fed ex shipping charges Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> Subitemization of VISA(03-05/08)
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Print It	Transaction ID: B-E-22851 Date of Disbursement 03 / 05 / 2008
	Mailing Address 1802 Cascade Avenue	Amount of Each Disbursement this Period 26.00
	City Hood River State OR Zip Code 97031-3122	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement printing Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Purchase Power	Transaction ID: B-E-22856 Date of Disbursement 03 / 05 / 2008
	Mailing Address PO Box 856042	Amount of Each Disbursement this Period 224.49
	City Louisville State KY Zip Code 40285-6042	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement postage meter Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	250.49
<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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Walden For Congress

A.

Full Name (Last, First, Middle Initial)  
Taste

Mailing Address 3516 Valley Drive

City Alexandria State VA Zip Code 22302-2131

Purpose of Disbursement  
food for event  
Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼  
State: District:

Transaction ID: B-E-22858  
Date of Disbursement

03 / 05 / 2008

Amount of Each Disbursement this Period

600.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)  
Us House Gift Shop

Mailing Address Capitol Building

City Washington State DC Zip Code 20016

Purpose of Disbursement  
gifts  
Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼  
State: District:

Transaction ID: B-S-4672  
Date of Disbursement

03 / 05 / 2008

Amount of Each Disbursement this Period

225.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

Subitemization of VISA(03-05/08)

C.

Full Name (Last, First, Middle Initial)  
VISA

Mailing Address PO Box 30131

City Tampa State FL Zip Code 33630-3131

Purpose of Disbursement  
credit card payment  
Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼  
State: District:

Transaction ID: B-E-22857  
Date of Disbursement

03 / 05 / 2008

Amount of Each Disbursement this Period

878.86

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Original vendors exceeding reporting threshold itemized as memo transactions.

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

1478.86

TOTAL 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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Walden For Congress

A.

Full Name (Last, First, Middle Initial)  
Woodshack

Mailing Address PO Box 5267

City Klamath Falls State OR Zip Code 97601-0127

Purpose of Disbursement

food for event

Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-E-22855

Date of Disbursement

03 / 05 / 2008

Amount of Each Disbursement this Period

450.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)  
Deschutes County Republican Central Comm

Mailing Address PO Box 5265

City Bend State OR Zip Code 97708-5265

Purpose of Disbursement

event fee

Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-E-22860

Date of Disbursement

03 / 07 / 2008

Amount of Each Disbursement this Period

250.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)  
Brewster/Jory Associates

Mailing Address 499 S Capitol Street SW  
Suite 608

City Washington State DC Zip Code 20003-4049

Purpose of Disbursement

Inkind: room rental fee

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-I-23027

Date of Disbursement

03 / 10 / 2008

Amount of Each Disbursement this Period

250.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

950.00

TOTAL 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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Walden For Congress

A.

Full Name (Last, First, Middle Initial)  
Brewster/Jory Associates

Transaction ID: B-I-23029  
Date of Disbursement

Mailing Address 499 S Capitol Street SW  
Suite 608

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	0		2	0	0	8

City Washington State DC Zip Code 20003-4049

Amount of Each Disbursement this Period

250.00
--------

Purpose of Disbursement  
Inkind: room rental fee

001
-----

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Capitol Hill Club

Transaction ID: B-E-22862  
Date of Disbursement

Mailing Address 300 1st Street SE

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	2		2	0	0	8

City Washington State DC Zip Code 20003-1801

Amount of Each Disbursement this Period

788.07
--------

Purpose of Disbursement  
food & beverage

001
-----

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Accurate Word Inc

Transaction ID: B-S-4698  
Date of Disbursement

Mailing Address PO Box 1765

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	7		2	0	0	8

City White Plains State MD Zip Code 20695-1765

Amount of Each Disbursement this Period

1625.70
---------

Purpose of Disbursement  
stationery printing

001
-----

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**[MEMO ITEM]**  
Subitemization of Bank of  
America(03/17/08)

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

1038.07
---------

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

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# 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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Walden For Congress

A.

Full Name (Last, First, Middle Initial)  
Bank of America

Mailing Address PO Box 37291

City Baltimore State MD Zip Code 21297-3291

Purpose of Disbursement  
credit card payment

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-E-23012  
Date of Disbursement

03 / 17 / 2008

Amount of Each Disbursement this Period

1958.45

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Original vendors exceeding reporting threshold itemized as memo transactions.

B.

Full Name (Last, First, Middle Initial)  
OR Dept of Revenue

Mailing Address 14800 PO Box

City Salem State OR Zip Code 97310-0001

Purpose of Disbursement  
corp. estimated taxes

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-E-22945  
Date of Disbursement

03 / 17 / 2008

Amount of Each Disbursement this Period

150.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)  
Tortilla Coast

Mailing Address 400 1st Street SE

City Washington State DC Zip Code 20003-1826

Purpose of Disbursement  
food & beverage

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-S-4697  
Date of Disbursement

03 / 17 / 2008

Amount of Each Disbursement this Period

332.75

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**[MEMO ITEM]**  
Subitemization of Bank of America(03/17/08)

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

2108.45

TOTAL 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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Walden For Congress

A.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: B-E-22946 Date of Disbursement																			
	Mailing Address PO Box 360001	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	8		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	8		2	0	0	8												
	City Ft Lauderdale State FL Zip Code 33336-0001	Amount of Each Disbursement this Period																			
	Purpose of Disbursement food & beverage	<table border="1"><tr><td>400.45</td></tr></table>	400.45																		
400.45																					
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Original vendors exceeding reporting threshold itemized as memo transactions.																			
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

B.	Full Name (Last, First, Middle Initial) Costco 2	Transaction ID: B-S-4682 Date of Disbursement																			
	Mailing Address 132nd Street	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	8		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	8		2	0	0	8												
	City Portland State OR Zip Code 97225	Amount of Each Disbursement this Period																			
	Purpose of Disbursement food & beverage	<table border="1"><tr><td>337.61</td></tr></table>	337.61																		
337.61																					
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> Subitemization of American Express(03/18/08)																			
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>400.45</td></tr></table>	400.45
400.45		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td>67204.55</td></tr></table>	67204.55
67204.55		

**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 / 90

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Walden For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Oregon Republican Party <hr/> Mailing Address 570 Liberty Street SE Suite 200 <hr/> City Salem State OR Zip Code 97301-3514 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-22611 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 9 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) NRCC <hr/> Mailing Address 320 1st Street SE <hr/> City Washington State DC Zip Code 20003-1838 <hr/> Purpose of Disbursement fundraising letter Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-I-22933 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 8
	Amount of Each Disbursement this Period 404.32 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> Inkind Donation Made

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>1000.00</b>