

**FEC FORM 3**

**REPORT OF RECEIPTS AND DISBURSEMENTS**  
For An Authorized Committee

RECEIVED

2012 JUN 12 AM 11:28

Office Use Only

FEC MAIL CENTER  
12FE4M5

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

**BEBO, DONNA MARIE**

ADDRESS (number and street) 504 CEDAR RIDGE RD

Check if different than previously reported. (ACC)

FLETCHER

OK

73541

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

STATE DISTRICT

C C00509273

3. IS THIS REPORT

X

NEW (N)

OR

AMENDED (A)

OK

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:

X Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on 06 / 26 / 2012

in the State of OK

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

General (30G)

Runoff (30R)

Special (30S)

Election on 06 / 26 / 2012

in the State of OK

5. Covering Period 04 / 01 / 2012 through 06 / 06 / 2012

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 Jason Bebo

Signature of Treasurer Jason Bebo

Date

06 / 11 / 2012

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)

12030822009

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**BEBO, DONNA MARIE**

Report Covering the Period: From: <sup>M</sup>04 / <sup>D</sup>01 / <sup>Y</sup>2012 To: <sup>M</sup>06 / <sup>D</sup>06 / <sup>Y</sup>2012

12030822010

	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)) ....	5093.63	4933.25
(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)) .....	5093.63	4933.25
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	11080.63	4043.22
(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)).....	11080.63	4043.22
8. Cash on Hand at Close of Reporting Period (from Line 27).....	204.62	
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) .....	5101.25	

**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**

FEC Form 3 (Revised 12/2003)

of Receipts

PAGE 3 / 20

Write or Type Committee Name

**BEBO, DONNA MARIE**

Report Covering the Period: From: <sup>M M / D D / Y Y Y Y</sup> 04 01 2012 To: <sup>M M / D D / Y Y Y Y</sup> 06 06 2012

**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).....	1570.00			613.00
(ii) Unitemized.....	3523.63			2397.00
(iii) TOTAL of contributions from individuals ▶	5093.63			3010.00
(b) Political Party Committees.....	0.00			0.00
(c) Other Political Committees (such as PACs).....	0.00			0.00
(d) The Candidate.....	0.00			1923.25
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	5093.63			4933.25

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00			0.00
--	------	--	--	------

13. LOANS:				
(a) Made or Guaranteed by the Candidate.....	5101.25			0.00
(b) All Other Loans.....	0.00			0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	5101.25			0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	0.00			0.00
---	------	--	--	------

15. OTHER RECEIPTS (Dividends, Interest, etc.).....	200.09			0.25
---	--------	--	--	------

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	10394.97			4933.50
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12030822011

**DETAILED SUMMARY PAGE**  
of Disbursements

**II. DISBURSEMENTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	,	,	11080.63	,	,	4043.22
<hr/>						
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	,	,	0.00	,	,	0.00
<hr/>						
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
<hr/>						
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
<hr/>						
21. OTHER DISBURSEMENTS .....	,	,	0.00	,	,	0.00
<hr/>						
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	,	,	11080.63	,	,	4043.22

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	,	,		,	,	890.28
<hr/>						
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	,	,		,	,	10394.97
<hr/>						
25. SUBTOTAL (add Line 23 and Line 24).....	,	,		,	,	11285.25
<hr/>						
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	,	,		,	,	11080.63
<hr/>						
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	,	,		,	,	204.62

12030822012



**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 20  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**BEBO, DONNA MARIE**

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

Mailing Address **7301 E State Hwy 9**

City **Norman** State **OK** Zip Code **73026**

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

Name of Employer **Self-Employed** Occupation **Wine maker**

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
**06 / 03 / 2012**

Transaction ID : **SA11AI.4632**

Amount of Each Receipt this Period  
In-kind - , , .  
**720.00**

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period  
, , .

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period  
, , .

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

, , .  
**720.00**

, , .  
**1570.00**

1203082201A

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

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

FOR LINE NUMBER: PAGE 7 OF 20

(check only one)

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

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NAME OF COMMITTEE (In Full)  
**BEBO, DONNA MARIE**

Full Name (Last, First, Middle Initial) <b>BEBO, DONNA MARIE</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 01 / 2012	
Mailing Address 504 CEDAR RIDGE RD		Transaction ID : SA13A.4616	
City FLETCHER	State OK	Zip Code 73541	Amount of Each Receipt this Period , , 190.40 Personal Loan to Campaign
FEC ID number of contributing federal political committee. <b>C C00509273</b>			
Name of Employer		Occupation	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , 190.40	
Full Name (Last, First, Middle Initial) <b>BEBO, DONNA MARIE</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 11 / 2012	
Mailing Address 504 CEDAR RIDGE RD		Transaction ID : SA13A.4427	
City FLETCHER	State OK	Zip Code 73541	Amount of Each Receipt this Period , , 750.00 Campaign Registration Amount
FEC ID number of contributing federal political committee. <b>C C00509273</b>			
Name of Employer		Occupation	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , 940.40	
Full Name (Last, First, Middle Initial) <b>BEBO, DONNA MARIE</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 16 / 2012	
Mailing Address 504 CEDAR RIDGE RD		Transaction ID : SA13A.4617	
City FLETCHER	State OK	Zip Code 73541	Amount of Each Receipt this Period , , 199.50 Personal Loan to Campaign
FEC ID number of contributing federal political committee. <b>C C00509273</b>			
Name of Employer		Occupation	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , 1139.90	
SUBTOTAL of Receipts This Page (optional).....		, , 1139.90	
TOTAL This Period (last page this line number only).....		, ,	

12030822015

**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 20

(check only one)

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

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NAME OF COMMITTEE (In Full)  
**BEBO, DONNA MARIE**

Full Name (Last, First, Middle Initial) <b>BEBO, DONNA MARIE</b>			Date of Receipt M M / D D / Y Y Y Y 05 15 2012		
Mailing Address <b>504 CEDAR RIDGE RD</b>			Transaction ID : <b>SA13A.4618</b>		
City <b>FLETCHER</b>	State <b>OK</b>	Zip Code <b>73541</b>	Amount of Each Receipt this Period , , 837.49 Personal Loan to Campaign		
FEC ID number of contributing federal political committee. <b>C C00509273</b>			Amount of Each Receipt this Period , , 837.49 Personal Loan to Campaign		
Name of Employer		Occupation	Amount of Each Receipt this Period , , 837.49 Personal Loan to Campaign		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , 1977.39	Amount of Each Receipt this Period , , 837.49 Personal Loan to Campaign		
Full Name (Last, First, Middle Initial) <b>BEBO, DONNA MARIE</b>			Date of Receipt M M / D D / Y Y Y Y 05 31 2012		
Mailing Address <b>504 CEDAR RIDGE RD</b>			Transaction ID : <b>SA13A.4619</b>		
City <b>FLETCHER</b>	State <b>OK</b>	Zip Code <b>73541</b>	Amount of Each Receipt this Period , , 2492.45 Personal Loan to Campaign		
FEC ID number of contributing federal political committee. <b>C C00509273</b>			Amount of Each Receipt this Period , , 2492.45 Personal Loan to Campaign		
Name of Employer		Occupation	Amount of Each Receipt this Period , , 2492.45 Personal Loan to Campaign		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , 4469.84	Amount of Each Receipt this Period , , 2492.45 Personal Loan to Campaign		
Full Name (Last, First, Middle Initial) <b>BEBO, DONNA MARIE</b>			Date of Receipt M M / D D / Y Y Y Y 06 06 2012		
Mailing Address <b>504 CEDAR RIDGE RD</b>			Transaction ID : <b>SA13A.4620</b>		
City <b>FLETCHER</b>	State <b>OK</b>	Zip Code <b>73541</b>	Amount of Each Receipt this Period , , 631.41 Personal Loan to Campaign		
FEC ID number of contributing federal political committee. <b>C C00509273</b>			Amount of Each Receipt this Period , , 631.41 Personal Loan to Campaign		
Name of Employer		Occupation	Amount of Each Receipt this Period , , 631.41 Personal Loan to Campaign		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , 5101.25	Amount of Each Receipt this Period , , 631.41 Personal Loan to Campaign		
<b>SUBTOTAL</b> of Receipts This Page (optional).....			, , 3961.35		
<b>TOTAL</b> This Period (last page this line number only).....			, , 5101.25		

12030822016



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

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

FOR LINE NUMBER:  
(check only one)

<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)  
**BEBO, DONNA MARIE**

Full Name (Last, First, Middle Initial)

**A. C & J Printing**

Date of Disbursement

M M / D D / Y Y Y Y  
04 06 2012

Mailing Address 615 SW B Ave

Amount of Each Disbursement this Period

City Lawton State OK Zip Code 73501

203.00  
Transaction ID : SB17.4538

Purpose of Disbursement  
Printed Campaign Materials

006

Candidate Name  
**BEBO, DONNA MARIE**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify)

State: OK District: 04

**B. C & J Printing**

Date of Disbursement

M M / D D / Y Y Y Y  
04 06 2012

Mailing Address 615 SW B Ave

Amount of Each Disbursement this Period

City Lawton State OK Zip Code 73501

444.60  
Transaction ID : SB17.4540

Purpose of Disbursement  
Printed Campaign Materials

006

Candidate Name  
**BEBO, DONNA MARIE**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify)

State: OK District: 04

**C. C & J Printing**

Date of Disbursement

M M / D D / Y Y Y Y  
05 15 2012

Mailing Address 615 SW B Ave

Amount of Each Disbursement this Period

City Lawton State OK Zip Code 73501

220.00  
Transaction ID : SB17.4576

Purpose of Disbursement  
Printed Campaign materials

006

Candidate Name  
**BEBO, DONNA MARIE**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify)

State: OK District: 04

**SUBTOTAL** of Disbursements This Page (optional)..... 867.60

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

12030822017

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 10 OF 20
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**BEBO, DONNA MARIE**

Full Name (Last, First, Middle Initial) <b>A. C &amp; J Printing</b>			Date of Disbursement M M / D D / Y Y Y Y 05 23 2012		
Mailing Address: 615 SW B Ave			Amount of Each Disbursement this Period 1650.00 Transaction ID : SB17.4587		
City Lawton	State OK	Zip Code 73501			
Purpose of Disbursement Campaign Bumper Stickers		006	Transaction ID : SB17.4587		
Candidate Name <b>BEBO, DONNA MARIE</b>		Category/ Type			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: OK District: 04					

Full Name (Last, First, Middle Initial) <b>B. Hop &amp; Sak</b>			Date of Disbursement M M / D D / Y Y Y Y 05 05 2012		
Mailing Address 14270 HWY 277			Amount of Each Disbursement this Period 73.01 Transaction ID : SB17.4567		
City Fletcher	State OK	Zip Code 73541			
Purpose of Disbursement Fuel Expense		002	Transaction ID : SB17.4567		
Candidate Name <b>BEBO, DONNA MARIE</b>		Category/ Type			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: OK District: 04					

Full Name (Last, First, Middle Initial) <b>c. Hop &amp; Sak</b>			Date of Disbursement M M / D D / Y Y Y Y 05 22 2012		
Mailing Address 14270 HWY 277			Amount of Each Disbursement this Period 77.99 Transaction ID : SB17.4577		
City Fletcher	State OK	Zip Code 73541			
Purpose of Disbursement Fuel Expense		002	Transaction ID : SB17.4577		
Candidate Name <b>BEBO, DONNA MARIE</b>		Category/ Type			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: OK District: 04					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1801.00
<b>TOTAL</b> This Period (last page this line number only).....	

12030822018

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 11 OF 20	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21		

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NAME OF COMMITTEE (In Full)  
**BEBO, DONNA MARIE**

Full Name (Last, First, Middle Initial) <b>A. Hop &amp; Sak</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2012	
Mailing Address 14270 HWY 277		Amount of Each Disbursement this Period  20.00 Transaction ID : SB17.4622	
City Fletcher	State OK		Zip Code 73541
Purpose of Disbursement Fuel Expense	002 Category/ Type		
Candidate Name BEBO, DONNA MARIE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: OK	District: 04		

Full Name (Last, First, Middle Initial) <b>B. Kertis Johnson</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2012	
Mailing Address 1408 NW 15TH ST		Amount of Each Disbursement this Period  300.00 Transaction ID : SB17.4560	
City Lawton	State OK		Zip Code 73505
Purpose of Disbursement Office Space Rental	001 Category/ Type		
Candidate Name BEBO, DONNA MARIE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: OK	District: 04		

Full Name (Last, First, Middle Initial) <b>C. Kertis Johnson</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2012	
Mailing Address 1408 NW 15TH ST		Amount of Each Disbursement this Period  300.00 Transaction ID : SB17.4552	
City Lawton	State OK		Zip Code 73505
Purpose of Disbursement Office Rental Expense	001 Category/ Type		
Candidate Name BEBO, DONNA MARIE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: OK	District: 04		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	620.00
<b>TOTAL</b> This Period (last page this line number only) .....	

12030822019

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 12 OF 20	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21		

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NAME OF COMMITTEE (In Full)  
**BEBO, DONNA MARIE**

12030822020

Full Name (Last, First, Middle Initial) <b>A. Tom Knotts</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2012		
Mailing Address 7301 E State Hwy 9			Amount of Each Disbursement this Period  720.00 Transaction ID : SB17.4639		
City Norman	State OK	Zip Code 73026			
Purpose of Disbursement In-kind -	Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:	Category/ Type			

Full Name (Last, First, Middle Initial) <b>B. L.L. James Co</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2012		
Mailing Address 7156 Melrose Ln			Amount of Each Disbursement this Period  2240.00 Transaction ID : SB17.4586		
City Oklahoma City	State OK	Zip Code 73127			
Purpose of Disbursement Campaign Signs	Candidate Name <b>BEBO, DONNA MARIE</b>				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: OK	District: 04	Category/ Type 006			

Full Name (Last, First, Middle Initial) <b>C. Lawton Floor Covering</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2012		
Mailing Address # 3 SW 11st			Amount of Each Disbursement this Period  600.00 Transaction ID : SB17.4561		
City Lawton	State OK	Zip Code 73501			
Purpose of Disbursement Office set up expenses	Candidate Name <b>BEBO, DONNA MARIE</b>				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: OK	District: 04	Category/ Type 001			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3560.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 20	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**BEBO, DONNA MARIE**

Full Name (Last, First, Middle Initial)

**A. Lowes Home center**

Mailing Address 4402 NW Cache Rd

Date of Disbursement

M M / D D / Y Y Y Y  
05 / 10 / 2012

City lawton State OK Zip Code 73505

Amount of Each Disbursement this Period

245.68

Purpose of Disbursement  
Office Renovation Expenses

001

Transaction ID : SB17.4570

Candidate Name  
**BEBO, DONNA MARIE**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify)

State: OK District: 04

**B. NCED Conference Center**

Mailing Address 2801 E State Hwy 9

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 02 / 2012

City Norman State OK Zip Code 73071

Amount of Each Disbursement this Period

156.03

Purpose of Disbursement  
Hotel Expense

002

Transaction ID : SB17.4623

Candidate Name  
**BEBO, DONNA MARIE**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify)

State: OK District: 04

**C. Office Depot**

Mailing Address 50 NW Sheridan Rd

Date of Disbursement

M M / D D / Y Y Y Y  
05 / 24 / 2012

City Lawton State OK Zip Code 73505

Amount of Each Disbursement this Period

162.92

Purpose of Disbursement  
Office Supplies

001

Transaction ID : SB17.4582

Candidate Name  
**BEBO, DONNA MARIE**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify)

State: OK District: 04

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

564.63

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

12030822021

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 14 OF 20	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21		

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**BEBO, DONNA MARIE**

12030822022

<b>A. Oklahoma Election Board</b> Full Name (Last, First, Middle Initial) Mailing Address 2300 N Lincoln Blvd PO Box 53156 City Oklahoma City State OK Zip Code 73152 Purpose of Disbursement Candidate Registration Fee Candidate Name <b>BEBO, DONNA MARIE</b> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) State: OK District: 04			Date of Disbursement M M / D D / Y Y Y Y 04 11 2012 Amount of Each Disbursement this Period , , 750.00 Transaction ID : <b>SB17.4558</b>
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<b>B. Old Plantation restaurant</b> Full Name (Last, First, Middle Initial) Mailing Address 143 E. Lake Dr City Medicine Park State OK Zip Code 73557 Purpose of Disbursement Campaign Funder Raiser Candidate Name <b>BEBO, DONNA MARIE</b> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) State: OK District: 04			Date of Disbursement M M / D D / Y Y Y Y 04 26 2012 Amount of Each Disbursement this Period , , 913.68 Transaction ID : <b>SB17.4545</b>
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<b>C. Rainbow Shirt &amp; Hat Co</b> Full Name (Last, First, Middle Initial) Mailing Address 1501 Sw I Ave City lawton State OK Zip Code 73501 Purpose of Disbursement Printed T-SHirts Candidate Name <b>BEBO, DONNA MARIE</b> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) State: OK District: 04			Date of Disbursement M M / D D / Y Y Y Y 05 29 2012 Amount of Each Disbursement this Period , , 547.50 Transaction ID : <b>SB17.4590</b>
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<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2211.18
<b>TOTAL</b> This Period (last page this line number only).....	9624.41

**SCHEDULE C (FEC Form 3)**

**LOANS**

NAME OF COMMITTEE (In Full) **BEBO, DONNA MARIE** Transaction ID : **SC/10.4816**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2012  
**BEBO, DONNA MARIE**  Primary  
 Mailing Address  General  
**504 CEDAR RIDGE RD**  Other (specify) ▼

City State ZIP Code  
**FLETCHER OK 73541**

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
190.40	0.00	190.40

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 04 / D 01 / Y 2012	M M / D D / Y 08/15/2012	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: , , .

<b>SUBTOTALS</b> This Period This Page (optional)..... ▶	190.40
<b>TOTALS</b> 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.

12030822023

**SCHEDULE C (FEC Form 3)**

**LOANS**

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

PAGE 16 OF 20

FOR LINE NUMBER: (check only one)  13a  13b

NAME OF COMMITTEE (In Full) **BEBO, DONNA MARIE** Transaction ID : **SC/10.4427**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2012  
**BEBO, DONNA MARIE**  Primary  
 Mailing Address  General  
 504 CEDAR RIDGE RD  Other (specify) ▼

City State ZIP Code  
 FLETCHER OK 73541

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
750.00	0.00	750.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 04 / D 11 / Y 2012	M M / D D / Y 1 Aug 2012	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: , , .

<b>SUBTOTALS</b> This Period This Page (optional)..... ▶	750.00
<b>TOTALS</b> 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.

12030822024



**SCHEDULE C (FEC Form 3)**

**LOANS**

NAME OF COMMITTEE (In Full) **BEBO, DONNA MARIE** Transaction ID : **SC/10.4617**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2012  
**BEBO, DONNA MARIE**  Primary  
 Mailing Address  General  
**504 CEDAR RIDGE RD**  Other (specify) ▼

City State ZIP Code  
**FLETCHER OK 73541**

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
199.50	0.00	199.50

**TERMS** Date Incurred Date Due Interest Rate Secured:  
 M<sup>M</sup> 04 / D<sup>D</sup> 16 / Y<sup>Y</sup> 2012 Y M M / D D / Y<sup>Y</sup> 08/30/2012 Y 0.00 % (apr)  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)..... ▶ , , 199.50  
**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.

12030822025

**SCHEDULE C (FEC Form 3)**

**LOANS**

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

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FOR LINE NUMBER: (check only one)  13a  13b

NAME OF COMMITTEE (In Full) **BEBO, DONNA MARIE** Transaction ID : **SC/10.4618**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2012  
**BEBO, DONNA MARIE**  Primary  
 Mailing Address  General  
 504 CEDAR RIDGE RD  Other (specify) ▼

City State ZIP Code  
**FLETCHER OK 73541**

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
837.49	0.00	837.49

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 05 / D 15 / Y 2012	M M / D D / Y 09/15/2012	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:

<b>SUBTOTALS</b> This Period This Page (optional)..... ▶	837.49
<b>TOTALS</b> 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.

12030822026

**SCHEDULE C (FEC Form 3)**

**LOANS**

NAME OF COMMITTEE (In Full) **BEBO, DONNA MARIE** Transaction ID : **SC/10.4619**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2012  
**BEBO, DONNA MARIE**  Primary  
 Mailing Address  General  
**504 CEDAR RIDGE RD**  Other (specify) ▼

City State ZIP Code  
**FLETCHER OK 73541**

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2492.45	0.00	2492.45

**TERMS** Date Incurred Date Due Interest Rate Secured:  
 M 05 / D 31 / Y 2012 Y M M / D D / Y 09/30/2012 Y 0.00 % (apr)  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: , , .

<b>SUBTOTALS</b> This Period This Page (optional)..... ▶	2492.45
<b>TOTALS</b> This Period (last page in this line only) ..... ▶	,
<b>Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.</b>	

12030822027

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **BEBO, DONNA MARIE** Transaction ID : **SC/10.4620**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2012  
**BEBO, DONNA MARIE**  Primary  
 Mailing Address  General  
 504 CEDAR RIDGE RD  Other (specify) ▼

City State ZIP Code  
 FLETCHER OK 73541

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
631.41	0.00	631.41

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M <sup>06</sup> / D <sup>06</sup> / Y <sup>2012</sup>	M / D / Y <sup>10/15/2012</sup>	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: , , .

<b>SUBTOTALS</b> This Period This Page (optional)..... ▶	631.41
<b>TOTALS</b> This Period (last page in this line only)..... ▶	5101.25

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

12030822028

Federal Election Commission  
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6/11/12

Postmark Illegible

No Postmark

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Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked



PREPARER

(3/2005)

6/12/12

DATE PREPARED

12030822029