

PC 10 Statement of Independent Expenditures

rev 01/10

→ Please type or print legibly in black or blue ink; list only one entry per line

General Information

Name of Individual or Organization making the Independent Expenditure (use full name)

Associated General Contractors - Oregon Columbia Chapter

Address, Street/Route

9450 S.W. Commerce Circle, Suite 200

City Wilsonville	State OR	Zip Code 97070	Work Phone Number 503-682-3363
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Date	Name and Address of Payee* <small>*address includes city, or county if no city, and state</small>	Purpose & Support/Oppose Information	A/P	Amount of Expenditure	Paid to A/P
1 03.11.10	Associated General Contractors Wilsonville, OR	VP Statement Supporting May 2010 Measure 69 <input checked="" type="checkbox"/>	<input type="radio"/>	\$ 1,200.00	<input type="radio"/>
2			<input type="radio"/>	\$	<input type="radio"/>
3			<input type="radio"/>	\$	<input type="radio"/>
4			<input type="radio"/>	\$	<input type="radio"/>
5			<input type="radio"/>	\$	<input type="radio"/>
6			<input type="radio"/>	\$	<input type="radio"/>
7			<input type="radio"/>	\$	<input type="radio"/>
8			<input type="radio"/>	\$	<input type="radio"/>
9			<input type="radio"/>	\$	<input type="radio"/>
10			<input type="radio"/>	\$	<input type="radio"/>

I hereby certify the above listed expenditures were made for the candidates or measures specified. By signing this document I acknowledge that I am personally liable for any penalties imposed under ORS Chapter 260 and attest that the information on the form is true and correct.

Michael J. Salguero
Signature of person responsible for filing PC 10

2/9/10
Date Signed

