



**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Blumenauer for Congress**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	180290.67	225923.89
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	180290.67	225923.89
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	86023.56	189851.28
(b) Total Offsets to Operating Expenditures (from Line 14).....	3.49	3.49
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	86020.07	189847.79
8. Cash on Hand at Close of Reporting Period (from Line 27).....	679512.37	
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

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Blumenauer for Congress**

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2013 To: M M / D D / Y Y Y Y 06 / 30 / 2013

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).....	40789.38	46014.38
(ii) Unitemized .....	16318.00	17226.22
(iii) TOTAL of contributions from individuals .....	57107.38	63240.60
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	123183.29	162683.29
(d) The Candidate .....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	180290.67	225923.89
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.) .....	3.49	3.49
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	114.86	254.75
16. <b>TOTAL RECEIPTS</b> (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	180409.02	226182.13

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	86023.56	189851.28
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	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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	30500.00	40500.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	116523.56	230351.28

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	615626.91
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	180409.02
25. SUBTOTAL (add Line 23 and Line 24).....	796035.93
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	116523.56
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	679512.37

**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 5 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

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

Mailing Address 5047 Glenbrook Terr. NW

City Washington State DC Zip Code 20016

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

Name of Employer King and Spaulding Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **401.38**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 18 / 2013

**Transaction ID : C7141686**

Amount of Each Receipt this Period  
 185.00

\* In-Kind: Room Rental

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

Mailing Address 5047 Glenbrook Terr. NW

City Washington State DC Zip Code 20016

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

Name of Employer King and Spaulding Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **401.38**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 18 / 2013

**Transaction ID : C7141688**

Amount of Each Receipt this Period  
 216.38

\* In-Kind: Catering

**C.** Full Name (Last, First, Middle Initial)  
**Michael S. Berman**

Mailing Address 2801 New Mexico Ave., NW  
Apt. 817

City Washington State DC Zip Code 20007

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

Name of Employer Duberstein Group, Inc. Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 03 / 2013

**Transaction ID : C7096701**

Amount of Each Receipt this Period  
 1000.00

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

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

1401.38

**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 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jacob W. Boston**

Mailing Address 517 NE Cook Street

City State Zip Code  
Portland OR 97212

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

Name of Employer Occupation  
M Financial Group VP, Communications

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 22 / 2013

**Transaction ID : C7092689**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Daniel F. Byrne**

Mailing Address 18112 Westminster Dr.

City State Zip Code  
Lake Oswego OR 97034

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

Name of Employer Occupation  
M Financial Group Sr. Vice Pres.

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 22 / 2013

**Transaction ID : C7092696**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 5623 SE Ash Street

City State Zip Code  
Portland OR 97215

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

Name of Employer Occupation  
Chris King Precision Components Vice President of Operations

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 12 / 2013

**Transaction ID : C7082680**

Amount of Each Receipt this Period  
250.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

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

Mailing Address 1910 SW Myrtle Street

City Portland State OR Zip Code 97201

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

Name of Employer Self-employed Occupation Journalist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 18 / 2013

**Transaction ID : C7084228**

Amount of Each Receipt this Period  
 1250.00

**B.** Full Name (Last, First, Middle Initial)  
**Confederated Tribes Of Grand Ronde**

Mailing Address 9615 Grand Ronde Rd

City Grand Ronde State OR Zip Code 97347-9712

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : C7089288**

Amount of Each Receipt this Period  
 1250.00

**C.** Full Name (Last, First, Middle Initial)  
**Cheryl F. Coon**

Mailing Address 2939 NW 53rd Drive

City Portland State OR Zip Code 97210

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

Name of Employer Swanson Thomas Coon & Newton Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2013

**Transaction ID : C7084382**

Amount of Each Receipt this Period  
 250.00

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

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

2750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Cheryl F. Coon**

Mailing Address 2939 NW 53rd Drive

City Portland State OR Zip Code 97210

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

Name of Employer Swanson Thomas Coon & Newton Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 23 / 2013**

**Transaction ID : C7086457**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Leanne Littrell DiLorenzo**

Mailing Address 1736 SW Prospect Drive

City Portland State OR Zip Code 97201

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

Name of Employer Self Occupation Political Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1100.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 05 / 2013**

**Transaction ID : C7089191**

Amount of Each Receipt this Period  
**1100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Ann P. Edlen**

Mailing Address 0841 SW Gaines Street Unit 2202

City Portland State OR Zip Code 97239

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

Name of Employer Think Joule Occupation Managing Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 18 / 2013**

**Transaction ID : C7084390**

Amount of Each Receipt this Period  
**1250.00**

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

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

**2450.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kenneth Ehinger**

Mailing Address 6618 NW Meridian Ridge Drive

City State Zip Code  
Portland OR 97210

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

Name of Employer Occupation  
M Financial Insurance and Investments

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 22 / 2013

**Transaction ID : C7092710**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Janet A. Gillaspie**

Mailing Address 2336 NE 23rd Ave.

City State Zip Code  
Portland OR 97212

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

Name of Employer Occupation  
Environmental Strategies, LLC Env. Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : C7089507**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Lavinia C. Gordon**

Mailing Address 2204 NE 16th Ave

City State Zip Code  
Portland OR 97212

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
375.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 29 / 2013

**Transaction ID : C7087330**

Amount of Each Receipt this Period  
375.00

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

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

1125.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Arthur L. Guzzetti**

Mailing Address 1572 King Charles Drive

City State Zip Code  
Pittsburgh PA 15237

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

Name of Employer Occupation  
American Public Transportation Assoc. Vice President for Policy

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 23 / 2013

**Transaction ID : C7087237**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Lourri Hammack**

Mailing Address 3827 NE Holman Street

City State Zip Code  
Portland OR 97211

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

Name of Employer Occupation  
Laika Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : C7089012**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Susan M. Hammer**

Mailing Address 1716 SW High Street

City State Zip Code  
Portland OR 97201

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

Name of Employer Occupation  
Self Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 05 / 2013

**Transaction ID : C7089175**

Amount of Each Receipt this Period  
500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jaime Harrison**

Mailing Address 11 Arsenal Hill Court

City Columbia State SC Zip Code 29201

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

Name of Employer Podesta Group Occupation Principal

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2013

**Transaction ID : C7087736**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Corinne Hazzard**

Mailing Address 4230 Galewood Street

City Lake Oswego State OR Zip Code 97035

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

Name of Employer D'Amore Law Group Occupation Communications

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 17 / 2013

**Transaction ID : C7083953**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Bobby Heagerty**

Mailing Address 6836 SW Raleighwood Way

City Portland State OR Zip Code 97225

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

Name of Employer Oregon Health Sciences Univ. Occupation Educational Coordinator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
313.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : C7089509**

Amount of Each Receipt this Period  
313.00

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

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

813.00

**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 12 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Cara M. Jacobsen**

Mailing Address 703 E. Reserve Street

City Vancouver State WA Zip Code 98661

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

Name of Employer NIMCO Occupation Investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : C7089032**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Fred H. Jonske**

Mailing Address 1153 SW Fairfax Place

City Portland State OR Zip Code 97225

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

Name of Employer M Financial Group Occupation President and CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2013

**Transaction ID : C7091263**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Elizabeth M. Kelley**

Mailing Address 3818 W Street

City Washington State DC Zip Code 20007

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

Name of Employer Glacier PAC Occupation Fundraiser

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 23 / 2013

**Transaction ID : C7086461**

Amount of Each Receipt this Period  
 500.00

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

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

2500.00

**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 13 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**J. Keith Kennedy**

Mailing Address 3220 Juniper Lane

City Falls Church State VA Zip Code 22044

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

Name of Employer Baker Donelson Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 28 / 2013

**Transaction ID : C7141274**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**H. Blair Kincer**

Mailing Address 5137 Trailway Drive

City Rockville State MD Zip Code 20853

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

Name of Employer Novogradac & Co. LLP Occupation Market Analyst

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 10 / 2013

**Transaction ID : C7097265**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Kay Kitagawa**

Mailing Address 850 NW Summit Ave.

City Portland State OR Zip Code 97210

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

Name of Employer Johnson-Laird Inc. Occupation Secretary

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 18 / 2013

**Transaction ID : C7084260**

Amount of Each Receipt this Period  
 250.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**James R. Klein**

Mailing Address 7543 Northfield Ct.

City Reynoldsburg State OH Zip Code 43068

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

Name of Employer Ohio Community Dev't Finance Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 10 / 2013

**Transaction ID : C7097266**

Amount of Each Receipt this Period  
 300.00

**B.** Full Name (Last, First, Middle Initial)  
**Amy Carlsen Kohnstamm**

Mailing Address 3002 NW Luray Circle

City Portland State OR Zip Code 97210

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

Name of Employer Self Occupation Mother

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : C7089025**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 16 Cove Road

City Belvedere State CA Zip Code 94920

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

Name of Employer Novogradac & Company LLP Occupation CPA

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 04 / 2013

**Transaction ID : C7095558**

Amount of Each Receipt this Period  
 1000.00

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

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

1800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

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

Mailing Address 5250 SW Landing Sq.  
Unit 22-A

City Portland State OR Zip Code 97239

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

Name of Employer Occupation  
Portland Business Alliance CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
625.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 19 / 2013

**Transaction ID : C7084334**

Amount of Each Receipt this Period  
625.00

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

Mailing Address 500 Capitol Mall  
Suite 1600

City Sacramento State CA Zip Code 95814

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

Name of Employer Occupation  
Locke Lord Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 28 / 2013

**Transaction ID : C7141273**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Randall O'Connor**

Mailing Address 1907 Palisades Terrace Drive

City Lake Oswego State OR Zip Code 97034

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

Name of Employer Occupation  
M Financial CFO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 22 / 2013

**Transaction ID : C7092700**

Amount of Each Receipt this Period  
1000.00

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

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

2125.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kristine Olson**

Mailing Address 900 SW 83rd Ave.

City: Portland State: OR Zip Code: 97225

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

Name of Employer: Self-Employed Occupation: Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 625.00

Date of Receipt: 04 / 21 / 2013

**Transaction ID : C7084660**

Amount of Each Receipt this Period: 625.00

**B.** Full Name (Last, First, Middle Initial)  
**Steven O. Palmer**

Mailing Address 5827 N. 27th Street

City: Arlington State: VA Zip Code: 22207

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

Name of Employer: Van Scoyoc Associates Occupation: Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 06 / 24 / 2013

**Transaction ID : C7127901**

Amount of Each Receipt this Period: 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Jason Pavluchuk**

Mailing Address 8559 Blackfoot Ct.

City: Lorton State: VA Zip Code: 22079

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

Name of Employer: Pavluchuk & Associates Occupation: Government Relations

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 05 / 08 / 2013

**Transaction ID : C7092532**

Amount of Each Receipt this Period: 500.00

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

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

2125.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Janis Sue Porter**

Mailing Address 35393 Hwy 19

City State Zip Code  
Kimberly OR 97848

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

Name of Employer Occupation  
US Mediation and Arbitration Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : C7089011**

Amount of Each Receipt this Period  
1250.00

**B.** Full Name (Last, First, Middle Initial)  
**Sepideh Rabii**

Mailing Address 333 SE 8th Ave.

City State Zip Code  
Beaverton OR 97008

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

Name of Employer Occupation  
Tuality Healthcare LIS Coordinator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 17 / 2013

**Transaction ID : C7083790**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 3500 Tilden St NW

City State Zip Code  
Washington DC 20008

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

Name of Employer Occupation  
Rapoza Associates Lobbyist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 09 / 2013

**Transaction ID : C7096675**

Amount of Each Receipt this Period  
2000.00

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

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

3500.00

**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 18 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Bobbie Regan**

Mailing Address 1907 NW Mill Pond Road

City Portland State OR Zip Code 97229-7553

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

Name of Employer None Occupation Elected Portland Public School Board M

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 02 / 2013

**Transaction ID : C7088304**

Amount of Each Receipt this Period  
 1000.00

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Colin Rowan**

Mailing Address 1410 NW 24th Ave.

City Portland State OR Zip Code 97210-2620

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

Name of Employer United Fund Advisors Occupation Principal

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 24 / 2013

**Transaction ID : C7127893**

Amount of Each Receipt this Period  
 500.00

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Joel Rubin**

Mailing Address 2724 Blaine Drive

City Chevy Chase State MD Zip Code 20815

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

Name of Employer CFM Strategic Communications Occupation Government Affairs

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 18 / 2013

**Transaction ID : C7084219**

Amount of Each Receipt this Period  
 500.00

Amount of Each Receipt this Period  
 500.00

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

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

2000.00

**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 19 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

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

Mailing Address 3701 S George Mason Drive  
#118N

City Falls Church State VA Zip Code 22041

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

Name of Employer McBee Strategic Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : C7089479**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**M. Megan Shipley**

Mailing Address 645 NW Skyline Blvd.

City Portland State OR Zip Code 97229

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

Name of Employer Kaiser Occupation Nurse-Midwife

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : C7089036**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Bob Siggins**

Mailing Address 10631 Summersweet Ct.

City Fairfax Station State VA Zip Code 22039

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

Name of Employer Alston & Bird LLP Occupation Policy Advisor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 10 / 2013

**Transaction ID : C7092569**

Amount of Each Receipt this Period  
 500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Leonard S. Simon**

Mailing Address 5308 Wilson Lane

City: Bethesda State: MD Zip Code: 20814

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

Name of Employer: Simon & Company, Inc. Occupation: Government Relations

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 04 / 23 / 2013

**Transaction ID : C7087236**

Amount of Each Receipt this Period: 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Joan Snyder**

Mailing Address 6420 SW Maple Court

City: Portland State: OR Zip Code: 97225

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

Name of Employer: Stoel Rives Occupation: Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 05 / 03 / 2013

**Transaction ID : C7089033**

Amount of Each Receipt this Period: 250.00

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

Mailing Address 6368 Copper Creek Ct.

City: Reno State: NV Zip Code: 89519

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

Name of Employer: Ormat Technologies Occupation: Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 06 / 18 / 2013

**Transaction ID : C7101311**

Amount of Each Receipt this Period: 500.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Elizabeth A. Upham**

Mailing Address 4103 NE 10th Ave.

City Portland	State OR	Zip Code 97211
------------------	-------------	-------------------

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

Name of Employer Morel Ink	Occupation Account Manager
-------------------------------	-------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
375.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 29 / 2013

**Transaction ID : C7087413**

Amount of Each Receipt this Period  
375.00

**B.** Full Name (Last, First, Middle Initial)  
**Stephanie Vance**

Mailing Address 2420 Tunlaw Rd., NW

City Washington	State DC	Zip Code 20007
--------------------	-------------	-------------------

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

Name of Employer Advocacy Associates	Occupation Consultant
---	--------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 17 / 2013

**Transaction ID : C7083740**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Christine Vernier**

Mailing Address 2351 NW Westover Rd #1301

City Portland	State OR	Zip Code 97210
------------------	-------------	-------------------

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

Name of Employer Vernier Software & Technology	Occupation CFO
---	-------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2013

**Transaction ID : C7084383**

Amount of Each Receipt this Period  
1250.00

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

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

2625.00

**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 22 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Pat Welch**

Mailing Address 3011 NW Luray Circus

City Portland State OR Zip Code 97210

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

Name of Employer Boly:Welch Occupation Business Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : C7089031**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Brett E. Wilcox**

Mailing Address 2727 NW Westover Rd

City Portland State OR Zip Code 97210

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

Name of Employer Summit Power Alternative Resources Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 10 / 2013

**Transaction ID : C7097093**

Amount of Each Receipt this Period  
 2000.00

**C.** Full Name (Last, First, Middle Initial)  
**Mary Wilcox**

Mailing Address 2727 NW Westover Road

City Portland State OR Zip Code 97210

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

Name of Employer Self-employed Occupation Community Service Volunteer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 04 / 2013

**Transaction ID : C7080987**

Amount of Each Receipt this Period  
 1250.00

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

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

3500.00

**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 23 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mark Williams**

Mailing Address 100 Cameran Station Blvd.

City State Zip Code  
Alexandria VA 22304

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

Name of Employer Occupation  
Bingham LLP Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 17 / 2013

**Transaction ID : C7101244**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Jeanne Patrice Willoughby**

Mailing Address 7503 Calderon Court Unit J

City State Zip Code  
Alexandria VA 22306

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

Name of Employer Occupation  
Heather Podesta + Partners Lawyer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 23 / 2013

**Transaction ID : C7086243**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Jean M. Wilson**

Mailing Address 2426 NE 16th Ave.

City State Zip Code  
Portland OR 97212

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

Name of Employer Occupation  
SunPower Solar Energy

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : C7089478**

Amount of Each Receipt this Period  
250.00

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

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

3250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Barbara Woodford**

Mailing Address 173 NE Bridgeton Rd  
#2

City Portland State OR Zip Code 97211

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

Name of Employer Liberty Mutual Insurance Company Occupation Lawyer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
325.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : C7089477**

Amount of Each Receipt this Period  
325.00

**B.** Full Name (Last, First, Middle Initial)  
**Charles Wooters**

Mailing Address 9633 Weathered Oak Ct

City Bethesda State MD Zip Code 20817

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

Name of Employer Melhman Vogel Catagnetti Occupation Lobbyist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 24 / 2013

**Transaction ID : C7086500**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 4622 Ashbury Place, NW

City Washington State DC Zip Code 20016

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

Name of Employer Cassidy & Associates Occupation Lobbyist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 19 / 2013

**Transaction ID : C7101709A**

Amount of Each Receipt this Period  
1000.00

\* Earmarked Contribution: See Below

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

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

1825.00

**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 25 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

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

Mailing Address P.O. Box 382110

City State Zip Code  
Cambridge MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 19 / 2013

**Transaction ID : C7101709AB**

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

0.00

40789.38

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

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

Mailing Address 800 Connecticut Avenue NW  
Suite 600

City Washington State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 08 / 2013

**Transaction ID : C7092529**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 1932 Wynnton Road

City Columbus State GA Zip Code 31999

FEC ID number of contributing federal political committee. **C C00034157**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 23 / 2013

**Transaction ID : C7087251**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 1932 Wynnton Road

City Columbus State GA Zip Code 31999

FEC ID number of contributing federal political committee. **C C00034157**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 28 / 2013

**Transaction ID : C7141293**

Amount of Each Receipt this Period  
 1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**AFSCME People**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00011114

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 28 / 2013

**Transaction ID : C7141278**

Amount of Each Receipt this Period  
 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Air Line Pilots Association PAC**

Mailing Address 1625 Massachusetts Avenue, NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00035451

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 14 / 2013

**Transaction ID : C7092559**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Amalgamated Transit Union - COPE**

Mailing Address 5025 Wisconsin Avenue, NW

City Washington State DC Zip Code 20016

FEC ID number of contributing federal political committee. **C** C00032995

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 19 / 2013

**Transaction ID : C7101706**

Amount of Each Receipt this Period  
 2500.00

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**American Academy of Neurology Professional Assoc. (BRAIN PAC)**

Mailing Address 401 C ST NE

City WASHINGTON State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C C00435933**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : C7141300**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN ASSOCIATION OF NURSE ANESTHETISTS SEPARATE SEGREGATED FUND (CRNA-PAC)**

Mailing Address 222 SOUTH PROSPECT AVE  
C/O FINANCE DEPARTMENT

City PARK RIDGE State IL Zip Code 60068

FEC ID number of contributing federal political committee. **C C00173153**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : C7089296**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 2400 N St NW

City Washington State DC Zip Code 20037

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : C7141301**

Amount of Each Receipt this Period  
2500.00

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**American College of Physicians Services PAC**

Mailing Address 25 Massachusetts Ave, NW  
Suite 700

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00403881**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 03 / 2013

**Transaction ID : C7096708**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**American Council of Engineering Companies PAC**

Mailing Address 1015 15th Street, NW  
Suite 802

City Washington State DC Zip Code 20005-2605

FEC ID number of contributing federal political committee. **C C00010868**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 28 / 2013

**Transaction ID : C7141285**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**American Council of Life Insurers PAC**

Mailing Address 101 Constitution Ave., NW  
Suite 700

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00147066**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 03 / 2013

**Transaction ID : C7089302**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**American Federation of Govt. Employees PAC**

Mailing Address 80 F Street NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00009936**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : C7089304**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**American Hospital Association PAC**

Mailing Address 325 Seventh Street, NW

City Washington State DC Zip Code 20004-2802

FEC ID number of contributing federal political committee. **C C00106146**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 23 / 2013

**Transaction ID : C7087256**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**American Nurses Association PAC**

Mailing Address 8515 Georgia Ave Suite 400

City Silver Spring State MD Zip Code 20910-3403

FEC ID number of contributing federal political committee. **C C00017525**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 14 / 2013

**Transaction ID : C7092555**

Amount of Each Receipt this Period  
 1250.00

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

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

3250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

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

Mailing Address 1505 Prince Street  
Suite 300

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00024968

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : C7141298**

Amount of Each Receipt this Period  
 2000.00

**B.** Full Name (Last, First, Middle Initial)  
**American Postal Workers Union COPA**

Mailing Address 1300 L Street, NW  
Suite 608

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00010322

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 28 / 2013

**Transaction ID : C7141288**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**American Road & Transportation Builders Assoc. PAC (ARBTA PAC)**

Mailing Address 1219 28th Street, NW

City Washington State DC Zip Code 20007

FEC ID number of contributing federal political committee. **C** C00118208

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2013

**Transaction ID : C7096703**

Amount of Each Receipt this Period  
 1000.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**American Society of Anesthesiologists PAC**

Mailing Address 520 N. Northwest Highway

City Park Ridge State IL Zip Code 60068

FEC ID number of contributing federal political committee. **C C00255752**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 28 / 2013

**Transaction ID : C7141294**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**American Wind Energy Association PAC**

Mailing Address 1501 M Street, NW, 10TH FLOOR

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00259572**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 28 / 2013

**Transaction ID : C7141286**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Assn. for Advanced Life Underwriting PAC**

Mailing Address 2901 Telestar Ct.  
4th Floor

City Falls Church State VA Zip Code 22042

FEC ID number of contributing federal political committee. **C C00447565**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 28 / 2013

**Transaction ID : C7141292**

Amount of Each Receipt this Period  
 1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

**A. Baker Donelson, Bearman, Caldwell & Berkowitz PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 920 Massachusetts Ave., NW  
Suite 900

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00431072**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2013

**Transaction ID : C7141281**

Amount of Each Receipt this Period  
 1500.00

**B. Calpine Corp. PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 4160 Dublin Blvd., Suite 100

City Dublin State CA Zip Code 94568

FEC ID number of contributing federal political committee. **C C00362640**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 10 / 2013

**Transaction ID : C7097270**

Amount of Each Receipt this Period  
 1500.00

**C. CORNING INCORPORATED EMPLOYEES POLITICAL ACTION COMMITTEE (COREPAC)**

Full Name (Last, First, Middle Initial)  
Mailing Address 325 7TH STREET NW  
SUITE 600

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00033589**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 08 / 2013

**Transaction ID : C7092543**

Amount of Each Receipt this Period  
 500.00

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

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

3500.00

**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 34 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

**A. COVINGTON AND BURLING LLP PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1201 PENNSYLVANIA AVENUE, NW  
 City State Zip Code  
 WASHINGTON DC 20004  
 FEC ID number of contributing federal political committee. **C C00462630**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 14 / 2013  
**Transaction ID : C7092558**  
 Amount of Each Receipt this Period  
 1000.00

**B. Credit Union Legislative Action Council (CULAC)**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 601 Pennsylvania Ave NW  
 South Bldg Suite 600  
 City State Zip Code  
 Washington DC 20004  
 FEC ID number of contributing federal political committee. **C C00007880**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 03 / 2013  
**Transaction ID : C7089308**  
 Amount of Each Receipt this Period  
 1500.00

**C. Elect Deborah Kafoury**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. Box 82101  
 City State Zip Code  
 Portland OR 97282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 26 / 2013  
**Transaction ID : C7087213**  
 Amount of Each Receipt this Period  
 125.00  
 Permissible Funds

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

2625.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Blumenauer for Congress**

**A. Employee-Owned S Corporation of America (ESCA PAC)**

Full Name (Last, First, Middle Initial)  
Employee-Owned S Corporation of America (ESCA PAC)

Mailing Address 805 15TH Street NW  
Suite 650

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00458257

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 22 / 2013

**Transaction ID : C7092977**

Amount of Each Receipt this Period  
4500.00

**B. Engineers Political Education Committee (EPEC)**

Full Name (Last, First, Middle Initial)  
Engineers Political Education Committee (EPEC)

Mailing Address 1125 17TH St. NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00029504

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 28 / 2013

**Transaction ID : C7141279**

Amount of Each Receipt this Period  
2500.00

**C. FBB FEDERAL RELATIONS PAC**

Full Name (Last, First, Middle Initial)  
FBB FEDERAL RELATIONS PAC

Mailing Address 1120 G STREET NW SUITE 1020

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00459222

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 23 / 2013

**Transaction ID : C7087249**

Amount of Each Receipt this Period  
500.00

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

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

7500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Blumenauer for Congress**

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

Mailing Address 6700 Las Colinas Blvd.

City Irving State TX Zip Code 75039

FEC ID number of contributing federal political committee. **C** C00034132

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 10 / 2013

**Transaction ID : C7097098**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Garney Holding Co. PAC**

Mailing Address 1333 NW Vivion Road

City Kansas City State MO Zip Code 64118

FEC ID number of contributing federal political committee. **C** C00442905

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : C7141303**

Amount of Each Receipt this Period  
 3000.00

**C.** Full Name (Last, First, Middle Initial)  
**GRADIENT RESOURCES INC POLITICAL ACTION COMMITTEE**

Mailing Address 9670 GATEWAY DRIVE SUITE 200

City RENO State NV Zip Code 89521

FEC ID number of contributing federal political committee. **C** C00491381

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 28 / 2013

**Transaction ID : C7141284**

Amount of Each Receipt this Period  
 1500.00

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

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

Mailing Address **345 PARK AVENUE**

City **NEW YORK** State **NY** Zip Code **10154**

FEC ID number of contributing federal political committee. **C C00451153**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2013**

**Transaction ID : C7141311**

Amount of Each Receipt this Period  
 2000.00

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

Mailing Address **8404 Indian Hills Drive**

City **Omaha** State **NE** Zip Code **68114**

FEC ID number of contributing federal political committee. **C C00103903**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 10 / 2013**

**Transaction ID : C7092552**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**HEALTH NET Inc. PAC**

Mailing Address **455 Capitol Mall Suite 801**

City **Sacramento** State **CA** Zip Code **95814**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2013**

**Transaction ID : C7141289**

Amount of Each Receipt this Period  
 1000.00

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

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

3500.00

**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 38 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Holland & Knight Committee for Effective Govt.**

Mailing Address 2100 Pennsylvania Avenue, NW  
Suite 400

City Washington State DC Zip Code 20037

FEC ID number of contributing federal political committee. **C** C00171330

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 23 / 2013

**Transaction ID : C7087250**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 101 Constitution Avenue NW  
Suite 500 West

City Washington State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 08 / 2013

**Transaction ID : C7092538**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Humane Society Legislative Fund PAC**

Mailing Address 519 C Street, NE

City Washington State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C** C00466813

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 23 / 2013

**Transaction ID : C7087255**

Amount of Each Receipt this Period  
 1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Int'l Brotherhood of Electrical Workers COPE**

Mailing Address 900 Seventh St. N.W.

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00027342**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 10 / 2013

**Transaction ID : C7092550**

Amount of Each Receipt this Period  
 1250.00

**B.** Full Name (Last, First, Middle Initial)  
**INTEGRAPAC Of Integra Telecom Holdings Inc.**

Mailing Address 1201 NE Lloyd Blvd.  
Suite 500

City Portland State OR Zip Code 97232

FEC ID number of contributing federal political committee. **C C00428094**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 28 / 2013

**Transaction ID : C7141290**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 1155 F STREET N.W. #1025

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00125641**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2013

**Transaction ID : C7096707**

Amount of Each Receipt this Period  
 1250.00

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

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

3500.00

**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 40 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**International Longshore & Warehouse Union PAC**

Mailing Address 1188 Franklin Street

City San Francisco State CA Zip Code 94109

FEC ID number of contributing federal political committee. **C C00176214**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 08 / 2013

**Transaction ID : C7092540**

Amount of Each Receipt this Period  
 2000.00

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

Mailing Address 1101 Pennsylvania Avenue NW  
Suite 200

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00034405**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 26 / 2013

**Transaction ID : C7087216**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**K&L Gates PAC**

Mailing Address 1601 K Street, NW

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C C00213173**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 23 / 2013

**Transaction ID : C7087254**

Amount of Each Receipt this Period  
 1000.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**King & Spalding Nonpartisan Com. for Good Gov.**

Mailing Address 1180 PEACHTREE STREET

City ATLANTA State GA Zip Code 30309

FEC ID number of contributing federal political committee. **C** C00204453

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : C7141297**

Amount of Each Receipt this Period  
 1500.00

**B.** Full Name (Last, First, Middle Initial)  
**LTK Consulting Services Inc. PAC**

Mailing Address 100 West Bulter Avenue

City Ambler State PA Zip Code 19002

FEC ID number of contributing federal political committee. **C** C00236968

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 17 / 2013

**Transaction ID : C7101309**

Amount of Each Receipt this Period  
 2600.00

**C.** Full Name (Last, First, Middle Initial)  
**LTK Consulting Services Inc. PAC**

Mailing Address 100 West Bulter Avenue

City Ambler State PA Zip Code 19002

FEC ID number of contributing federal political committee. **C** C00236968

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 17 / 2013

**Transaction ID : C7101310**

Amount of Each Receipt this Period  
 2600.00

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

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

6700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Nat'l Air Traffic Controllers Association PAC**

Mailing Address 1325 Massachusetts Ave. NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 23 / 2013

**Transaction ID : C7087253**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Nat'l Association of Postmasters of the US PAC (NAPUS)**

Mailing Address 8 Herbert Street

City Alexandria State VA Zip Code 22305

FEC ID number of contributing federal political committee. **C** C00100404

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 23 / 2013

**Transaction ID : C7087246**

Amount of Each Receipt this Period  
 625.00

**C.** Full Name (Last, First, Middle Initial)  
**Nat'l Association of Postmasters of the US PAC (NAPUS)**

Mailing Address 8 Herbert Street

City Alexandria State VA Zip Code 22305

FEC ID number of contributing federal political committee. **C** C00100404

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 23 / 2013

**Transaction ID : C7087247**

Amount of Each Receipt this Period  
 1000.00

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

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

2625.00

**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 43 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Nat'l Emergency Medicine PAC (NEMPAC)**

Mailing Address 1125 Executive Circle

City Irving State TX Zip Code 75038

FEC ID number of contributing federal political committee. **C** C00140061

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : C7141295**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF ENROLLED AGENTS POLITICAL ACTION COMMITTEE**

Mailing Address P.O. BOX 65071

City WASHINGTON State DC Zip Code 20035

FEC ID number of contributing federal political committee. **C** C00415372

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 03 / 2013

**Transaction ID : C7096705**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL CANNABIS INDUSTRY ASSOCIATION PAC**

Mailing Address PO BOX 78062

City WASHINGTON State DC Zip Code 20013

FEC ID number of contributing federal political committee. **C** C00528026

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2013

**Transaction ID : C7141287**

Amount of Each Receipt this Period  
 1000.00

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 44 OF 93  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

Full Name (Last, First, Middle Initial)  
**NATIONAL COMMITTEE TO PRESERVE SOCIAL SECURITY & MEDICARE PAC**

Mailing Address **10 G ST. NE  
SUITE 600**  
 City **WASHINGTON** State **DC** Zip Code **20002**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 03 / 2013**

**Transaction ID : C7096706**

FEC ID number of contributing federal political committee. **C C00172296**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date  
 \_\_\_\_\_  
**1000.00**

Full Name (Last, First, Middle Initial)  
**NATIONAL POSTAL MAIL HANDLERS UNION PAC - DIV OF LABORERS POLITICAL LEAGUE**

Mailing Address **905 16TH ST., NW  
SECOND FLOOR**  
 City **WASHINGTON** State **DC** Zip Code **20006**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2013**

**Transaction ID : C7141302**

FEC ID number of contributing federal political committee. **C C00345306**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date  
 \_\_\_\_\_  
**2000.00**

Full Name (Last, First, Middle Initial)  
**National Ready Mixed Concrete Assoc. (ConcretePAC)**

Mailing Address **900 SPRING ST.**  
 City **SILVER SPRING** State **MD** Zip Code **20910**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2013**

**Transaction ID : C7141296**

FEC ID number of contributing federal political committee. **C C00114025**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date  
 \_\_\_\_\_  
**1000.00**

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

\_\_\_\_\_

**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 45 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**National Stone Sand & Gravel Assn. ROCKPAC**

Mailing Address 1605 King Street

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C C00089458**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 24 / 2013

**Transaction ID : C7093263**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**National Stone Sand & Gravel Assn. ROCKPAC**

Mailing Address 1605 King Street

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C C00089458**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2013

**Transaction ID : C7141291**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**New York Life Insurance Company PAC**

Mailing Address 51 Madison Ave  
Rm 1109

City New York State NY Zip Code 10010-1603

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 23 / 2013

**Transaction ID : C7087252**

Amount of Each Receipt this Period  
 1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Nike Inc. Federal PAC**

Mailing Address One Bowerman Drive

City State Zip Code  
Beaverton OR 97005

FEC ID number of contributing federal political committee. **C C00142786**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2013

**Transaction ID : C7141277**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Oldcastle Materials, Inc. PAC**

Mailing Address 101 Constitution Avenue  
Suite 600

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C C00346353**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2013

**Transaction ID : C7141280**

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
**PAC of the American Assoc. of Orthopaedic Surgeons (AAOS)**

Mailing Address 317 Massachusetts Avenue, NE

City State Zip Code  
Washington DC 20002

FEC ID number of contributing federal political committee. **C C00343137**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 10 / 2013

**Transaction ID : C7097268**

Amount of Each Receipt this Period  
2500.00

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

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

7000.00

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

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

FOR LINE NUMBER: PAGE 47 OF 93  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Pacific Life Insurance PAC**

Mailing Address 700 Newport Center Drive

City State Zip Code  
Newport Beach CA 92660

FEC ID number of contributing federal political committee. **C C00068528**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 03 / 2013

**Transaction ID : C7096704**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**PacifiCorp/MidAmerican PAC**

Mailing Address 825 NE Multnomah  
Suite 2000 LCT

City State Zip Code  
Portland OR 97232

FEC ID number of contributing federal political committee. **C C00082800**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 28 / 2013

**Transaction ID : C7141282**

Amount of Each Receipt this Period  
 1500.00

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

Mailing Address 100 West Walnut Street  
T-1110

City State Zip Code  
Pasadena CA 91124

FEC ID number of contributing federal political committee. **C C00103549**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 23 / 2013

**Transaction ID : C7087248**

Amount of Each Receipt this Period  
 2500.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

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

Mailing Address 121 SW Salmon  
1WTC 03

City State Zip Code  
Portland OR 97204

FEC ID number of contributing federal political committee. **C** C00381020

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 03 / 2013

**Transaction ID : C7089307**

Amount of Each Receipt this Period  
1250.00

**B.** Full Name (Last, First, Middle Initial)  
**Real Estate Investment Trusts PAC (REITPAC)**

Mailing Address 1875 I Street, NW  
Suite 600

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00303339

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 28 / 2013

**Transaction ID : C7141275**

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
**Real Estate Roundtable (REAL) PAC**

Mailing Address 801 Pennsylvania Ave. NW  
Suite 720

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00033779

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 24 / 2013

**Transaction ID : C7087219**

Amount of Each Receipt this Period  
2500.00

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

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

8750.00

**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 49 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**REZNICK GROUP P C POLITICAL ACTION COMMITTEE**

Mailing Address 7700 OLD GEORGETOWN ROAD SUITE 400

City	State	Zip Code
BETHESDA	MD	20814

FEC ID number of contributing federal political committee. **C** C00491738

Name of Employer	Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 03 / 2013

**Transaction ID : C7096702**

Amount of Each Receipt this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
**SOLARCITY CORPORATION POLITICAL ACTION COMMITTEE (SOLARCITY PAC)**

Mailing Address 575 7TH ST NW STE 400

City	State	Zip Code
WASHINGTON	DC	20004

FEC ID number of contributing federal political committee. **C** C00520569

Name of Employer	Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 26 / 2013

**Transaction ID : C7087215**

Amount of Each Receipt this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Telecom Education Comm. Org (TECO) PAC**

Mailing Address 4121 Wilson Blvd.  
10th Floor

City	State	Zip Code
Arlington	VA	22203

FEC ID number of contributing federal political committee. **C** C00004473

Name of Employer	Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : C7089300**

Amount of Each Receipt this Period

1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

**A. Full Name (Last, First, Middle Initial)**  
**TERRA-GEN POLITICAL ACTION COMMITTEE (TERRA-GEN PAC)**

Mailing Address 1095 Avenue of the Americas  
25th Floor, Suite A

City New York State NY Zip Code 10036

FEC ID number of contributing federal political committee. **C C00494716**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 28 / 2013

**Transaction ID : C7141283**

Amount of Each Receipt this Period  
 1500.00

**B. Full Name (Last, First, Middle Initial)**  
**The American Institute of Architects PAC**

Mailing Address 1735 New York Ave. NW

City Washington State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : C7089310**

Amount of Each Receipt this Period  
 1000.00

**C. Full Name (Last, First, Middle Initial)**  
**The American Institute of Architects PAC**

Mailing Address 1735 New York Ave. NW

City Washington State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 28 / 2013

**Transaction ID : C7141276**

Amount of Each Receipt this Period  
 4000.00

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

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

6500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

**A. Trucking PAC of the American Trucking Assoc. (TRUCK PAC)**

Full Name (Last, First, Middle Initial)  
Mailing Address 430 First Street SE

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C C00002881**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : C7089289**

Amount of Each Receipt this Period  
 1000.00

**B. United Food & Commercial Workers ABC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1775 K Street, NW  
7th Floor

City Washington State DC Zip Code 20006-1598

FEC ID number of contributing federal political committee. **C C00002766**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 26 / 2013

**Transaction ID : C7087217**

Amount of Each Receipt this Period  
 5000.00

**C. United Transportation Union PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 24950 Country Club Blvd., Suite 3

City North Olmsted State OH Zip Code 44070

FEC ID number of contributing federal political committee. **C C00001636**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 22 / 2013

**Transaction ID : C7092978**

Amount of Each Receipt this Period  
 2500.00

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

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

8500.00

**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 52 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Van Scoyoc Associates, Inc.**

Mailing Address 101 Constitution Avenue, NW  
Suite 600 West

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00369058**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1233.29

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 22 / 2013

**Transaction ID : C7096700**

Amount of Each Receipt this Period  
1233.29

\* In-Kind: Room Rental, Catering, Staffing

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

Mailing Address 1220 Rankin Drive

City Troy State MI Zip Code 48083

FEC ID number of contributing federal political committee. **C C00489096**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 23 / 2013

**Transaction ID : C7087245**

Amount of Each Receipt this Period  
500.00

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

Mailing Address P.O. BOX 75000  
MC: 2250

City DETROIT State MI Zip Code 48275

FEC ID number of contributing federal political committee. **C C00007948**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : C7089306**

Amount of Each Receipt this Period  
1000.00

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

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

2733.29

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

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

FOR LINE NUMBER: PAGE 53 OF 93  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

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

Mailing Address P.O. BOX 75000  
MC: 2250

City State Zip Code  
DETROIT MI 48275

FEC ID number of contributing federal political committee. **C** C00007948

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 10 2013

**Transaction ID : C7092553**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

1000.00

123183.29

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

Full Name (Last, First, Middle Initial) <b>A. KeyBank of Oregon</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 30 / 2013	
Mailing Address 444 SW 5th Ave		<b>Transaction ID : C7092572</b>	
City Portland	State OR	Zip Code 97204-2206	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 0.74	
Name of Employer	Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 205.85		
		Interest	

Full Name (Last, First, Middle Initial) <b>B. KeyBank of Oregon</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 30 / 2013	
Mailing Address 444 SW 5th Ave		<b>Transaction ID : C7092573</b>	
City Portland	State OR	Zip Code 97204-2206	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.88	
Name of Employer	Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 205.85		
		Interest	

Full Name (Last, First, Middle Initial) <b>C. KeyBank of Oregon</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2013	
Mailing Address 444 SW 5th Ave		<b>Transaction ID : C7096711</b>	
City Portland	State OR	Zip Code 97204-2206	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 26.74	
Name of Employer	Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 205.85		
		Interest	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	53.36
<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 55 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

Full Name (Last, First, Middle Initial) <b>A. KeyBank of Oregon</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2013	
Mailing Address 444 SW 5th Ave		<b>Transaction ID : C7096712</b>	
City Portland	State OR	Zip Code 97204-2206	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 0.75	
Name of Employer	Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 205.85		
		Interest	

Full Name (Last, First, Middle Initial) <b>B. KeyBank of Oregon</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 28 / 2013	
Mailing Address 444 SW 5th Ave		<b>Transaction ID : C7141317</b>	
City Portland	State OR	Zip Code 97204-2206	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 17.25	
Name of Employer	Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 205.85		
		Interest	

Full Name (Last, First, Middle Initial) <b>C. KeyBank of Oregon</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 28 / 2013	
Mailing Address 444 SW 5th Ave		<b>Transaction ID : C7141318</b>	
City Portland	State OR	Zip Code 97204-2206	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 0.74	
Name of Employer	Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 205.85		
		Interest	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	18.74
<b>TOTAL</b> This Period (last page this line number only).....	72.10

**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 56 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ace Parking</b>		Date of Disbursement
Mailing Address 700 NE Multnomah		M M / D D / Y Y Y Y 05 / 03 / 2013
City Portland	State OR	Zip Code 97232
Purpose of Disbursement Parking	Candidate Name	Amount of Each Disbursement this Period 96.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>Transaction ID : D420854</b>

Full Name (Last, First, Middle Initial) <b>B. Ace Parking</b>		Date of Disbursement
Mailing Address 700 NE Multnomah		M M / D D / Y Y Y Y 06 / 03 / 2013
City Portland	State OR	Zip Code 97232
Purpose of Disbursement Parking	Candidate Name	Amount of Each Disbursement this Period 96.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>Transaction ID : D422165</b>

Full Name (Last, First, Middle Initial) <b>c. ADP Easypay</b>		Date of Disbursement
Mailing Address 4099 SE International Way Ste 203		M M / D D / Y Y Y Y 04 / 30 / 2013
City Milwaukie	State OR	Zip Code 97222-8853
Purpose of Disbursement Payroll Taxes	Candidate Name	Amount of Each Disbursement this Period 3302.39
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>Transaction ID : D420860</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3494.39
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

Full Name (Last, First, Middle Initial) <b>A. ADP Easy pay</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2013
Mailing Address 4099 SE International Way Ste 203		Amount of Each Disbursement this Period 131.50 <b>Transaction ID : D420861</b>
City Milwaukie State OR Zip Code 97222-8853	Purpose of Disbursement Payroll Services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ADP Easy pay</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2013
Mailing Address 4099 SE International Way Ste 203		Amount of Each Disbursement this Period 25.20 <b>Transaction ID : D421483</b>
City Milwaukie State OR Zip Code 97222-8853	Purpose of Disbursement Payroll Taxes	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. ADP Easy pay</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2013
Mailing Address 4099 SE International Way Ste 203		Amount of Each Disbursement this Period 17.36 <b>Transaction ID : D420339</b>
City Milwaukie State OR Zip Code 97222-8853	Purpose of Disbursement Payroll Taxes	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	174.06
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

Full Name (Last, First, Middle Initial)  
**A. ADP Easy pay**

Mailing Address 4099 SE International Way  
Ste 203

City Milwaukie State OR Zip Code 97222-8853

Purpose of Disbursement Payroll Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 05 / 30 / 2013

Amount of Each Disbursement this Period: 118.00

Transaction ID : D422169

Full Name (Last, First, Middle Initial)  
**B. ADP Easy pay**

Mailing Address 4099 SE International Way  
Ste 203

City Milwaukie State OR Zip Code 97222-8853

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 05 / 30 / 2013

Amount of Each Disbursement this Period: 3088.58

Transaction ID : D422170

Full Name (Last, First, Middle Initial)  
**c. ADP Easy pay**

Mailing Address 4099 SE International Way  
Ste 203

City Milwaukie State OR Zip Code 97222-8853

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 28 / 2013

Amount of Each Disbursement this Period: 2972.88

Transaction ID : D425176

**SUBTOTAL** of Disbursements This Page (optional) ..... 6179.46

**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 59 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

Full Name (Last, First, Middle Initial) <b>A. ADP Easy pay</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2013
Mailing Address 4099 SE International Way Ste 203		Amount of Each Disbursement this Period 23.80 <b>Transaction ID : D422502</b>
City Milwaukie State OR Zip Code 97222-8853	Purpose of Disbursement Payroll Taxes	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ADP Easy pay</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2013
Mailing Address 4099 SE International Way Ste 203		Amount of Each Disbursement this Period 118.00 <b>Transaction ID : D425180</b>
City Milwaukie State OR Zip Code 97222-8853	Purpose of Disbursement Payroll Services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. ADP Easy pay</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2013
Mailing Address 4099 SE International Way Ste 203		Amount of Each Disbursement this Period 23.80 <b>Transaction ID : D426278</b>
City Milwaukie State OR Zip Code 97222-8853	Purpose of Disbursement Payroll Taxes	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	165.60
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

Full Name (Last, First, Middle Initial) <b>A. All Hands Raised</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2013
Mailing Address 905 NW 12th Ave.		Amount of Each Disbursement this Period 1250.00 <b>Transaction ID : D421496</b>
City Portland	State OR	
Purpose of Disbursement Event Tickets	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Hon. Michael A. Andrews</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2013
Mailing Address 5047 Glenbrook Terr. NW		Amount of Each Disbursement this Period 185.00 <b>Transaction ID : D425627</b>
City Washington	State DC	
Purpose of Disbursement Room Rental	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		* In-Kind Received

Full Name (Last, First, Middle Initial) <b>C. Hon. Michael A. Andrews</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2013
Mailing Address 5047 Glenbrook Terr. NW		Amount of Each Disbursement this Period 216.38 <b>Transaction ID : D425628</b>
City Washington	State DC	
Purpose of Disbursement Catering	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		* In-Kind Received

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1651.38
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

Full Name (Last, First, Middle Initial) <b>A. Augusta Bowden</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2013
Mailing Address 2135 NE Jamie Drive		Amount of Each Disbursement this Period 320.00 <b>Transaction ID : D422168</b>
City Hillsboro	State OR Zip Code 97124	
Purpose of Disbursement Graphic Design	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Comcast</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2013
Mailing Address 900 Michigan Ave., NE		Amount of Each Disbursement this Period 68.95 <b>Transaction ID : D421480</b>
City Washington	State DC Zip Code 20017	
Purpose of Disbursement Telephone	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Comcast</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2013
Mailing Address 900 Michigan Ave., NE		Amount of Each Disbursement this Period 68.95 <b>Transaction ID : D422505</b>
City Washington	State DC Zip Code 20017	
Purpose of Disbursement Telephone	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	457.90
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 62 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

Full Name (Last, First, Middle Initial) <b>A. Comcast</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2013
Mailing Address 900 Michigan Ave., NE		Amount of Each Disbursement this Period 68.95
City Washington	State DC	
Zip Code 20017	Purpose of Disbursement Telecommunications	Transaction ID : D422183
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Democratic Party Of Oregon</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2013
Mailing Address 232 NE 9th Ave		Amount of Each Disbursement this Period 60.00
City Portland	State OR	
Zip Code 97232	Purpose of Disbursement Web and Internet Services	Transaction ID : D422166
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Democratic Party Of Oregon</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2013
Mailing Address 232 NE 9th Ave		Amount of Each Disbursement this Period 60.00
City Portland	State OR	
Zip Code 97232	Purpose of Disbursement Web and Internet Services	Transaction ID : D420345
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	188.95
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

Full Name (Last, First, Middle Initial) <b>A. Integra Telecom</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2013
Mailing Address PO Box 3034		Amount of Each Disbursement this Period 294.10 <b>Transaction ID : D420340</b>
City Portland	State OR	
Zip Code 97208-3034	Purpose of Disbursement Telephone	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:	

Full Name (Last, First, Middle Initial) <b>B. Integra Telecom</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2013
Mailing Address PO Box 3034		Amount of Each Disbursement this Period 286.30 <b>Transaction ID : D415273</b>
City Portland	State OR	
Zip Code 97208-3034	Purpose of Disbursement Telephone	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:	

Full Name (Last, First, Middle Initial) <b>c. Integra Telecom</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2013
Mailing Address PO Box 3034		Amount of Each Disbursement this Period 285.21 <b>Transaction ID : D421591</b>
City Portland	State OR	
Zip Code 97208-3034	Purpose of Disbursement Telephone	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	865.61
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

Full Name (Last, First, Middle Initial) <b>A. Liberty Northwest</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2013
Mailing Address P.O. Box 6486		Amount of Each Disbursement this Period 650.00 <b>Transaction ID : D418773</b>
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement Insurance	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:	

Full Name (Last, First, Middle Initial) <b>B. Morel, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2013
Mailing Address PO Box 4625		Amount of Each Disbursement this Period 1784.69 <b>Transaction ID : D420855</b>
City Portland	State OR	
Zip Code 97208-4625	Purpose of Disbursement Printing and Postage	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:	

Full Name (Last, First, Middle Initial) <b>c. Morel, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2013
Mailing Address PO Box 4625		Amount of Each Disbursement this Period 284.00 <b>Transaction ID : D421590</b>
City Portland	State OR	
Zip Code 97208-4625	Purpose of Disbursement Printing and Reproduction	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2718.69
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

Full Name (Last, First, Middle Initial) <b>A. NARAL Pro-Choice Oregon</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2013
Mailing Address PO Box 40472		Amount of Each Disbursement this Period 350.00 <b>Transaction ID : D420341</b>
City Portland	State OR	
Zip Code 97240	Purpose of Disbursement Event Tickets	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:	

Full Name (Last, First, Middle Initial) <b>B. National Democratic Club</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2013
Mailing Address 30 Ivy St SE		Amount of Each Disbursement this Period 120.13 <b>Transaction ID : D420338</b>
City Washington	State DC	
Zip Code 20003-4071	Purpose of Disbursement Food and Beverage, Membership Dues	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:	

Full Name (Last, First, Middle Initial) <b>c. National Democratic Club</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2013
Mailing Address 30 Ivy St SE		Amount of Each Disbursement this Period 240.00 <b>Transaction ID : D422462</b>
City Washington	State DC	
Zip Code 20003-4071	Purpose of Disbursement Membership dues	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	710.13
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 93
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

Full Name (Last, First, Middle Initial) <b>A. NGP Software, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2013
Mailing Address 1101 Vermont Ave NW Ste 710		Amount of Each Disbursement this Period 1970.00 <b>Transaction ID : D422180</b>
City Washington State DC Zip Code 20005-3521	Purpose of Disbursement Database Software	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Oregon League of Conservation Voters</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2013
Mailing Address 133 SW 2nd Ave. Suite 200		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : D420344</b>
City Portland State OR Zip Code 97204	Purpose of Disbursement Event Tickets	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Oregon Square</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2013
Mailing Address P.O. Box 843534		Amount of Each Disbursement this Period 1028.09 <b>Transaction ID : D422167</b>
City Los Angeles State CA Zip Code 90084	Purpose of Disbursement Office Rent	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3248.09
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

Full Name (Last, First, Middle Initial) <b>A. Arran Robertson</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2013
Mailing Address 3548 NE 6th Ave		Amount of Each Disbursement this Period 398.85 <b>Transaction ID : D420862</b>
City Portland	State OR	
Zip Code 97212	Purpose of Disbursement Payroll	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:	

Full Name (Last, First, Middle Initial) <b>B. Arran Robertson</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2013
Mailing Address 3548 NE 6th Ave		Amount of Each Disbursement this Period 398.85 <b>Transaction ID : D422171</b>
City Portland	State OR	
Zip Code 97212	Purpose of Disbursement Payroll	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:	

Full Name (Last, First, Middle Initial) <b>C. Arran Robertson</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2013
Mailing Address 3548 NE 6th Ave		Amount of Each Disbursement this Period 398.85 <b>Transaction ID : D425177</b>
City Portland	State OR	
Zip Code 97212	Purpose of Disbursement Payroll	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1196.85
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 93		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

Full Name (Last, First, Middle Initial) <b>A. William D. Smith</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2013
Mailing Address 206 NE 29th Ave		Amount of Each Disbursement this Period 1122.64 <b>Transaction ID : D425178</b>
City Portland	State OR	
Zip Code 97232-3204	Purpose of Disbursement Payroll	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:	

Full Name (Last, First, Middle Initial) <b>B. William D. Smith</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2013
Mailing Address 206 NE 29th Ave		Amount of Each Disbursement this Period 1122.64 <b>Transaction ID : D422172</b>
City Portland	State OR	
Zip Code 97232-3204	Purpose of Disbursement Payroll	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:	

Full Name (Last, First, Middle Initial) <b>C. William D. Smith</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2013
Mailing Address 206 NE 29th Ave		Amount of Each Disbursement this Period 1471.14 <b>Transaction ID : D420863</b>
City Portland	State OR	
Zip Code 97232-3204	Purpose of Disbursement Payroll	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3716.42
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

Full Name (Last, First, Middle Initial) <b>A. SunTrust Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2013
Mailing Address PO Box 6600		Amount of Each Disbursement this Period 34.40
City Hagerstown	State MD	
Zip Code 21741-6600	Purpose of Disbursement Credit Card Processing Fee	Transaction ID : D421492
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. SunTrust Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2013
Mailing Address PO Box 6600		Amount of Each Disbursement this Period 41.56
City Hagerstown	State MD	
Zip Code 21741-6600	Purpose of Disbursement Credit Card Processing Fee	Transaction ID : D421493
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. SunTrust Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2013
Mailing Address PO Box 6600		Amount of Each Disbursement this Period 526.37
City Hagerstown	State MD	
Zip Code 21741-6600	Purpose of Disbursement Credit Card Processing Fee	Transaction ID : D421494
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	602.33
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 93			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

Full Name (Last, First, Middle Initial) <b>A. SunTrust Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2013
Mailing Address PO Box 6600		Amount of Each Disbursement this Period 35.00
City Hagerstown	State MD	
Zip Code 21741-6600	Purpose of Disbursement Credit Card Processing Fee	Transaction ID : D420346
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. SunTrust Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2013
Mailing Address PO Box 6600		Amount of Each Disbursement this Period 43.05
City Hagerstown	State MD	
Zip Code 21741-6600	Purpose of Disbursement Credit Card Processing Fee	Transaction ID : D422360
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. SunTrust Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2013
Mailing Address PO Box 6600		Amount of Each Disbursement this Period 125.26
City Hagerstown	State MD	
Zip Code 21741-6600	Purpose of Disbursement Credit Card Processing Fee	Transaction ID : D422361
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	203.31
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 93		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

Full Name (Last, First, Middle Initial) <b>A. SunTrust Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2013
Mailing Address PO Box 6600		Amount of Each Disbursement this Period 567.45 <b>Transaction ID : D422362</b>
City Hagerstown	State MD	
Zip Code 21741-6600	Purpose of Disbursement Credit Card Processing Fee	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:	

Full Name (Last, First, Middle Initial) <b>B. Kathie Anne Eastman Tell</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2013
Mailing Address 3311 NE Tillamook Street		Amount of Each Disbursement this Period 706.25 <b>Transaction ID : D422182</b>
City Portland	State OR	
Zip Code 97212	Purpose of Disbursement Bookkeeping Services	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:	

Full Name (Last, First, Middle Initial) <b>C. Kathie Anne Eastman Tell</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2013
Mailing Address 3311 NE Tillamook Street		Amount of Each Disbursement this Period 512.50 <b>Transaction ID : D418772</b>
City Portland	State OR	
Zip Code 97212	Purpose of Disbursement Bookkeeping Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1786.20
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 93		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kathie Anne Eastman Tell</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2013
Mailing Address 3311 NE Tillamook Street		Amount of Each Disbursement this Period 650.00 <b>Transaction ID : D420853</b>
City Portland	State OR	
Zip Code 97212	Purpose of Disbursement Bookkeeping Services	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:	

Full Name (Last, First, Middle Initial) <b>B. U-Store Self Storage East</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2013
Mailing Address 1130 NE 28th Ave.		Amount of Each Disbursement this Period 72.00 <b>Transaction ID : D420350</b>
City Portland	State OR	
Zip Code 97232	Purpose of Disbursement Storage	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:	

Full Name (Last, First, Middle Initial) <b>c. U-Store Self Storage East</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2013
Mailing Address 1130 NE 28th Ave.		Amount of Each Disbursement this Period 72.00 <b>Transaction ID : D421500</b>
City Portland	State OR	
Zip Code 97232	Purpose of Disbursement Storage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	794.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

Full Name (Last, First, Middle Initial) <b>A. U-Store Self Storage East</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2013
Mailing Address 1130 NE 28th Ave.		Amount of Each Disbursement this Period 72.00
City Portland	State OR	
Zip Code 97232	Purpose of Disbursement Storage	Transaction ID : <b>D422500</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Van Scoyoc Associates, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2013
Mailing Address 101 Constitution Avenue, NW Suite 600 West		Amount of Each Disbursement this Period 1233.29
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement Room Rental, Catering, Staffing	Transaction ID : <b>D422163</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2013
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period 234.16
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Telephone	Transaction ID : <b>D418609</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1539.45
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 93		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2013
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period 285.81 <b>Transaction ID : D420705</b>
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Telephone	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:	

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2013
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period 251.13 <b>Transaction ID : D422186</b>
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Telephone	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:	

Full Name (Last, First, Middle Initial) <b>c. Whitney Wyatt Burns</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2013
Mailing Address P.O. Box 1174		Amount of Each Disbursement this Period 1937.50 <b>Transaction ID : D422181</b>
City Springfield	State VA	
Zip Code 22151	Purpose of Disbursement FEC Compliance	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2474.44
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

Full Name (Last, First, Middle Initial) <b>A. Elizabeth Wilson</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2013
Mailing Address 13420 SW MacBeth Drive		Amount of Each Disbursement this Period 4798.72
City Tigard	State OR	
Zip Code 97224	Purpose of Disbursement Payroll	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Elizabeth Wilson</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2013
Mailing Address 13420 SW MacBeth Drive		Amount of Each Disbursement this Period 4798.72
City Tigard	State OR	
Zip Code 97224	Purpose of Disbursement Payroll	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Elizabeth Wilson</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2013
Mailing Address 13420 SW MacBeth Drive		Amount of Each Disbursement this Period 4798.72
City Tigard	State OR	
Zip Code 97224	Purpose of Disbursement Payroll	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	14396.16
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 93		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

Full Name (Last, First, Middle Initial) <b>A. Bank Of America (Visa)</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2013
Mailing Address PO Box 15796		Amount of Each Disbursement this Period 487.80
City Wilmington	State DE	
Zip Code 19886		
Purpose of Disbursement Credit Card Payment		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: _____	

Full Name (Last, First, Middle Initial) <b>B. Alaska Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2013
Mailing Address P.O. Box 24948		Amount of Each Disbursement this Period 487.80
City Seattle	State WA	
Zip Code 98124-0948		
Purpose of Disbursement Travel		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)	[MEMO ITEM]
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>c. Bank Of America (Visa)</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2013
Mailing Address PO Box 15796		Amount of Each Disbursement this Period 2304.36
City Wilmington	State DE	
Zip Code 19886		
Purpose of Disbursement Credit Card Payment		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2792.16
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

Full Name (Last, First, Middle Initial) <b>A. Bank Of America (Visa)</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2013
Mailing Address PO Box 15796		Amount of Each Disbursement this Period 35.00
City Wilmington	State DE	
Zip Code 19886	Purpose of Disbursement Credit Card Membership Fee	Transaction ID : D420354 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Bed and Breakfast Accomodations</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2013
Mailing Address 1339 14th Street, NW		Amount of Each Disbursement this Period 757.32
City Washington	State DC	
Zip Code 20005	Purpose of Disbursement Travel	Transaction ID : D420365 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Fred Meyer Stores</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2013
Mailing Address PO Box 42121		Amount of Each Disbursement this Period 25.00
City Portland	State OR	
Zip Code 97242	Purpose of Disbursement Food and Beverage	Transaction ID : D420360 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

Full Name (Last, First, Middle Initial) <b>A. Jack Stack</b>		Date of Disbursement MM / DD / YYYY 04 / 18 / 2013
Mailing Address 13441 Holmes Road		Amount of Each Disbursement this Period 381.01
City Kansas City	State MO	
Zip Code 64145	Purpose of Disbursement Catering	Transaction ID : D420363
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Madison's Grill</b>		Date of Disbursement MM / DD / YYYY 04 / 18 / 2013
Mailing Address 1109 SE Madison		Amount of Each Disbursement this Period 283.00
City Portland	State OR	
Zip Code 97214	Purpose of Disbursement Catering	Transaction ID : D420361
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Office Depot</b>		Date of Disbursement MM / DD / YYYY 04 / 18 / 2013
Mailing Address 323 SE M L King Blvd		Amount of Each Disbursement this Period 34.99
City Portland	State OR	
Zip Code 97214	Purpose of Disbursement Office Supplies	Transaction ID : D420362
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 79 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement MM / DD / YYYY 04 / 18 / 2013
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period 531.04
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Telephone	Transaction ID : <b>D420358</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Bank Of America (Visa)</b>		Date of Disbursement MM / DD / YYYY 04 / 26 / 2013
Mailing Address PO Box 15796		Amount of Each Disbursement this Period 11487.60
City Wilmington	State DE	
Zip Code 19886	Purpose of Disbursement Credit Card Payment	Transaction ID : <b>D420702</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. The Nines</b>		Date of Disbursement MM / DD / YYYY 04 / 26 / 2013
Mailing Address 525 SW Morrison Street		Amount of Each Disbursement this Period 5000.00
City Portland	State OR	
Zip Code 97204	Purpose of Disbursement Catering	Transaction ID : <b>D420703</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	11487.60
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

Full Name (Last, First, Middle Initial) <b>A. Washington Court Hotel</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2013
Mailing Address 525 New Jersey Ave NW		Amount of Each Disbursement this Period 6487.60
City Washington	State DC	
Zip Code 20001-2019	Purpose of Disbursement Catering and Room Rental	Transaction ID : D420704
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Earl Blumenauer</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2013
Mailing Address 830 NE Holladay, #105		Amount of Each Disbursement this Period 53.00
City Portland	State OR	
Zip Code 97232	Purpose of Disbursement Food and Beverage, Travel	Transaction ID : D420706
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Cindy Malone</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2013
Mailing Address 1323 Corbin Place, NE		Amount of Each Disbursement this Period 253.51
City Washington	State DC	
Zip Code 20002	Purpose of Disbursement Food and Beverage	Transaction ID : D420709
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	306.51
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 93		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

Full Name (Last, First, Middle Initial) <b>A. Costco</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2013
Mailing Address 1200 S. Fern		Amount of Each Disbursement this Period 253.51
City Arlington	State VA	
Zip Code 22201	Purpose of Disbursement Food and Beverage	Transaction ID : D420710
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Elizabeth Wilson</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2013
Mailing Address 13420 SW MacBeth Drive		Amount of Each Disbursement this Period 341.08
City Tigard	State OR	
Zip Code 97224	Purpose of Disbursement Health Insurance, Telephone, Office Supplies	Transaction ID : D420856
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2013
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period 60.00
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Telephone	Transaction ID : D420858
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	341.08
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 82 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

Full Name (Last, First, Middle Initial) <b>A. Bank Of America (Visa)</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2013
Mailing Address PO Box 15796		Amount of Each Disbursement this Period 11974.41
City Wilmington	State DE	
Zip Code 19886	Purpose of Disbursement Credit Card Payment	Transaction ID : D421501
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Alaska Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2013
Mailing Address P.O. Box 24948		Amount of Each Disbursement this Period 7.00
City Seattle	State WA	
Zip Code 98124-0948	Purpose of Disbursement Travel	Transaction ID : D421519
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Authentica</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2013
Mailing Address 5507 BE 30th Ave.		Amount of Each Disbursement this Period 800.00
City Portland	State OR	
Zip Code 97211	Purpose of Disbursement Catering	Transaction ID : D421502
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	11974.41
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

Full Name (Last, First, Middle Initial) <b>A. Bank Of America (Visa)</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2013
Mailing Address PO Box 15796		Amount of Each Disbursement this Period 35.00
City Wilmington	State DE	
Zip Code 19886	Purpose of Disbursement Annual Membership Fee	Transaction ID : D421509 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Bed and Breakfast Accomodations</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2013
Mailing Address 1339 14th Street, NW		Amount of Each Disbursement this Period 211.83
City Washington	State DC	
Zip Code 20005	Purpose of Disbursement Travel	Transaction ID : D421515 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Delta Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2013
Mailing Address P.O. Box 20706		Amount of Each Disbursement this Period 617.60
City Atlanta	State GA	
Zip Code 30320	Purpose of Disbursement Travel	Transaction ID : D421504 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

Full Name (Last, First, Middle Initial) <b>A. Fred Meyer Stores</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2013
Mailing Address PO Box 42121		Amount of Each Disbursement this Period 177.94
City Portland	State OR	
Zip Code 97242	Purpose of Disbursement Food and Beverage	Transaction ID : D421525 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Fred Meyer Stores</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2013
Mailing Address PO Box 42121		Amount of Each Disbursement this Period 50.00
City Portland	State OR	
Zip Code 97242	Purpose of Disbursement Transit Passes	Transaction ID : D421526 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Schneider's of Capitol Hill</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2013
Mailing Address 300 Massachusetts Ave. NE		Amount of Each Disbursement this Period 1096.69
City Washington	State DC	
Zip Code 20002	Purpose of Disbursement Refreshments	Transaction ID : D421516 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

Full Name (Last, First, Middle Initial) <b>A. The Nines</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2013
Mailing Address 525 SW Morrison Street		Amount of Each Disbursement this Period 8135.00
City Portland	State OR	
Zip Code 97204	Purpose of Disbursement Catering, Room Rental, Hotel Accomodations	Transaction ID : D421511 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2013
Mailing Address 815 NE Schuyler Street		Amount of Each Disbursement this Period 12.35
City Portland	State OR	
Zip Code 97212	Purpose of Disbursement Postage	Transaction ID : D421520 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2013
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period 272.90
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Telephone	Transaction ID : D421503 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 93		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

Full Name (Last, First, Middle Initial) <b>A. Elizabeth Wilson</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2013
Mailing Address 13420 SW MacBeth Drive		Amount of Each Disbursement this Period 42.15 <b>Transaction ID : D422174</b>
City Tigard	State OR	
Zip Code 97224	Purpose of Disbursement Office Supplies, Art Supplies	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:	

Full Name (Last, First, Middle Initial) <b>B. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2013
Mailing Address 323 SE M L King Blvd		Amount of Each Disbursement this Period 18.38 <b>Transaction ID : D422177</b> <b>[MEMO ITEM]</b>
City Portland	State OR	
Zip Code 97214	Purpose of Disbursement Office Supplies	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:	

Full Name (Last, First, Middle Initial) <b>C. Elizabeth Wilson</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2013
Mailing Address 13420 SW MacBeth Drive		Amount of Each Disbursement this Period 275.00 <b>Transaction ID : D422175</b>
City Tigard	State OR	
Zip Code 97224	Purpose of Disbursement Health Insurance, Telephone	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	317.15
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2013
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period 60.00
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Telephone	Transaction ID : D422176
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Elizabeth Wilson</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2013
Mailing Address 13420 SW MacBeth Drive		Amount of Each Disbursement this Period 275.00
City Tigard	State OR	
Zip Code 97224	Purpose of Disbursement Health Insurance, Telephone	Transaction ID : D422397
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2013
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period 60.00
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Telephone	Transaction ID : D422398
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	275.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 93		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

Full Name (Last, First, Middle Initial) <b>A. Bank Of America (Visa)</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2013
Mailing Address PO Box 15796		Amount of Each Disbursement this Period 11139.63
City Wilmington	State DE	
Zip Code 19886	Purpose of Disbursement Credit Card Payment	Transaction ID : D422463
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Frontier Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2013
Mailing Address 7001 Tower Road		Amount of Each Disbursement this Period 446.90
City Denver	State CO	
Zip Code 80249	Purpose of Disbursement Travel	Transaction ID : D422469
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Frontier Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2013
Mailing Address 7001 Tower Road		Amount of Each Disbursement this Period 374.80
City Denver	State CO	
Zip Code 80249	Purpose of Disbursement Travel	Transaction ID : D422470
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	11139.63
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

Full Name (Last, First, Middle Initial)  
**A. Postal Annex**

Mailing Address 1631 NE Broadway

City Portland State OR Zip Code 97232

Purpose of Disbursement Shipping

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 17 / 2013

Amount of Each Disbursement this Period: 101.75

Transaction ID : D422477

[MEMO ITEM]

Full Name (Last, First, Middle Initial)  
**B. Stick-Em Up, Inc.**

Mailing Address PO Box 5445

City Pleasanton State CA Zip Code 94566-1445

Purpose of Disbursement Lapel pins

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 17 / 2013

Amount of Each Disbursement this Period: 7030.00

Transaction ID : D422471

[MEMO ITEM]

Full Name (Last, First, Middle Initial)  
**c. The Nines**

Mailing Address 525 SW Morrison Street

City Portland State OR Zip Code 97204

Purpose of Disbursement Catering, Room Rental, Hotel Accomodations

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 17 / 2013

Amount of Each Disbursement this Period: 1972.72

Transaction ID : D422468

[MEMO ITEM]

**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)		PAGE 90 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**Blumenauer for Congress**

Full Name (Last, First, Middle Initial) <b>A. United Airlines, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2013
Mailing Address PO Box 66100		Amount of Each Disbursement this Period 416.80
City Chicago	State IL	
Zip Code 60666	Purpose of Disbursement Travel	Transaction ID : D422464
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2013
Mailing Address 815 NE Schuyler Street		Amount of Each Disbursement this Period 80.55
City Portland	State OR	
Zip Code 97212	Purpose of Disbursement Postage	Transaction ID : D422472
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2013
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period 197.66
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Telephone	Transaction ID : D422465
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 93		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

Full Name (Last, First, Middle Initial) <b>A. Elizabeth Wilson</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2013
Mailing Address 13420 SW MacBeth Drive		Amount of Each Disbursement this Period 18.89
City Tigard	State OR Zip Code 97224	
Purpose of Disbursement Travel	Candidate Name	Transaction ID : D425181
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	18.89
<b>TOTAL</b> This Period (last page this line number only).....	85215.55

# 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 92 OF 93
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

Full Name (Last, First, Middle Initial)  
**A. Democratic Congressional Campaign Comm.**

Mailing Address 430 S Capitol St SE

City Washington State DC Zip Code 20003-4024

Purpose of Disbursement Unlimited Transfer

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 10 / 2013

Amount of Each Disbursement this Period: 10000.00

Transaction ID : D422212

Full Name (Last, First, Middle Initial)  
**B. Democratic Congressional Campaign Comm.**

Mailing Address 430 S Capitol St SE

City Washington State DC Zip Code 20003-4024

Purpose of Disbursement Unlimited Transfer

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 05 / 10 / 2013

Amount of Each Disbursement this Period: 10000.00

Transaction ID : D421498

Full Name (Last, First, Middle Initial)  
**c. Democratic Congressional Campaign Comm.**

Mailing Address 430 S Capitol St SE

City Washington State DC Zip Code 20003-4024

Purpose of Disbursement Unlimited Transfer

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 04 / 26 / 2013

Amount of Each Disbursement this Period: 10000.00

Transaction ID : D420701

**SUBTOTAL** of Disbursements This Page (optional) ..... 30000.00

**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 93 OF 93	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Blumenauer for Congress**

Full Name (Last, First, Middle Initial) <b>A. Democratic Party Of Multnomah County</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 18 / 2013</b>
Mailing Address 232 NE 9th Ave.		Amount of Each Disbursement this Period <b>500.00</b>
City Portland	State OR	
Zip Code 97232	Purpose of Disbursement Contribution	<b>Transaction ID : D420342</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>30500.00</b>