

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

ART ROBINSON FOR CONGRESS

ADDRESS (number and street)

2251 DICK GEORGE RD



Check if different than previously reported. (ACC)

CAVE JUNCTION

OR

97523

2. FEC IDENTIFICATION NUMBER ▼

C

C00481341

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

OR

04

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y
11 / 04 / 2014

in the State of

OR

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



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y
10 / 01 / 2014

through

M M / D D / Y Y Y Y
10 / 15 / 2014

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

Type or Print Name of Treasurer Noah Robinson

Signature of Treasurer

Noah Robinson

[Electronically Filed]

Date

M M / D D / Y Y Y Y
10 / 23 / 2014

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

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

SUMMARY PAGE

of Receipts and Disbursements

Write or Type Committee Name

ART ROBINSON FOR CONGRESS

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	1	4

	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))....	68143.00	542648.78
(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))	68143.00	542648.78
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	72622.21	498177.01
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	72622.21	498177.01
8. Cash on Hand at Close of Reporting Period (from Line 27).....	80576.10	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	42816.21	

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)

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Write or Type Committee Name

ART ROBINSON FOR CONGRESS

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	1	4

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).....**

43672.00

331153.82

(ii) Unitemized.....

24471.00

207692.96

(iii) TOTAL of contributions from individuals ▶

68143.00

538846.78

(b) Political Party Committees.....

0.00

0.00

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

0.00

300.00

(d) The Candidate.....

0.00

3502.00

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

68143.00

542648.78

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

0.00

23443.46

(b) All Other Loans.....

0.00

0.00

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

0.00

23443.46

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

0.00

0.00

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

0.00

0.00

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

68143.00

566092.24

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	72622.21	498177.01
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	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	72622.21	498177.01

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	85055.31
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	68143.00
25. SUBTOTAL (add Line 23 and Line 24).....	153198.31
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	72622.21
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	80576.10

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

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

FOR LINE NUMBER:

PAGE 5 OF 67

(check only one)

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

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)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Nancy Abernathy

Mailing Address 8541 Larkdale Rd.

City

San Gabriel

State

CA

Zip Code

91775

FEC ID number of contributing
federal political committee.

C

Name of Employer
Abernathy InsuranceOccupation
Business Owner

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2014

Transaction ID : SA11AI.41284

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

Mary Adams

Mailing Address 1011 S. Butte Crest St.

City

Payson

State

AZ

Zip Code

85541

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2014

Transaction ID : SA11AI.41424

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Adrian Arp

Mailing Address PO Box 703

City

Filer

State

ID

Zip Code

83328

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self EmployedOccupation
Res. & Modeling

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2014

Transaction ID : SA11AI.41529

Amount of Each Receipt this Period

300.00

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

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

450.00

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

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

FOR LINE NUMBER:

PAGE 6 OF 67

(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

William Baker

A.

Mailing Address 29281 County Rd. 6

City

Elkhart

State

IN

Zip Code

46514

FEC ID number of contributing
federal political committee.

C

Name of Employer

Quest Inc

Occupation

Truck Driver

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		14		2014

Transaction ID : SA11AI.41466

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Betty Bassett

B.

Mailing Address 56673 Pleasant Hill Dr

City

Coquille

State

OR

Zip Code

97423

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1025.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		14		2014

Transaction ID : SA11AI.41473

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

David Baxter

C.

Mailing Address PO Box 145

City

Big Pine

State

CA

Zip Code

93513

FEC ID number of contributing
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		14		2014

Transaction ID : SA11AI.41511

Amount of Each Receipt this Period

200.00

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

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

400.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Luther Blair

A.

Mailing Address 5225 Kelsey Ln

City

Clarkston

State

MI

Zip Code

48348

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		11		2014

Transaction ID : SA11AI.41135

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

John Breeden

B.

Mailing Address 4072 Normandy Way

City

Eugene

State

OR

Zip Code

97405

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		14		2014

Transaction ID : SA11AI.41467

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Gene Bruce

C.

Mailing Address 847 Parrott Dr.

City

San Mateo

State

CA

Zip Code

94402

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Ortho Surgeon

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		07		2014

Transaction ID : SA11AI.41346

Amount of Each Receipt this Period

100.00

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

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

235.00

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

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

FOR LINE NUMBER:

PAGE 8 OF 67

(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Gene Bruce

Mailing Address 847 Parrott Dr.

City

San Mateo

State

CA

Zip Code

94402

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Ortho Surgeon

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2014

Transaction ID : SA11AI.41439

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Glen Brunston

Mailing Address 26929 Bellfountain Rd

City

Monroe

State

OR

Zip Code

97456

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sara A. Austin DMD PC

Occupation

Office Manager

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2014

Transaction ID : SA11AI.41496

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

John D. Bryan

Mailing Address P.O. Box 1929

City

Lake Oswego

State

OR

Zip Code

97035

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2014

Transaction ID : SA11AI.41564

Amount of Each Receipt this Period

2600.00

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

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

2900.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Martha Bryan

A.

Mailing Address 15262 Boones Way

City

Lake Oswego

State

OR

Zip Code

97035

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
Information Requested

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2014

Transaction ID : SA11AI.41566

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

John Caddock

B.

Mailing Address 756 Darley Dr

City

Roseburg

State

OR

Zip Code

97471

FEC ID number of contributing
federal political committee.

C

Name of Employer
Caddock Electronics IncOccupation
VP

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2014

Transaction ID : SA11AI.41557

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

Leigh Caddock

C.

Mailing Address 756 Darley Dr

City

Roseburg

State

OR

Zip Code

97471

FEC ID number of contributing
federal political committee.

C

Name of Employer
NoneOccupation
Homemaker

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2014

Transaction ID : SA11AI.41558

Amount of Each Receipt this Period

1500.00

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

5600.00

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

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

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

FOR LINE NUMBER:

PAGE 10 OF 67

(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Barbara Cargill

Mailing Address 1056 Koko Uka Pl

City

Honolulu

State

HI

Zip Code

96825

FEC ID number of contributing
federal political committee.

C

Name of Employer
Western EngineeringOccupation
Accountant

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		15		2014

Transaction ID : SA11AI.41545

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Curt Clifton

Mailing Address 3596 S. Elkhart St.

City

Aurora

State

CO

Zip Code

80014

FEC ID number of contributing
federal political committee.

C

Name of Employer
RaytheonOccupation
Engineer-Retired

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		09		2014

Transaction ID : SA11AI.41379

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

steve coats

Mailing Address PO Box 85

City

Rincon

State

PR

Zip Code

00677

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		15		2014

Transaction ID : SA11AI.41556

Amount of Each Receipt this Period

1000.00

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

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

1600.00

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

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

FOR LINE NUMBER:

PAGE 11 OF 67

(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Craig Cochran

Mailing Address 7563 Yaquina Bay Rd

City

Newport

State

OR

Zip Code

97365

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
Information Requested

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		08		2014

Transaction ID : SA11AI.41355

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Kitty Cooley

Mailing Address 1663 Cavitt Creek Road

City

Glide

State

OR

Zip Code

97443

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mercy Medical CenterOccupation
Registered Nurse

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		14		2014

Transaction ID : SA11AI.41287

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. David Corbin

Mailing Address 2981 West White Oak Trail

City

Highlands Ranch

State

CO

Zip Code

80129

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		06		2014

Transaction ID : SA11AI.41167

Amount of Each Receipt this Period

50.00

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

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

200.00

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

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

FOR LINE NUMBER:

PAGE 12 OF 67

(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Arnold Cross

Mailing Address 294 Wren Ridge Dr

City

Eagle Point

State

OR

Zip Code

97524

FEC ID number of contributing
federal political committee.

C

Name of Employer

Croman Corp.

Occupation

Logger

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2014

Transaction ID : SA11AI.41531

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Ames Curtright

Mailing Address 1891 16th St SE

City

Salem

State

OR

Zip Code

97302

FEC ID number of contributing
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2014

Transaction ID : SA11AI.41548

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Jeffrey Davey

Mailing Address 2828 Azalea Dr

City

Grants Pass

State

OR

Zip Code

97526

FEC ID number of contributing
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2014

Transaction ID : SA11AI.41535

Amount of Each Receipt this Period

500.00

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

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

1800.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 13 OF 67

(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Clyde Diller

Mailing Address 438 Arvilla Ct

City

Sutherlin

State

OR

Zip Code

97479

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2014

Transaction ID : SA11AI.41144

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

Michael J. Dunn

Mailing Address 3933 S. 326th Pl.

City

Federal Way

State

WA

Zip Code

98001

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Boeing Company

Occupation

Engineer

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2014

Transaction ID : SA11AI.41251

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

A Easton

Mailing Address 785 Bowhill Rd

City

Burlingame

State

CA

Zip Code

94010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2014

Transaction ID : SA11AI.41563

Amount of Each Receipt this Period

2000.00

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

2090.00

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

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

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

FOR LINE NUMBER:

PAGE 14 OF 67

(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Alan Eberlein

Mailing Address 9685 Greenbriar Dr

City

Klamath Falls

State

OR

Zip Code

97603

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2014

Transaction ID : SA11AI.41358

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Theodore P. Egan

Mailing Address 87932 Longwood Ln.

City

Veneta

State

OR

Zip Code

97487

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

670.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2014

Transaction ID : SA11AI.41171

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Mary Egger

Mailing Address 756 W Vista Hermosa Dr

City

Green Valley

State

AZ

Zip Code

85614

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired Farmer

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		07		2014

Transaction ID : SA11AI.41494

Amount of Each Receipt this Period

200.00

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

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

350.00

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

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

FOR LINE NUMBER:

PAGE 15 OF 67

(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Terry Endress

Mailing Address 1821 Eagle Trace Dr

City

Greenwood

State

IN

Zip Code

46143

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lilly

Occupation

Engineer

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		14		2014

Transaction ID : SA11AI.41460

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Diana Evans

Mailing Address 1910 Madrona Ave S

City

Salem

State

OR

Zip Code

97302

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		13		2014

Transaction ID : SA11AI.41507

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

William O. Felsman

Mailing Address 4406 Brookford Ave.

City

Woodland Hills

State

CA

Zip Code

91364

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		14		2014

Transaction ID : SA11AI.41471

Amount of Each Receipt this Period

100.00

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

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

400.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 16 OF 67

(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Craig Ferry

Mailing Address 153 Patton Bar Rd

City

Cave Junction

State

OR

Zip Code

97523

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Carpenter

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		14		2014

Transaction ID : SA11AI.41515

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

Carl Gausewitz

Mailing Address 2483 Westbrook SE

City

Magnolia

State

OH

Zip Code

44643

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Business Manager

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		10		2014

Transaction ID : SA11AI.41492

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

James Gibbons

Mailing Address PO Box 2512

City

Eugene

State

OR

Zip Code

97402

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ventek, Inc.Occupation
Software Engineer

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		14		2014

Transaction ID : SA11AI.41516

Amount of Each Receipt this Period

200.00

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

550.00

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

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

FOR LINE NUMBER:

PAGE 17 OF 67

(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Nancy Gilkeson

Mailing Address PO Box 668

City

Winchester

State

OR

Zip Code

97495

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

RN

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		12		2014

Transaction ID : SA11AI.41431

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

K. Gilligan

Mailing Address P. O. Box 210577

City

San Francisco

State

CA

Zip Code

94121

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Tax Group

Occupation

Accountant

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		14		2014

Transaction ID : SA11AI.41532

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

Howard Gorsuch

Mailing Address 1059 Middle Basin Rd.

City

Colville

State

WA

Zip Code

99114

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

USFS Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		07		2014

Transaction ID : SA11AI.41351

Amount of Each Receipt this Period

100.00

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

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

600.00

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

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

FOR LINE NUMBER:

PAGE 18 OF 67

(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Robert Gresham

A.

Mailing Address 44509 McKenzie Hwy

City

Leaburg

State

OR

Zip Code

97489

FEC ID number of contributing
federal political committee.

C

Name of Employer
CASCADE AUTOMATION, INC.Occupation
OWNER

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		14		2014

Transaction ID : SA11AI.41457

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Bob Gross

B.

Mailing Address 1069 Derringer Dr

City

Las Vegas

State

NV

Zip Code

89119

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		12		2014

Transaction ID : SA11AI.41430

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

John Gula

C.

Mailing Address 300 Smokey Rock Ln.

City

Buda

State

TX

Zip Code

78610

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		13		2014

Transaction ID : SA11AI.41275

Amount of Each Receipt this Period

50.00

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

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

250.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

John Hammer

A.

Mailing Address P.O. Box 2266

City

Eugene

State

OR

Zip Code

97402

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Business

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		09		2014

Transaction ID : SA11AI.41383

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Richard A. Hanson

B.

Mailing Address 3571 North Via San Juanito

City

Tucson

State

AZ

Zip Code

85749

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		14		2014

Transaction ID : SA11AI.41475

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

William Happer

C.

Mailing Address 559 Riverside Dr

City

Princeton

State

NJ

Zip Code

08540

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
Information Requested

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		10		2014

Transaction ID : SA11AI.41549

Amount of Each Receipt this Period

1000.00

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

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

1200.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Larry Hayes

Mailing Address 305 Shootout Lane

City

Princeton

State

LA

Zip Code

71067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hayes Technical SystemsOccupation
Engineer

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2014

Transaction ID : SA11AI.41522

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Kevin Horstman

Mailing Address 620 E. Rimrock Place

City

Tucson

State

AZ

Zip Code

85704

FEC ID number of contributing
federal political committee.

C

Name of Employer
SRK ConsultingOccupation
Geologist

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2014

Transaction ID : SA11AI.41385

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Russell Hurst

Mailing Address 789 50th Avenue

City

Sweet Home

State

OR

Zip Code

97386

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2014

Transaction ID : SA11AI.41446

Amount of Each Receipt this Period

100.00

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

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

450.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Donald D. Intermill

Mailing Address 545 Sweet Gum Ln.

City

Eugene

State

OR

Zip Code

97401

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2014

Transaction ID : SA11AI.41276

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Madelyn Jackson

Mailing Address 94912 Hwy 42 S

City

Coquille

State

OR

Zip Code

97423

FEC ID number of contributing
federal political committee.

C

Name of Employer

Figaro's

Occupation

Restaurant Owner

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2014

Transaction ID : SA11AI.41543

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Jim Johnson

Mailing Address P.O. Box 3053

City

Chandler

State

AZ

Zip Code

85244

FEC ID number of contributing
federal political committee.

C

Name of Employer

Chlor Rid

Occupation

Marketing

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2014

Transaction ID : SA11AI.41538

Amount of Each Receipt this Period

500.00

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

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

1050.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Raymond Johnson

Mailing Address 495 South Taffe St.

City

Sunnyvale

State

CA

Zip Code

94086

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
Information Requested

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2014

Transaction ID : SA11AI.41354

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Myra Kendall

Mailing Address 1211 Tyler St.

City

Glendale

State

CA

Zip Code

91205

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Teacher

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2014

Transaction ID : SA11AI.41555

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Jerry Kershner

Mailing Address 34316 Deerwood Dr

City

Eugene

State

OR

Zip Code

97405

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
USMC - Retired

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2014

Transaction ID : SA11AI.41374

Amount of Each Receipt this Period

100.00

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

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

1200.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Ted Kettler

Mailing Address PO Box 403

City

Veneta

State

OR

Zip Code

97487

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
Information Requested

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		13		2014

Transaction ID : SA11AI.41552

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

DeeAnne Keyston Howe

Mailing Address 10765 NE Canyons Ranch Dr

City

Terrebonne

State

OR

Zip Code

97760

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		13		2014

Transaction ID : SA11AI.41541

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Z. Khatchadourian

Mailing Address 3880 Somerset Dr.

City

Collegeville

State

PA

Zip Code

19426

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		06		2014

Transaction ID : SA11AI.41341

Amount of Each Receipt this Period

100.00

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

1600.00

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

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Jon Kintner

Mailing Address 94303 Sether Street Ln

City

North Bend

State

OR

Zip Code

97459

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bay Eye Clinic

Occupation

Physician

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2014

Transaction ID : SA11AI.41497

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

Dianne Kirby

Mailing Address 857 Marcy Loop Rd

City

Grants Pass

State

OR

Zip Code

97527

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2014

Transaction ID : SA11AI.41517

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Robert Kroeze

Mailing Address 203 Carthage Ave

City

Eugene

State

OR

Zip Code

97404

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		07		2014

Transaction ID : SA11AI.41181

Amount of Each Receipt this Period

50.00

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

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

500.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Robert Kroeze

Mailing Address 203 Carthage Ave

City

Eugene

State

OR

Zip Code

97404

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2014

Transaction ID : SA11AI.41274

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

Robert Kroeze

Mailing Address 203 Carthage Ave

City

Eugene

State

OR

Zip Code

97404

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2014

Transaction ID : SA11AI.41542

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Anne Larsen

Mailing Address 180 Spur Dr

City

Roseburg

State

OR

Zip Code

97471

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2014

Transaction ID : SA11AI.41196

Amount of Each Receipt this Period

50.00

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

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

600.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Merlin Lindemann

Mailing Address 2421 Shun Pike

City

Nicholasville

State

KY

Zip Code

40356

FEC ID number of contributing
federal political committee.

C

Name of Employer
University of KentuckyOccupation
Professor

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2014

Transaction ID : SA11AI.41544

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Peter Llewellyn

Mailing Address 6319 Craigway

City

Spring

State

TX

Zip Code

77389

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2014

Transaction ID : SA11AI.40952

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

Peter Llewellyn

Mailing Address 6319 Craigway

City

Spring

State

TX

Zip Code

77389

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

510.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2014

Transaction ID : SA11AI.41508

Amount of Each Receipt this Period

200.00

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

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

725.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Peter Llewellyn

Mailing Address 6319 Craigway

City
Spring

State
TX

Zip Code
77389

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		14		2014

Transaction ID : SA11AI.41477

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Jeff Lozar

Mailing Address P.O. Box 11706

City
Eugene

State
OR

Zip Code
97440

FEC ID number of contributing
federal political committee.

C

Name of Employer
Livewire Electric, Inc.

Occupation
Electrician/Business Owner

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		13		2014

Transaction ID : SA11AI.41539

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Laurie Lyford

Mailing Address 9529 Lake Washington Blvd NE

City
Bellevue

State
WA

Zip Code
98004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		14		2014

Transaction ID : SA11AI.41524

Amount of Each Receipt this Period

250.00

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

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

850.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Robert Mann

Mailing Address 4520 Del Rio Rd

City

Roseburg

State

OR

Zip Code

97471

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2014

Transaction ID : SA11AI.41318

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

Albert Masetti

Mailing Address 508 Beebe Rd.

City

Harrington

State

DE

Zip Code

19952

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

3550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2014

Transaction ID : SA11AI.41495

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

Albert Masetti

Mailing Address 508 Beebe Rd.

City

Harrington

State

DE

Zip Code

19952

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

3750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2014

Transaction ID : SA11AI.41506

Amount of Each Receipt this Period

200.00

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

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

475.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Carol McKinney

Mailing Address 2780 La Darrah St

City

Eugene

State

OR

Zip Code

97404

FEC ID number of contributing federal political committee.

C

Name of Employer
SelfOccupation
Homemaker

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		15		2014

Transaction ID : SA11AI.41484

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Mary H McLemore

Mailing Address 122 Laurelwood Dr

City

Pike Road

State

AL

Zip Code

36064

FEC ID number of contributing federal political committee.

C

Name of Employer
RetiredOccupation
pot-stirrer

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		09		2014

Transaction ID : SA11AI.41520

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Richard Miller

Mailing Address 3671 Woodward Place

City

Jackson

State

MS

Zip Code

39216

FEC ID number of contributing federal political committee.

C

Name of Employer
Information RequestedOccupation
Information Requested

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		14		2014

Transaction ID : SA11AI.41510

Amount of Each Receipt this Period

200.00

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

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

550.00

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

Use separate schedule(s)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Richard A Myers

Mailing Address PO Box 2045

City

Coolidge

State

AZ

Zip Code

85128

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2014

Transaction ID : SA11AI.41530

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

Ruth Naser

Mailing Address 111 Desert Aire Place South

City

Mattawa

State

WA

Zip Code

99349

FEC ID number of contributing
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2014

Transaction ID : SA11AI.41533

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Myron Neth

Mailing Address 4744 Becker Cir SE

City

Albany

State

OR

Zip Code

97322

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2014

Transaction ID : SA11AI.41469

Amount of Each Receipt this Period

100.00

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

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

900.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Phyllis Orient

Mailing Address 5171 East Peach St

City

Tucson

State

AZ

Zip Code

85712

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2014

Transaction ID : SA11AI.41521

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Richard C Peterson

Mailing Address 329 E. Arbor Circle W.

City

Oak Creek

State

WI

Zip Code

53154

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2014

Transaction ID : SA11AI.41490

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Nancy J Pittman

Mailing Address 1910 NW Delridge Ave

City

Roseburg

State

OR

Zip Code

97471

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

485.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2014

Transaction ID : SA11AI.41476

Amount of Each Receipt this Period

100.00

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

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

450.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Marilyn Plants

Mailing Address 364 Oak Leaf Dr

City

Eugene

State

OR

Zip Code

97404

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Homemaker-Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		07		2014

Transaction ID : SA11AI.41350

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Bonne W. Posma

Mailing Address 13851 Brittain Oaks Dr.

City

Fort Myers

State

FL

Zip Code

33905

FEC ID number of contributing
federal political committee.

C

Name of Employer

Saminco, Inc.

Occupation

Engineer

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

4600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2014

Transaction ID : SA11AI.41560

Amount of Each Receipt this Period

1600.00

Full Name (Last, First, Middle Initial)

Steven Potter

Mailing Address 17616 Dixonville Rd

City

Roseburg

State

OR

Zip Code

97470

FEC ID number of contributing
federal political committee.

C

Name of Employer

C & S Fire-Safe Services LLC

Occupation

Manager

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2014

Transaction ID : SA11AI.41553

Amount of Each Receipt this Period

1000.00

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

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

2700.00

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

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Randy Randol

Mailing Address 3 Franklin Street

City

Alexandria

State

VA

Zip Code

22314

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Consultant

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M / D D / Y Y Y Y
10 12 2014

Transaction ID : SA11AI.41432

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Ellen Randolph

Mailing Address 764 CR 414

City

Boaz

State

AL

Zip Code

35957

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Housewife

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1200.00

Date of Receipt

M M / D D / Y Y Y Y
10 10 2014

Transaction ID : SA11AI.41550

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. John Richardson

Mailing Address 25195 Jake St

City

Veneta

State

OR

Zip Code

97487

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M / D D / Y Y Y Y
10 09 2014

Transaction ID : SA11AI.41380

Amount of Each Receipt this Period

100.00

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

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

1200.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Kim Richardson

Mailing Address 2063 Ponderosa Ct.

City

Bellingham

State

WA

Zip Code

98229

FEC ID number of contributing
federal political committee.

C

Name of Employer
USPSOccupation
Letter Carrier

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2014

Transaction ID : SA11AI.41509

Amount of Each Receipt this Period

200.00

A.

Full Name (Last, First, Middle Initial)

Dr. ART ROBINSON

Mailing Address 2251 DICK GEORGE ROAD

City

CAVE JUNCTION

State

OR

Zip Code

97523

FEC ID number of contributing
federal political committee.

C H0OR04073

Name of Employer
Self-EmployedOccupation
Chemist

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

40847.46

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2014

Transaction ID : SA11AI.40804

Amount of Each Receipt this Period

75.00

In-kind - Office

B.

Full Name (Last, First, Middle Initial)

Dr. ART ROBINSON

Mailing Address 2251 DICK GEORGE ROAD

City

CAVE JUNCTION

State

OR

Zip Code

97523

FEC ID number of contributing
federal political committee.

C H0OR04073

Name of Employer
Self-EmployedOccupation
Chemist

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

42047.46

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2014

Transaction ID : SA11AI.40806

Amount of Each Receipt this Period

1200.00

In-kind - Mileage

C.

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

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

1475.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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PAGE 35 OF 67

(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Dr. ART ROBINSON

Mailing Address 2251 DICK GEORGE ROAD

City

CAVE JUNCTION

State

OR

Zip Code

97523

FEC ID number of contributing
federal political committee.**C** H0OR04073

Name of Employer

Self-Employed

Occupation

Chemist

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

42147.46

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2014

Transaction ID : SA11AI.40808

Amount of Each Receipt this Period

100.00

In-kind - Equipment

Full Name (Last, First, Middle Initial)

Dr. ART ROBINSON

Mailing Address 2251 DICK GEORGE ROAD

City

CAVE JUNCTION

State

OR

Zip Code

97523

FEC ID number of contributing
federal political committee.**C** H0OR04073

Name of Employer

Self-Employed

Occupation

Chemist

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

42152.46

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2014

Transaction ID : SA11AI.40810

Amount of Each Receipt this Period

5.00

In-kind - Telephone Service

Full Name (Last, First, Middle Initial)

Dr. ART ROBINSON

Mailing Address 2251 DICK GEORGE ROAD

City

CAVE JUNCTION

State

OR

Zip Code

97523

FEC ID number of contributing
federal political committee.**C** H0OR04073

Name of Employer

Self-Employed

Occupation

Chemist

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

42154.46

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2014

Transaction ID : SA11AI.40812

Amount of Each Receipt this Period

2.00

In-kind - Website

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

107.00

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

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Dr. ART ROBINSON

Mailing Address 2251 DICK GEORGE ROAD

City

CAVE JUNCTION

State

OR

Zip Code

97523

FEC ID number of contributing
federal political committee.**C** H0OR04073

Name of Employer

Self-Employed

Occupation

Chemist

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

42159.46

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2014

Transaction ID : SA11AI.40814

Amount of Each Receipt this Period

5.00

In-kind - Telephone Service

Full Name (Last, First, Middle Initial)

Dr. ART ROBINSON

Mailing Address 2251 DICK GEORGE ROAD

City

CAVE JUNCTION

State

OR

Zip Code

97523

FEC ID number of contributing
federal political committee.**C** H0OR04073

Name of Employer

Self-Employed

Occupation

Chemist

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

42164.46

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2014

Transaction ID : SA11AI.40816

Amount of Each Receipt this Period

5.00

In-kind - Utilities

Full Name (Last, First, Middle Initial)

Charles T. Rombough

Mailing Address 950 Sugarloaf Rd.

City

Manitou Spring

State

CO

Zip Code

80829

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

Name of Employer

CRT Technical Services

Occupation

Owner

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2014

Transaction ID : SA11AI.41356

Amount of Each Receipt this Period

100.00

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

110.00

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

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

Use separate schedule(s)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Donna L Rook

A.

Mailing Address 1432 W Altgeld

City

Chicago

State

IL

Zip Code

60614

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Consultant

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2014

Transaction ID : SA11AI.41525

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Robert Rosene

B.

Mailing Address 2550 38th Ave. N. E., Apt.211

City

Minneapolis

State

MN

Zip Code

55421

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2014

Transaction ID : SA11AI.41359

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Beverly Rosollini

C.

Mailing Address 311 Red Mountain Dr

City

Grants Pass

State

OR

Zip Code

97526

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2014

Transaction ID : SA11AI.41414

Amount of Each Receipt this Period

100.00

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

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

450.00

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

Use separate schedule(s)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Don Satterthwaite

Mailing Address RR 2 Box 138D

City

Brownstown

State

IL

Zip Code

62418

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

U.S. Army Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		08		2014

Transaction ID : SA11AI.41357

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Martin Walt Savinsky

Mailing Address 16407 SE 44th Pl.

City

Issaquah

State

WA

Zip Code

98027

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Airline Pilot

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		14		2014

Transaction ID : SA11AI.41296

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

Christopher Schiess

Mailing Address 27846 Green Oaks Dr

City

Eugene

State

OR

Zip Code

97402

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

590.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		09		2014

Transaction ID : SA11AI.41204

Amount of Each Receipt this Period

50.00

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

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

200.00

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

Use separate schedule(s)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Janet Schussman

A.

Mailing Address 49617 High Prairie Loop

City

Oakridge

State

OR

Zip Code

97463

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired Veterinarian

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		07		2014

Transaction ID : SA11AI.41534

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Donald Seablom

B.

Mailing Address 78842 Sears Rd

City

Cottage Grove

State

OR

Zip Code

97424

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Contractor

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2014

Transaction ID : SA11AI.41491

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Mary C. Sears

C.

Mailing Address PO Box 2112

City

Cave Junction

State

OR

Zip Code

97523

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2014

Transaction ID : SA11AI.41523

Amount of Each Receipt this Period

250.00

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

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

850.00

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

Use separate schedule(s)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Richard Siler

A.

Mailing Address 233 Rogue River Hwy Pmb 376

City

Grants Pass

State

OR

Zip Code

97527

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Contractor

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2014

Transaction ID : SA11AI.41290

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

Jeffrey S Skinner

B.

Mailing Address PO BOX 7007

City

Northridge

State

CA

Zip Code

91327

FEC ID number of contributing
federal political committee.

C

Name of Employer
PRISM MANAGEMENT COMPANYOccupation
ACTUARY

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		07		2014

Transaction ID : SA11AI.41518

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Elaine Smith

C.

Mailing Address 99590 N. Bank Chetco

City

Brookings

State

OR

Zip Code

97415

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Homemaker

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2014

Transaction ID : SA11AI.41429

Amount of Each Receipt this Period

100.00

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

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

400.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

James R. Stevens

Mailing Address 26 Brinker Rd.

City

Barrington

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Arbor Research & Trading, Inc.

Occupation

CEO

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2014

Transaction ID : SA11AI.41554

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Don B. Storum

Mailing Address 20 N. Carriage Dr.

City

Saint Joseph

State

MO

Zip Code

64506

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Retired Environmental Engineer

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2014

Transaction ID : SA11AI.41310

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

Darrell E Stubblefield

Mailing Address 38385 STATE HWY 38

City

Scottsburg

State

OR

Zip Code

97473

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		07		2014

Transaction ID : SA11AI.41180

Amount of Each Receipt this Period

50.00

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

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

1110.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Darrell E Stubblefield

Mailing Address 38385 STATE HWY 38

City

Scottsburg

State

OR

Zip Code

97473

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2014

Transaction ID : SA11AI.41448

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Richard Sungaila

Mailing Address 1827 Port Stanhope Pl

City

Newport Beach

State

CA

Zip Code

92660

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2014

Transaction ID : SA11AI.41260

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Rod Taylor

Mailing Address PO Box 2127

City

Bandon

State

OR

Zip Code

97411

FEC ID number of contributing
federal political committee.

C

Name of Employer

US Survey Supply

Occupation

Precision Measurement Sales

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2014

Transaction ID : SA11AI.41526

Amount of Each Receipt this Period

250.00

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

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

400.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

David Tilbury

Mailing Address 94425 Gun Club Rd

City

Gold Beach

State

OR

Zip Code

97444

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Landlord

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2014

Transaction ID : SA11AI.40945

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

John H. Tomkins

Mailing Address PO Box 1140

City

Lucerne

State

CA

Zip Code

95458

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Tax Accountant

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2014

Transaction ID : SA11AI.41536

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Eric Tuch

Mailing Address 11608 S Ki Rd.

City

Phoenix

State

AZ

Zip Code

85044

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Graphic Design

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2014

Transaction ID : SA11AI.40926

Amount of Each Receipt this Period

20.00

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

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

545.00

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 67

(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

David Tyson

Mailing Address PO Box 84

City
RiddleState
ORZip Code
97469FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

485.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		09		2014

Transaction ID : SA11AI.41212

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

Randy Unthank

Mailing Address 20131 Bahama St.

City
ChatsworthState
CAZip Code
91311FEC ID number of contributing
federal political committee.

C

Name of Employer
Multi-Pak Corp.Occupation
Executive

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		13		2014

Transaction ID : SA11AI.41559

Amount of Each Receipt this Period

1600.00

Full Name (Last, First, Middle Initial)

Jon Basil Utley

Mailing Address 303 K St. NW

City
WashingtonState
DCZip Code
20007FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
Information Requested

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		11		2014

Transaction ID : SA11AI.41537

Amount of Each Receipt this Period

500.00

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

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

2150.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Carles Vallhonrat

Mailing Address 330 Mill Creek Road

City

Haverford

State

PA

Zip Code

19041

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed, Princeton University

Occupation

Architect & Professor, School of Agric

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2014

Transaction ID : SA11AI.41546

Amount of Each Receipt this Period

800.00

Full Name (Last, First, Middle Initial)

B. George Vanleeuwen

Mailing Address 27070 Irish Bend Loop

City

Halsey

State

OR

Zip Code

97348

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self, State of Oregon

Occupation

Farming, Ex Legislator

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2014

Transaction ID : SA11AI.41528

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. George Wagner

Mailing Address 6004 Glenhill Rd.

City

Louisville

State

KY

Zip Code

40222

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2014

Transaction ID : SA11AI.41527

Amount of Each Receipt this Period

300.00

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

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

1400.00

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

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

FOR LINE NUMBER:

PAGE 46 OF 67

(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Elaine Ward

A.

Mailing Address 945 S. Orange Grove Boulevard

Apt. D

City

Pasadena

State

CA

Zip Code

91105

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Waiter

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		15		2014

Transaction ID : SA11AI.41485

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Michael Weyler

B.

Mailing Address 13226 Memory Lane

City

Fairfax

State

VA

Zip Code

22033

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
Information Requested

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		14		2014

Transaction ID : SA11AI.41512

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

Ed Wilk

C.

Mailing Address P. O. Box 911

City

Bloomsburg

State

PA

Zip Code

17815

FEC ID number of contributing
federal political committee.

C

Name of Employer
USPSOccupation
Postal Clerk

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		06		2014

Transaction ID : SA11AI.41561

Amount of Each Receipt this Period

2000.00

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

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

2300.00

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 67

(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Armin Wolff

Mailing Address PO Box 1367

City

Cave Junction

State

OR

Zip Code

97523

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Self Employed

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2014

Transaction ID : SA11AI.41329

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Ed Wright

Mailing Address 127 Woodland Dr.

City

Stafford

State

VA

Zip Code

22556

FEC ID number of contributing
federal political committee.

C

Name of Employer

USMC

Occupation

Engineer

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2014

Transaction ID : SA11AI.41386

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Fred Yates

Mailing Address 29724 Bartels Creek Dr

City

Lebanon

State

OR

Zip Code

97355

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2014

Transaction ID : SA11AI.41324

Amount of Each Receipt this Period

100.00

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

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

300.00

43672.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 48 OF 67

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Amazon.com

Mailing Address 1200 12th Ave. South

City	State	Zip Code
Seattle	WA	98144

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 09 / 2014

Amount of Each Disbursement this Period

424.83

Transaction ID : SB17.40770

B. Bank of America

Mailing Address 735 Southwest 6th St.

City	State	Zip Code
Grants Pass	OR	97526

Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 01 / 2014

Amount of Each Disbursement this Period

97.05

Transaction ID : SB17.40758

C. Burnett Advertising

Mailing Address 19363 Willamette Drive #251

City	State	Zip Code
West Linn	OR	97068

Purpose of Disbursement
Media

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 03 / 2014

Amount of Each Disbursement this Period

19500.00

Transaction ID : SB17.40772

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

20021.88

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 49 OF 67

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Chevron

Mailing Address Multiple Locations

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		06		2014

City	State	Zip Code
Roseburg	OR	97470

Purpose of Disbursement
Fuel

Amount of Each Disbursement this Period

708.02

Transaction ID : SB17.40761

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. Coquille Supply

Mailing Address 10054 Hwy 42

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2014

City	State	Zip Code
Coquille	OR	97423

Purpose of Disbursement
Signage Supplies

Amount of Each Disbursement this Period

239.88

Transaction ID : SB17.40786

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. Mark Cosby

Mailing Address 38415 Dwendling Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		06		2014

City	State	Zip Code
Marcola	OR	97454

Purpose of Disbursement
Sign Installation

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB17.40780

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

2447.90

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 50 OF 67

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Delta Air

Mailing Address P.O. Box 20706

City	State	Zip Code
Atlanta	GA	30320

Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2014

Amount of Each Disbursement this Period

272.20

Transaction ID : SB17.40781

B. ExxonMobile

Mailing Address 5959 Las Colinas Boulevard

City	State	Zip Code
Irving	TX	75039

Purpose of Disbursement
Fuel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2014

Amount of Each Disbursement this Period

398.52

Transaction ID : SB17.40763

C. Facebook

Mailing Address 1 Hacker Way

City	State	Zip Code
Menlo Park	CA	94025

Purpose of Disbursement
Advertising - Internet

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2014

Amount of Each Disbursement this Period

350.05

Transaction ID : SB17.40771

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

1020.77

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 51 OF 67

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Holiday Inn Express

Mailing Address P.O. Box 30321

City	State	Zip Code
Salt Lake City	UT	84130

Purpose of Disbursement
Lodging

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2014

Amount of Each Disbursement this Period

394.00

Transaction ID : SB17.40769

B. IV Building Supply

Mailing Address 434 Caves Hwy

City	State	Zip Code
Cave Junction	OR	97523

Purpose of Disbursement
Supplies for Signs

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		10		2014

Amount of Each Disbursement this Period

1157.08

Transaction ID : SB17.40779

c. Sally Johnson

Mailing Address 3854 Lancaster Dr.

City	State	Zip Code
Eugene	OR	97404

Purpose of Disbursement
Event Coordination

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		08		2014

Amount of Each Disbursement this Period

1550.18

Transaction ID : SB17.40774

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

3101.26

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 52 OF 67

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Jackie Jolling

Mailing Address 2900 Foots Creek Rd.

City	State	Zip Code
Gold Hill	OR	97525

Purpose of Disbursement
Data Management Services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 08 / 2014

Amount of Each Disbursement this Period

7500.00

Transaction ID : SB17.40784

B. Lane Community College

Mailing Address 4000 E 30th Ave

City	State	Zip Code
Eugene	OR	97405

Purpose of Disbursement
Facility Rental

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 02 / 2014

Amount of Each Disbursement this Period

690.00

Transaction ID : SB17.40775

c. Love's Truck Stop

Mailing Address 10601 N Pennsylvania Ave

City	State	Zip Code
Oklahoma City	OK	73120

Purpose of Disbursement
Fuel

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 07 / 2014

Amount of Each Disbursement this Period

257.75

Transaction ID : SB17.40762

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

8447.75

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 53 OF 67

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Motel 6

Mailing Address Various Locations

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2014

City	State	Zip Code
Eugene	OR	97404

Purpose of Disbursement
Lodging

Amount of Each Disbursement this Period

978.29

Transaction ID : SB17.40768

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. Nationbuilder

Mailing Address 448 South Hill St.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		07		2014

City	State	Zip Code
Los Angeles	CA	90013

Purpose of Disbursement
Internet Service

Amount of Each Disbursement this Period

1026.00

Transaction ID : SB17.40783

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

c. Paypal

Mailing Address 2211 North First Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2014

City	State	Zip Code
San Jose	CA	95131

Purpose of Disbursement
Credit Card Processing Fees

Amount of Each Disbursement this Period

754.88

Transaction ID : SB17.40759

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

2759.17

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 54 OF 67

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Pilot

Mailing Address 5508 Lonas Dr

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		08		2014

City	State	Zip Code
Knoxville	TN	37909

Amount of Each Disbursement this Period

145.90

Purpose of Disbursement
FuelCategory/
Type**Transaction ID : SB17.40765**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

B. Prime One Advocates

Mailing Address 7100 SW Hampton, Suite 201

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		03		2014

City	State	Zip Code
Tigard	OR	97223

Amount of Each Disbursement this Period

6900.00

Purpose of Disbursement
Campaign ConsultingCategory/
Type**Transaction ID : SB17.40773**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

c. Rack Space Cloud

Mailing Address 5000 Walzem Rd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2014

City	State	Zip Code
Wincrest	TX	78239

Amount of Each Disbursement this Period

94.04

Purpose of Disbursement
Internet ServiceCategory/
Type**Transaction ID : SB17.40782**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

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

7139.94

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Dr. ART ROBINSON

Mailing Address 2251 DICK GEORGE ROAD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2014

City	State	Zip Code
CAVE JUNCTION	OR	97523

Amount of Each Disbursement this Period

75.00

Purpose of Disbursement
In-kind - OfficeCategory/
Type

Transaction ID : SB17.40805

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
----------------	--	--

State: OR District: 04

Full Name (Last, First, Middle Initial)

B. Dr. ART ROBINSON

Mailing Address 2251 DICK GEORGE ROAD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2014

City	State	Zip Code
CAVE JUNCTION	OR	97523

Amount of Each Disbursement this Period

1200.00

Purpose of Disbursement
In-kind - MileageCategory/
Type

Transaction ID : SB17.40807

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
----------------	--	--

State: OR District: 04

Full Name (Last, First, Middle Initial)

C. Dr. ART ROBINSON

Mailing Address 2251 DICK GEORGE ROAD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2014

City	State	Zip Code
CAVE JUNCTION	OR	97523

Amount of Each Disbursement this Period

100.00

Purpose of Disbursement
In-kind - EquipmentCategory/
Type

Transaction ID : SB17.40809

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
----------------	--	--

State: OR District: 04

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

1375.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Dr. ART ROBINSON

Mailing Address 2251 DICK GEORGE ROAD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2014

City	State	Zip Code
CAVE JUNCTION	OR	97523

Purpose of Disbursement
In-kind - Telephone Service

Amount of Each Disbursement this Period

5.00

Transaction ID : SB17.40811

Candidate Name

Category/
Type

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
----------------	--	--

State: OR District: 04

Full Name (Last, First, Middle Initial)

B. Dr. ART ROBINSON

Mailing Address 2251 DICK GEORGE ROAD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2014

City	State	Zip Code
CAVE JUNCTION	OR	97523

Purpose of Disbursement
In-kind - Website

Amount of Each Disbursement this Period

2.00

Transaction ID : SB17.40813

Candidate Name

Category/
Type

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
----------------	--	--

State: OR District: 04

Full Name (Last, First, Middle Initial)

C. Dr. ART ROBINSON

Mailing Address 2251 DICK GEORGE ROAD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2014

City	State	Zip Code
CAVE JUNCTION	OR	97523

Purpose of Disbursement
In-kind - Telephone Service

Amount of Each Disbursement this Period

5.00

Transaction ID : SB17.40815

Candidate Name

Category/
Type

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
----------------	--	--

State: OR District: 04

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

12.00

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SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Dr. ART ROBINSON

Mailing Address 2251 DICK GEORGE ROAD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2014

City	State	Zip Code
CAVE JUNCTION	OR	97523

Amount of Each Disbursement this Period

1	2	3	4	5	6	7	8	9	0	.	
											5.00

Transaction ID : SB17.40817

Purpose of Disbursement
In-kind - Utilities

Candidate Name

Category/
Type

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
----------------	--	--

State: OR District: 04

Full Name (Last, First, Middle Initial)

B. Rogue Ales Public House

Mailing Address 844 Olive St.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2014

City	State	Zip Code
Eugene	OR	97401

Amount of Each Disbursement this Period

1	2	3	4	5	6	7	8	9	0	.	
											1194.45

Transaction ID : SB17.40802

Purpose of Disbursement
Facility Rental

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
----------------	---	--

State: District:

Full Name (Last, First, Middle Initial)

C. Satori

Mailing Address 1301 5th Ave., Suite 2200

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2014

City	State	Zip Code
Seattle	WA	98101

Amount of Each Disbursement this Period

1	2	3	4	5	6	7	8	9	0	.	
											453.75

Transaction ID : SB17.40788

Purpose of Disbursement
Printing and Mailing

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
----------------	---	--

State: District:

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

1653.20

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SendGrid

Mailing Address 929 Pearl St., Ste 200

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		06		2014

City	State	Zip Code
Boulder, CO 80302	CO	80302

Purpose of Disbursement
Email Service

Amount of Each Disbursement this Period

239.85

Transaction ID : SB17.40789

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. Seven Feathers

Mailing Address 146 Chief Miwaleta Ln

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2014

City	State	Zip Code
Canyonville	OR	97417

Purpose of Disbursement
Fuel

Amount of Each Disbursement this Period

332.59

Transaction ID : SB17.40767

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

c. Shell Oil

Mailing Address PO Box 2463

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2014

City	State	Zip Code
Houston	TX	77252

Purpose of Disbursement
Fuel

Amount of Each Disbursement this Period

198.00

Transaction ID : SB17.40764

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

770.44

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 59 OF 67

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Jenna Stoepler

Mailing Address 17447 Jumper Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2014

City	State	Zip Code
Shafter	CA	93263

Amount of Each Disbursement this Period

1550.00

Purpose of Disbursement
Sign InstallationCategory/
Type**Transaction ID : SB17.40785**

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. The Shamrock Flower

Mailing Address 1520 Coburg Rd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2014

City	State	Zip Code
Eugene	OR	97401

Amount of Each Disbursement this Period

50.00

Purpose of Disbursement
Fundraising SuppliesCategory/
Type**Transaction ID : SB17.40776**

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. Union 76

Mailing Address 345 W. Harvard Ave.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2014

City	State	Zip Code
Roseburg	OR	97470

Amount of Each Disbursement this Period

252.82

Purpose of Disbursement
FuelCategory/
Type**Transaction ID : SB17.40766**

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

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

1852.82

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 60 OF 67

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. United States Postal Service

Mailing Address 33096 Redwood Hwy

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2014

City	State	Zip Code
O'Brien	OR	97534

Amount of Each Disbursement this Period

20861.10

Purpose of Disbursement
PostageCategory/
Type**Transaction ID : SB17.40760**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. Wal-Mart

Mailing Address 702 SW 8th St.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2014

City	State	Zip Code
Bentonville	AR	72716

Amount of Each Disbursement this Period

243.88

Purpose of Disbursement
Signage SuppliesCategory/
Type**Transaction ID : SB17.40778**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

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:

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

21104.98

71707.11

SCHEDULE C (FEC Form 3)
LOANS

PAGE 61 OF 67

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.26130

ART ROBINSON FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

Dr. ART ROBINSON

[PERSONAL FUNDS]

Election: 2012

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

2251 DICK GEORGE ROAD

City

State

ZIP Code

CAVE JUNCTION

OR

97523

Original Amount of Loan

3000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

3000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
04 / 25 / 2012

Date Due

M M / D D / Y Y Y Y

On Demand

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

3000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 62 OF 67

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.35793

ART ROBINSON FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

Dr. ART ROBINSON

[PERSONAL FUNDS]

Election: 2012

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

2251 DICK GEORGE ROAD

City

State

ZIP Code

CAVE JUNCTION

OR

97523

Original Amount of Loan

2000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
11 / 16 / 2012

Date Due

M M / D D / Y Y Y Y
On Demand

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

2000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 63 OF 67

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.35848

ART ROBINSON FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

Dr. ART ROBINSON

[PERSONAL FUNDS]

Election: 2012

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

2251 DICK GEORGE ROAD

City

State

ZIP Code

CAVE JUNCTION

OR

97523

Original Amount of Loan

15043.46

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

15043.46

TERMS

Date Incurred

M M / D D / Y Y Y Y
12 10 / 2012

Date Due

M M / D D / Y Y Y Y

None

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

15043.46

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 64 OF 67

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.35849

ART ROBINSON FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

Dr. ART ROBINSON

[PERSONAL FUNDS]

Election: 2012

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

2251 DICK GEORGE ROAD

City

State

ZIP Code

CAVE JUNCTION

OR

97523

Original Amount of Loan

2000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2000.00

TERMS

Date Incurred

M M / D D / Y Y
12 / 30 / 2012

Date Due

M M / D D / Y Y
None

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

2000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 65 OF 67

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.35940

ART ROBINSON FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

Dr. ART ROBINSON

[PERSONAL FUNDS]

Election: 2012

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

2251 DICK GEORGE ROAD

City

State

ZIP Code

CAVE JUNCTION

OR

97523

Original Amount of Loan

400.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

400.00

TERMS

Date Incurred

M 03 / D 11 / Y 2013

Date Due

M M / D D / Y On Demand

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

400.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 66 OF 67

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.35989

ART ROBINSON FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

Dr. ART ROBINSON

[PERSONAL FUNDS]

Election: 2012

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

2251 DICK GEORGE ROAD

City

State

ZIP Code

CAVE JUNCTION

OR

97523

Original Amount of Loan

4000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

4000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
07 / 30 / 2013

Date Due

M M / D D / Y Y Y Y
On Demand

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

4000.00

TOTALS This Period (last page in this line only)..... ►

26443.46

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 67 OF 67

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Arent Fox

Nature of Debt (Purpose):

Legal and FEC Compliance Services

Mailing Address 1717 K Street NW

City State

Zip Code

Washington

DC

20036

Outstanding Balance Beginning This Period

16372.75

Transaction ID : SD10.34354

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

16372.75

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)

16372.75

2) **TOTALS** This Period (last page this line number only)

16372.75

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)

26443.46

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

42816.21