

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

(Summary Page)

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05/03/2000 17 : 42

1. NAME OF COMMITTEE (in full) <b>Alice Schlenker for Congress</b>		2. FEC IDENTIFICATION NUMBER C00347908
ADDRESS (number and street) 257 Iron Mountain Blvd	<input type="checkbox"/> Check if different than previously reported	
CITY, STATE, and ZIP CODE Lake Oswego OR 97034	STATE / DISTRICT OR / 1	3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

## 4. TYPE OF REPORT

- April 15 Quarterly Report
- Twelfth day report preceding Primary  
(election type)  
election on 05/18/2000 in the State of OR
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report on \_\_\_\_\_ in the State of \_\_\_\_\_
- July 31 Mid-Year Report (Non-election Year Only)
- Thirtieth day report following the General Election
- Termination report

This report contains activity for  Primary election  General election  Runoff election  Special election

## SUMMARY

5. Covering period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
04/01/2000 through 04/28/2000		
6. Net contributions (other than loans)		
(a) Total Contributions (other than loans) (from line 11(a))	10273.30	25471.30
(b) Total Contribution Refunds (from line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	10273.30	25471.30
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from line 17)	9565.15	27135.05
(b) Total Offsets to Operating Expenditures (from line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	9565.15	27135.05
8. Cash on Hand at Close of Reporting Period (from line 27)	33226.76	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	25000.00	

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

**Electronically Filed by Kenneth W. Ivey**

Signature of Treasurer

Date

05/03/2000

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

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**FEC FORM 3**  
(revised 4/87)

**DETAILED SUMMARY PAGE**  
**of Receipts and Disbursements**  
**(Page 2, FEG Form 3)**

Name of Committee (In Full) Alice Schlenker for Congress	Report Covering the Period From: 04/01/2000 To: 04/26/2000	
<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-To-Date</b>
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees .....		
(i) Itemized (use Schedule A) .....	7103.85	
(ii) Unitemized .....	1369.45	
(iii) Total of contributions from individuals .....	8473.30	16171.30
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	1000.00	8500.00
(d) The Candidate .....	800.00	800.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))	10273.30	25471.30
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate .....	0.00	20000.00
(b) All Other Loans .....	0.00	0.00
(c) TOTAL LOANS (add 13(a) and (b)) .....	0.00	20000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.) .....	0.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15) .....	10273.30	45471.30
<b>II. DISBURSEMENTS</b>		
17. OPERATING EXPENDITURES .....	9565.15	27135.05
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 19(a) and (b)) .....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c)) .....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21) .....	9565.15	27135.05
<b>III. CASH SUMMARY</b>		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD .....		32518.61
24. TOTAL RECEIPTS THIS PERIOD (from Line 16) .....		10273.30
25. SUBTOTAL (add Line 23 and Line 24) .....		42791.91
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) .....		9565.15
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)		33226.76

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		Use separate schedule(s) for each category of the Detailed Summary Page	<b>3 / 8</b>
				FOR LINE NUMBER <b>11A1</b>	
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.					
<b>NAME OF COMMITTEE (In Full)</b> <b>Alice Schlenker for Congress</b>					
<b>Full Name, Mailing Address, and ZIP Code</b> C. M. Bishop, Jr.  PO Box 3030  Portland OR 97208		Name of Employer Pendleton Woolen Mills		Date (month, day, year) 04/20/2000	Amount of Each Receipt this Period 500.00 Contribution
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Vice-Chairman			
		Aggregate Year-to-Date > \$ 500.00			
<b>Full Name, Mailing Address, and ZIP Code</b> William J. Bolt  10123 SE Britlary Ct.  Clackamas OR 97015		Name of Employer ABC Roofing Co.		Date (month, day, year) 04/20/2000	Amount of Each Receipt this Period 1000.00 Contribution
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Roofer			
		Aggregate Year-to-Date > \$ 1000.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Harry A. Dick, Jr.  31635 SW Village Crest Ct.  Wilsonville OR 97070		Name of Employer Retired		Date (month, day, year) 04/20/2000	Amount of Each Receipt this Period 500.00 Contribution
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation			
		Aggregate Year-to-Date > \$ 500.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Mary B. Hoffman  441 NW Hilltop Rd  Portland OR 97210		Name of Employer		Date (month, day, year) 04/20/2000	Amount of Each Receipt this Period 250.00 Contribution
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Housewife			
		Aggregate Year-to-Date > \$ 250.00			
<b>Full Name, Mailing Address, and ZIP Code</b> W. Bums Hoffman  1908 Boundary Dr.  Santa Barbara CA 93108		Name of Employer Retired		Date (month, day, year) 04/20/2000	Amount of Each Receipt this Period 500.00 Contribution
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation			
		Aggregate Year-to-Date > \$ 500.00			
<b>Full Name, Mailing Address, and ZIP Code</b> James B. Johnson  11175 NW Saltzman Rd  Portland OR 97229		Name of Employer Intel Corporation		Date (month, day, year) 04/20/2000	Amount of Each Receipt this Period 500.00 Contribution
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Manager			
		Aggregate Year-to-Date > \$ 500.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Erich R. Mueller  1425 NE 7th Ave Apt 328 Portland OR 97232		Name of Employer Retired		Date (month, day, year) 04/20/2000	Amount of Each Receipt this Period 1000.00 Contribution
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation			
		Aggregate Year-to-Date > \$ 1000.00			
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....					
<b>TOTALS</b> This Period (last page this line number only) .....					

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		4 / 8
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER <b>11A1</b>
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<b>NAME OF COMMITTEE (In Full)</b> <b>Alice Schlenker for Congress</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> E. Kay Stepp  3043 SW Bennington Dr.  Portland OR 97201  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Self-employed  <b>Occupation</b>  <b>Aggregate Year-to-Date</b> > \$ 250.00	<b>Date (month, day, year)</b> 04/20/2000	<b>Amount of Each Receipt this Period</b> 250.00 Contribution	
<b>Full Name, Mailing Address, and ZIP Code</b> Robert J. Wilhelm, Sr.  3250 NW St. Helens Rd.  Portland OR 97210  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Wilhelm Trucking Co.  <b>Occupation</b> Owner  <b>Aggregate Year-to-Date</b> > \$ 250.00	<b>Date (month, day, year)</b> 04/20/2000	<b>Amount of Each Receipt this Period</b> 250.00 Contribution	
<b>Full Name, Mailing Address, and ZIP Code</b> David Wayne Corliss  PSC 80 Box 21595  APO AP 96367-1595 ZZ 96367-1595  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Dodds-Oltrows  <b>Occupation</b> Educator  <b>Aggregate Year-to-Date</b> > \$ 250.00	<b>Date (month, day, year)</b> 04/25/2000	<b>Amount of Each Receipt this Period</b> 250.00 Contribution	
<b>Full Name, Mailing Address, and ZIP Code</b> Kent R. Davis  5810 Windy Gyle  Midland MI 48640-6845  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Retired  <b>Occupation</b>  <b>Aggregate Year-to-Date</b> > \$ 250.00	<b>Date (month, day, year)</b> 04/25/2000	<b>Amount of Each Receipt this Period</b> 250.00 Contribution	
<b>Full Name, Mailing Address, and ZIP Code</b> Prudence M. Miller  4220 SW Greenleaf Dr.  Portland OR 97221-3226  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Self-employed  <b>Occupation</b> Personal Investments  <b>Aggregate Year-to-Date</b> > \$ 500.00	<b>Date (month, day, year)</b> 04/25/2000	<b>Amount of Each Receipt this Period</b> 500.00 Contribution	
<b>Full Name, Mailing Address, and ZIP Code</b> Ernest C. Swigert  42 Swigert Rd.  Washougal WA 98671  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Retired  <b>Occupation</b>  <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 04/25/2000	<b>Amount of Each Receipt this Period</b> 1000.00 Contribution	
<b>Full Name, Mailing Address, and ZIP Code</b> Mary Olson  18453 Tamaway Dr. Lake Oswego OR 97034  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b>   <b>Occupation</b> Homemaker  <b>Aggregate Year-to-Date</b> > \$ 353.85	<b>Date (month, day, year)</b> 04/26/2000	<b>Amount of Each Receipt this Period</b> 353.85 Contribution-in-kind-Photos & Mailing	
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				<b>7103.85</b>

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	5 / 8
		Use separate schedule(s) for each category of the Detailed Summary Page
		FOR LINE NUMBER 11C
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.		
<b>NAME OF COMMITTEE (In Full)</b> <b>Alice Schlenker for Congress</b>		
<b>Full Name, Mailing Address, and ZIP Code</b> Boise Cascade Corporation Political Action Fund 1111 West Jefferson Street PO Box 50 Boise ID 83728-0001	Name of Employer  Occupation	Date (month, day, year) 04/26/2000  Amount of Each Receipt this Period 1000.00 Contribution
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > 5    1000.00	
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....		
<b>TOTALS</b> This Period (last page this line number only) .....		<b>1000.00</b>

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	6 / 8
		Use separate schedule(s) for each category of the Detailed Summary Page
		FOR LINE NUMBER 110
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.		
<b>NAME OF COMMITTEE (In Full)</b> <b>Alice Schlenker for Congress</b>		
<b>Full Name, Mailing Address, and ZIP Code</b> Alice Schlenker  257 Iron Mountain Blvd  Lake Oswego OR 97034	<b>Name of Employer</b> Alice Communications  <b>Occupation</b> Manager  <b>Aggregate Year-to-Date</b> > 5	<b>Date (month, day, year)</b> 04/01/2000  <b>Amount of Each Receipt this Period</b> 800.00  Contribution-in-kind—Office Rent
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....		
<b>TOTALS</b> This Period (last page this line number only) .....		<b>800.00</b>



<b>SCHEDULE C</b> (Revised 3/80)	<b>LOANS</b>	Use separate schedule(s) for each numbered line	<b>8 / 8</b> FOR LINE NUMBER <b>10</b>
<b>NAME OF COMMITTEE (in Full)</b> <b>Alice Schlenker for Congress</b>			
Full Name, Mailing Address, and ZIP Code of Loan Source Alice Schlenker 257 Iron Mountain Blvd  Lake Oswego OR 97034  Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Original Amount of Loan  5000.00  REF-ID : <b>SC/10.280</b>	Cumulative Payment to Date  0.00	Balance Outstanding at Close of This Period  5000.00
TERMS: Date incurred: 12/28/1999 Date Due: On Demand Interest Rate(%) = None <input type="checkbox"/> Secured			
Full Name, Mailing Address, and ZIP Code of Loan Source Alice Schlenker 257 Iron Mountain Blvd  Lake Oswego OR 97034  Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Original Amount of Loan  20000.00  REF-ID : <b>SC/10.480</b>	Cumulative Payment to Date  0.00	Balance Outstanding at Close of This Period  20000.00
TERMS: Date incurred: 03/31/2000 Date Due: On Demand Interest Rate(%) = None <input type="checkbox"/> Secured			
<b>SUBTOTALS</b> This Period This Page (Optional) .....			
<b>TOTALS</b> This Period (last page this line number only) .....			<b>25000.00</b>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary			