

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

12FE4M5

REPUBLICAN LEADERSHIP FOR OREGON

ADDRESS (number and street)

PO BOX 341027

Check if different than previously reported. (ACC)

AUSTIN

TX

78734

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00737361

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

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

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

Election on

MM / DD / YYYY

in the State of

XX

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

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

Election on

MM / DD / YYYY

in the State of

XX

5. Covering Period

MM / DD / YYYY 04 / 30 / 2020

through

MM / DD / YYYY 06 / 30 / 2020

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

HOBBS, CABELL, , ,

Type or Print Name of Treasurer

Signature of Treasurer

HOBBS, CABELL, , ,

[Electronically Filed]

Date

MM / DD / YYYY 06 / 30 / 2020

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

Office Use Only

FEC FORM 3X Rev. 05/2016

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

REPUBLICAN LEADERSHIP FOR OREGON

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="49530.50"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="207157.00"/>	<input type="text" value="422157.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="256687.50"/>	<input type="text" value="422157.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="256687.50"/>	<input type="text" value="422157.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

REPUBLICAN LEADERSHIP FOR OREGON

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	205000.00	420000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	205000.00	420000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	205000.00	420000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	2157.00	2157.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	207157.00	422157.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	207157.00	422157.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	47960.22	78367.72
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	47960.22	78367.72
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	207667.00	342729.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	1060.28	1060.28
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	256687.50	422157.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	256687.50	422157.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	205000.00	420000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	205000.00	420000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	47960.22	78367.72
37. Offsets to Operating Expenditures (from Line 15, page 3).....	2157.00	2157.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	45803.22	76210.72

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

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

FOR LINE NUMBER: PAGE 6 OF 20
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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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)
REPUBLICAN LEADERSHIP FOR OREGON

A. KNIGHT, PHILIP, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 SW BOWERMAN DR

City BEAVERTON	State OR	Zip Code 97005
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NIKE	Occupation (for Individual) CHAIRMAN EMERITUS
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		04		2020

Transaction ID : SA11AI.4196

Amount of Each Receipt this Period
150000.00

Memo Item
CONTRIBUTION

B. WILSON CATTLE COMPANY
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 65799 N POWDER RIVER LN

City NORTH POWDER	State OR	Zip Code 97867
----------------------	-------------	-------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		04		2020

Transaction ID : SA11AI.4194

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. YOUNG, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 97

City LEBANON	State OR	Zip Code 97355
-----------------	-------------	-------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
100000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2020

Transaction ID : SA11AI.4192

Amount of Each Receipt this Period
50000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	205000.00
TOTAL This Period (last page this line number only).....	205000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 20
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN LEADERSHIP FOR OREGON

A. RED MAVERICK MEDIA LLC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1426 N. 3RD STREET
SUITE 310

City HARRISBURG State PA Zip Code 17102

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2157.00

Date of Receipt
MM / DD / YYYY
05 / 08 / 2020

Transaction ID : SA15.4221

Amount of Each Receipt this Period
2157.00

Memo Item
VENDOR REFUND

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

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	2157.00
TOTAL This Period (last page this line number only).....	2157.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
REPUBLICAN LEADERSHIP FOR OREGON

Full Name (Last, First, Middle Initial) A. ASCENT MEDIA LLC		Date of Disbursement MM / DD / YYYY 05 / 07 / 2020
Mailing Address 7600 E. EASTMAN AVENUE SUITE 405		FEC Identification Number C [] Transaction ID : SB21B.4206 Amount of Each Disbursement this Period [] 2000.00
City DENVER	State CO	Zip Code 80231
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. DICKINSON WRIGHT, PLLC		Date of Disbursement MM / DD / YYYY 05 / 01 / 2020
Mailing Address 1825 EYE STREET, NW SUITE 900		FEC Identification Number C [] Transaction ID : SB21B.4166 Amount of Each Disbursement this Period [] 229.00
City WASHINGTON	State DC	Zip Code 20006
Purpose of Disbursement LEGAL CONSULTING		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. DICKINSON WRIGHT, PLLC		Date of Disbursement MM / DD / YYYY 05 / 12 / 2020
Mailing Address 1825 EYE STREET, NW SUITE 900		FEC Identification Number C [] Transaction ID : SB21B.4220 Amount of Each Disbursement this Period [] 2123.50
City WASHINGTON	State DC	Zip Code 20006
Purpose of Disbursement LEGAL CONSULTING		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 4352.50
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
REPUBLICAN LEADERSHIP FOR OREGON

Full Name (Last, First, Middle Initial) A. DICKINSON WRIGHT, PLLC		Date of Disbursement MM / DD / YYYY 06 / 02 / 2020
Mailing Address 1825 EYE STREET, NW SUITE 900		FEC Identification Number C [] Transaction ID : SB21B.4231 Amount of Each Disbursement this Period [] 280.00
City WASHINGTON	State DC	Zip Code 20006
Purpose of Disbursement LEGAL CONSULTING		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Memo Item <input type="checkbox"/>	

Full Name (Last, First, Middle Initial) B. GUIDANT POLLING AND STRATEGY LLC		Date of Disbursement MM / DD / YYYY 05 / 20 / 2020
Mailing Address 4327 N NINES RIDGE LN		FEC Identification Number C [] Transaction ID : SB21B.4228 Amount of Each Disbursement this Period [] 1000.00
City BOISE	State ID	Zip Code 83702
Purpose of Disbursement POLLING		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Memo Item <input type="checkbox"/>	

Full Name (Last, First, Middle Initial) C. LORI HARDWICK FUNDRAISING, INC.		Date of Disbursement MM / DD / YYYY 05 / 01 / 2020
Mailing Address PO BOX 25445		FEC Identification Number C [] Transaction ID : SB21B.4167 Amount of Each Disbursement this Period [] 5103.44
City PORTLAND	State OR	Zip Code 97298
Purpose of Disbursement FUNDRAISING CONSULTING/SHIPPING		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Memo Item <input type="checkbox"/>	

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

6383.44

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
REPUBLICAN LEADERSHIP FOR OREGON

Full Name (Last, First, Middle Initial)

A. LORI HARDWICK FUNDRAISING, INC.

Mailing Address PO BOX 25445

City PORTLAND State OR Zip Code 97298

Purpose of Disbursement
FUNDRAISING CONSULTING/SHIPPING

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2020

FEC Identification Number

C
Transaction ID : SB21B.4217
Amount of Each Disbursement this Period
15099.28

Memo Item

Full Name (Last, First, Middle Initial)

B. LORI HARDWICK FUNDRAISING, INC.

Mailing Address PO BOX 25445

City PORTLAND State OR Zip Code 97298

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
05 / 12 / 2020

FEC Identification Number

C
Transaction ID : SB21B.4218
Amount of Each Disbursement this Period
17000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. RIGHTSIDE COMPLIANCE LLC

Mailing Address PO BOX 341027

City AUSTIN State TX Zip Code 78734

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
05 / 12 / 2020

FEC Identification Number

C
Transaction ID : SB21B.4219
Amount of Each Disbursement this Period
2520.00

Memo Item

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

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

34619.28

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
REPUBLICAN LEADERSHIP FOR OREGON

A. RIGHTSIDE COMPLIANCE LLC

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 341027

City AUSTIN State TX Zip Code 78734

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 27 / 2020

FEC Identification Number: C

Transaction ID : SB21B.4230

Amount of Each Disbursement this Period: 2530.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	2530.00
TOTAL This Period (last page this line number only).....▶	47885.22

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
REPUBLICAN LEADERSHIP FOR OREGON

Full Name (Last, First, Middle Initial)

A. LINES FOR LIFE

Mailing Address 5100 SW MACADAM AVENUE
STE. 400

City PORTLAND State OR Zip Code 97239

Purpose of Disbursement
CHARITABLE DONATION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2020

FEC Identification Number

C

Transaction ID : SB29.4233

Amount of Each Disbursement this Period

1060.28

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

1060.28

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

1060.28

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
REPUBLICAN LEADERSHIP FOR OREGON
FEC IDENTIFICATION NUMBER
C C00737361

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee ASCENT MEDIA LLC
Mailing Address 7600 E. EASTMAN AVENUE SUITE 405
City DENVER State CO Zip Code 80231
Purpose of Expenditure TV MEDIA PRODUCTION Category/Type 004
Name of Federal Candidate: BENTZ, CLIFF, , ,
Office Sought: House District: 02 State: OR
Disbursement For: Primary General 2020
Amount 4750.00
Transaction ID: SE.4202
Date of Disbursement or Obligation 05/07/2020
Calendar Year-To-Date Per Election for Office Sought 311489.00

Full Name of Payee ASCENT MEDIA LLC
Mailing Address 7600 E. EASTMAN AVENUE SUITE 405
City DENVER State CO Zip Code 80231
Purpose of Expenditure TV MEDIA PRODUCTION Category/Type 004
Name of Federal Candidate: ATKINSON, JASON, , ,
Office Sought: House District: 02 State: OR
Disbursement For: Primary General 2020
Amount 4750.00
Transaction ID: SE.4203
Date of Disbursement or Obligation 05/07/2020
Calendar Year-To-Date Per Election for Office Sought 316239.00

(a) SUBTOTAL of Itemized Independent Expenditures 9500.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HOBBS, CABELL, , ,

[Electronically Filed]

Date 06/30/2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
REPUBLICAN LEADERSHIP FOR OREGON
FEC IDENTIFICATION NUMBER
C C00737361

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee ASCENT MEDIA LLC
Mailing Address 7600 E. EASTMAN AVENUE SUITE 405
City DENVER State CO Zip Code 80231
Purpose of Expenditure TV MEDIA PRODUCTION Category/Type 004
Name of Federal Candidate: BUEHLER, KNUTE, , , Support
Office Sought: House District: 02 State: OR
Calendar Year-To-Date Per Election for Office Sought 320989.00
Disbursement For: Primary 2020

Full Name of Payee ASCENT MEDIA LLC
Mailing Address 7600 E. EASTMAN AVENUE SUITE 405
City DENVER State CO Zip Code 80231
Purpose of Expenditure TV MEDIA PRODUCTION Category/Type 004
Name of Federal Candidate: BUEHLER, KNUTE, , , Support
Office Sought: House District: 02 State: OR
Calendar Year-To-Date Per Election for Office Sought 325739.00
Disbursement For: Primary 2020

(a) SUBTOTAL of Itemized Independent Expenditures 9500.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HOBBS, CABELL, , ,

[Electronically Filed]

Date 06 / 30 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
REPUBLICAN LEADERSHIP FOR OREGON
FEC IDENTIFICATION NUMBER
C C00737361

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee MEDIUM BUYING LLC
Mailing Address 815 GRANDVIEW AVENUE SUITE 600
City COLUMBUS State OH Zip Code 43215
Purpose of Expenditure TV MEDIA PLACEMENT
Category/Type 004
Name of Federal Candidate: BUEHLER, KNUTE, , ,
Support Oppose
Office Sought: House District: 02
President Senate State: OR
Calendar Year-To-Date Per Election for Office Sought 202305.00
Disbursement For: Primary General 2020
Other (specify)

Full Name of Payee MEDIUM BUYING LLC
Mailing Address 815 GRANDVIEW AVENUE SUITE 600
City COLUMBUS State OH Zip Code 43215
Purpose of Expenditure TV MEDIA PLACEMENT
Category/Type 004
Name of Federal Candidate: ATKINSON, JASON, , ,
Support Oppose
Office Sought: House District: 02
President Senate State: OR
Calendar Year-To-Date Per Election for Office Sought 241368.00
Disbursement For: Primary General 2020
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 78126.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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HOBBS, CABELL, , ,

[Electronically Filed]

Date

06 / 30 / 2020

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) REPUBLICAN LEADERSHIP FOR OREGON	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00737361 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item MEDIUM BUYING LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 08 / 2020
Mailing Address 815 GRANDVIEW AVENUE SUITE 600	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 32685.50 </div> Transaction ID : SE.4190 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 07 / 2020
City State Zip Code COLUMBUS OH 43215	
Purpose of Expenditure TV MEDIA PLACEMENT Category/Type 004	
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose BUEHLER, KNUTE, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 02 State: OR
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 274053.50 </div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item MEDIUM BUYING LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 08 / 2020
Mailing Address 815 GRANDVIEW AVENUE SUITE 600	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 32685.50 </div> Transaction ID : SE.4191 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 07 / 2020
City State Zip Code COLUMBUS OH 43215	
Purpose of Expenditure TV MEDIA PLACEMENT Category/Type 004	
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose BENTZ, CLIFF, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 02 State: OR
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 306739.00 </div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 65371.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; height: 20px;"> [Empty] </div>
(c) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; height: 20px;"> [Empty] </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HOBBS, CABELL, , ,

[Electronically Filed]

Date M M / D D / Y Y Y Y Y Y
 06 / 30 / 2020

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) REPUBLICAN LEADERSHIP FOR OREGON	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00737361 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item MEDIUM BUYING LLC		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 14 / 2020	
Mailing Address 815 GRANDVIEW AVENUE SUITE 600		Amount M M M M . 0 0 3500.00	
City COLUMBUS	State OH	Zip Code 43215	Transaction ID : SE.4222 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 12 / 2020
Purpose of Expenditure TV MEDIA PLACEMENT		Category/Type 004	
Name of Federal Candidate: BENTZ, CLIFF, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 02 State: OR	
Calendar Year-To-Date Per Election for Office Sought M M M M . 0 0 339229.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item MEDIUM BUYING LLC		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 14 / 2020	
Mailing Address 815 GRANDVIEW AVENUE SUITE 600		Amount M M M M . 0 0 3500.00	
City COLUMBUS	State OH	Zip Code 43215	Transaction ID : SE.4223 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 12 / 2020
Purpose of Expenditure TV MEDIA PLACEMENT		Category/Type 004	
Name of Federal Candidate: BUEHLER, KNUTE, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 02 State: OR	
Calendar Year-To-Date Per Election for Office Sought M M M M . 0 0 342729.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures ▶	M M M M . 0 0 7000.00
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	M M M M . 0 0 0.00
(c) TOTAL Independent Expenditures ▶	M M M M . 0 0 7000.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HOBBS, CABELL, , ,

[Electronically Filed]

Date M M / D D / Y Y Y Y Y Y
 06 / 30 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
REPUBLICAN LEADERSHIP FOR OREGON
FEC IDENTIFICATION NUMBER
C C00737361

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
RED MAVERICK MEDIA LLC
Mailing Address
1426 N. 3RD STREET
SUITE 310
City
HARRISBURG
State
PA
Zip Code
17102
Purpose of Expenditure
PRINTING/POSTAGE
Category/Type
004
Date of Public Distribution/Dissemination
05 / 06 / 2020
Amount
6978.50
Transaction ID : SE.4168
Date of Disbursement or Obligation
05 / 01 / 2020

Name of Federal Candidate:
BUEHLER, KNUTE, , ,
Support
Oppose
Office Sought:
House
Senate
District: 02
State: OR
Calendar Year-To-Date
Per Election for Office Sought
142040.50
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
RED MAVERICK MEDIA LLC
Mailing Address
1426 N. 3RD STREET
SUITE 310
City
HARRISBURG
State
PA
Zip Code
17102
Purpose of Expenditure
PRINTING/POSTAGE
Category/Type
004
Date of Public Distribution/Dissemination
05 / 06 / 2020
Amount
6978.50
Transaction ID : SE.4170
Date of Disbursement or Obligation
05 / 01 / 2020

Name of Federal Candidate:
CRUMPACKER, JIMMY, , ,
Support
Oppose
Office Sought:
House
Senate
District: 02
State: OR
Calendar Year-To-Date
Per Election for Office Sought
149019.00
Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 13957.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HOBBS, CABELL, , ,

[Electronically Filed]

Date 06 / 30 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
REPUBLICAN LEADERSHIP FOR OREGON
FEC IDENTIFICATION NUMBER
C C00737361

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: RED MAVERICK MEDIA LLC
Mailing Address: 1426 N. 3RD STREET SUITE 310
City: HARRISBURG State: PA Zip Code: 17102
Purpose of Expenditure: PRINTING/POSTAGE Category/Type: 004
Name of Federal Candidate: BUEHLER, KNUTE, , , Support
Office Sought: House District: 02 State: OR
Calendar Year-To-Date Per Election for Office Sought: 156130.50
Disbursement For: Primary

Full Name of Payee: RED MAVERICK MEDIA LLC
Mailing Address: 1426 N. 3RD STREET SUITE 310
City: HARRISBURG State: PA Zip Code: 17102
Purpose of Expenditure: PRINTING/POSTAGE Category/Type: 004
Name of Federal Candidate: BENTZ, CLIFF, , , Oppose
Office Sought: House District: 02 State: OR
Calendar Year-To-Date Per Election for Office Sought: 163242.00
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 14223.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HOBBS, CABELL, , , [Electronically Filed] Date 06 / 30 / 2020
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
REPUBLICAN LEADERSHIP FOR OREGON
FEC IDENTIFICATION NUMBER
C C00737361

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
RED MAVERICK MEDIA LLC
Mailing Address
1426 N. 3RD STREET
SUITE 310
City
HARRISBURG
State
PA
Zip Code
17102
Purpose of Expenditure
PRINTING/POSTAGE
Category/Type
004
Date of Public Distribution/Dissemination
05 / 08 / 2020
Amount
4995.00
Transaction ID : SE.4207
Date of Disbursement or Obligation
05 / 07 / 2020

Name of Federal Candidate:
BENTZ, CLIFF, ,
Support
Oppose
Office Sought:
House
Senate
District: 02
State: OR
Calendar Year-To-Date
Per Election for Office Sought
330734.00
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
RED MAVERICK MEDIA LLC
Mailing Address
1426 N. 3RD STREET
SUITE 310
City
HARRISBURG
State
PA
Zip Code
17102
Purpose of Expenditure
PRINTING/POSTAGE
Category/Type
004
Date of Public Distribution/Dissemination
05 / 08 / 2020
Amount
4995.00
Transaction ID : SE.4208
Date of Disbursement or Obligation
05 / 07 / 2020

Name of Federal Candidate:
BUEHLER, KNUTE, ,
Support
Oppose
Office Sought:
House
Senate
District: 02
State: OR
Calendar Year-To-Date
Per Election for Office Sought
335729.00
Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 9990.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....
(c) TOTAL Independent Expenditures 207667.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HOBBS, CABELL, ,

[Electronically Filed]

Date 06 / 30 / 2020

Signature