

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Oklahoma Leadership Council

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		183067.74
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	320227.45									
(c) Total Receipts (from Line 19)	23776.05	421595.23								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	344003.50	604662.97								
7. Total Disbursements (from Line 31)	152153.88	412813.35								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	191849.62	191849.62								
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)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Oklahoma Leadership Council

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	6704.42	284968.82
(i) Itemized (use Schedule A)	4613.00	27916.94
(ii) Unitemized	11317.42	312885.76
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	7900.00	100900.00
(c) Other Political Committees (such as PACs)	19217.42	413785.76
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	4525.00	4525.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	33.63	2371.47
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	913.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	913.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	23776.05	421595.23
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	23776.05	420682.23

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	24822.34
(ii) Non-Federal Share.....	0.00	44128.52
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	68950.86
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	10.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	10.00
29. Other Disbursements.....	0.00	520.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	152153.88	343332.49
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	152153.88	343332.49
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	152153.88	412813.35
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	152153.88	368684.83

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	19217.42	413785.76
34. Total Contribution Refunds (from Line 28(d))	0.00	10.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	19217.42	413775.76
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	24822.34
37. Offsets to Operating Expenditures (from Line 15, page 3)	4525.00	4525.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	-4525.00	20297.34

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 37
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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)
Oklahoma Leadership Council

A. Full Name (Last, First, Middle Initial)
JERRY BOWSER

Mailing Address 2400 ZION PARK

City State Zip Code
YUKON OK 73099

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

Name of Employer Occupation
RETIREED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 625.00

Date of Receipt
MM / DD / YYYY
09 / 01 / 2008

Transaction ID: SA11AI.13896

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
NICHOLAS R CALIENDO

Mailing Address 2301 ROCKWOOD LANE

City State Zip Code
NORMAN OK 73071

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

Name of Employer Occupation
KHJ ENTERPRISES CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
09 / 07 / 2008

Transaction ID: SA11AI.13902

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
KEVIN CALVEY

Mailing Address 4244 CHERRY HILL LANE

City State Zip Code
OKLAHOMA CITY OK 73120

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

Name of Employer Occupation
SELF - EMPLOYED ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 318.00

Date of Receipt
MM / DD / YYYY
09 / 18 / 2008

Transaction ID: SA11AI.13798

Amount of Each Receipt this Period
18.00

SUBTOTAL of Receipts This Page (optional) ► **343.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 37
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A. Full Name (Last, First, Middle Initial)
KENNETH CROUCH

Mailing Address P.O. BOX 2987

City State Zip Code
EDMOND OK 73083

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
KERR MCGEE EXEC VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 24 / 2008
Transaction ID: SA11AI.13986
Amount of Each Receipt this Period 2500.00

B. Full Name (Last, First, Middle Initial)
MR DAVID DANK

Mailing Address 6705 REED

City State Zip Code
OKLAHOMA CITY OK 73116

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
OKLAHOMA RETAIL MERCHANTS ASSN PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 29 / 2008
Transaction ID: SA11AI.13877
Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
ROBERT ELLIS

Mailing Address 6703 AVONDALE DR

City State Zip Code
OKLAHOMA CITY OK 73116

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
REQUESTED PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt 09 / 11 / 2008
Transaction ID: SA11AI.13780
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) 3250.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 37
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.

Full Name (Last, First, Middle Initial)
RICHARD M HILMEYER

Mailing Address 6301 NW 82ND

City WARR ACRES State OK Zip Code 73132

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

Name of Employer H & H MASONERY Occupation CONTRACTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 22 / 2008

Transaction ID: SA11AI.13984

Amount of Each Receipt this Period: 500.00

B.

Full Name (Last, First, Middle Initial)
ACE L JENKINS

Mailing Address P.O. BOX 1236

City ANARDAKO State OK Zip Code 73005

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 09 / 08 / 2008

Transaction ID: SA11AI.13900

Amount of Each Receipt this Period: 100.00

C.

Full Name (Last, First, Middle Initial)
ARTHUR P LONG

Mailing Address 1225 N. CANYON WAY

City OKLAHOMA CITY State OK Zip Code 73044

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 09 / 07 / 2008

Transaction ID: SA11AI.13920

Amount of Each Receipt this Period: 200.00

SUBTOTAL of Receipts This Page (optional) ▶ **800.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 37
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.	Full Name (Last, First, Middle Initial) CHARLES N. NOBLES	Date of Receipt MM / DD / YYYY 09 / 24 / 2008
	Mailing Address 3925 OAK HOLLOW DRIVE	Transaction ID: SA11AI.13987
	City State Zip Code EDMOND OK 73013	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) JAMES L. PARKS	Date of Receipt MM / DD / YYYY 09 / 26 / 2008
	Mailing Address 646 OAK PL	Transaction ID: SA11AI.13858
	City State Zip Code EDMOND OK 73003	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
Name of Employer SELF EMPLOYED	Occupation OIL & GAS EXPLORATION	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

C.	Full Name (Last, First, Middle Initial) JERRY RAY	Date of Receipt MM / DD / YYYY 09 / 18 / 2008
	Mailing Address 4750 HOBBY HORSE LANE	Transaction ID: SA11AI.13813
	City State Zip Code SKIATOOK OK 74070	Amount of Each Receipt this Period 30.42
	FEC ID number of contributing federal political committee. C	
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 212.94	

SUBTOTAL of Receipts This Page (optional)	530.42
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 37
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.	Full Name (Last, First, Middle Initial) VALERIE RHODES		Date of Receipt
	Mailing Address 4024 N. HARVY PARKWAY		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 07 / 2008
	City	State	Zip Code
	OKLAHOMA CITY	OK	73118
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.13921
Name of Employer HOMEMAKER		Occupation HOMEMAKER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 1000.00
		<input type="text"/> 1000.00	

B.	Full Name (Last, First, Middle Initial) ARLENE ROUSE		Date of Receipt
	Mailing Address 4655 E. 58TH STREET		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 18 / 2008
	City	State	Zip Code
	TULSA	OK	74135
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.13816
Name of Employer DILLARDS		Occupation SALES	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 31.00
		<input type="text"/> 267.00	

C.	Full Name (Last, First, Middle Initial) TODD RUSS		Date of Receipt
	Mailing Address 1634 CRESTVIEW DRIVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 24 / 2008
	City	State	Zip Code
	CORDELL	OK	73632
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.13988
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00
		<input type="text"/> 500.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1531.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 11 / 37	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.	Full Name (Last, First, Middle Initial) DAVID S RUSSELL		Date of Receipt	
	Mailing Address 2113 WILSHIRE DRIVE		M M / D D / Y Y Y Y 09 / 24 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.13990
	ENID	OK	73703	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
	C		250.00	
Name of Employer SELF - EMPLOYED		Occupation PHYSICIAN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional)	250.00
TOTAL This Period (last page this line number only)	6704.42

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 37
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A. Full Name (Last, First, Middle Initial)
COBURN FOR SENATE 2010
Mailing Address POST OFFICE BOX 977

City State Zip Code
MUSKOGEE OK 74402

FEC ID number of contributing federal political committee. **C** C00409888

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 09 / 2008
Transaction ID: SA11C.13910
 Amount of Each Receipt this Period
 5000.00

B. Full Name (Last, First, Middle Initial)
FALLIN FOR CONGRESS
Mailing Address PO Box 720634

City State Zip Code
Oklahoma City OK 73172

FEC ID number of contributing federal political committee. **C** C00415778

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
21500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 22 / 2008
Transaction ID: SA11C.13975
 Amount of Each Receipt this Period
 1500.00

C. Full Name (Last, First, Middle Initial)
FRIENDS OF JIM INHOFE COMMITTEE
Mailing Address P.O. BOX 13300

City State Zip Code
OKLAHOMA CITY OK 73113

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 11 / 2008
Transaction ID: SA11C.13911
 Amount of Each Receipt this Period
 1400.00

SUBTOTAL of Receipts This Page (optional) ► 7900.00

TOTAL This Period (last page this line number only) ► 7900.00

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

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FOR LINE NUMBER: PAGE 13 / 37
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A. Full Name (Last, First, Middle Initial)
CARTER COUNTY REPUBLICAN PARTY
Mailing Address 810 WOOD-N-CREEK

City State Zip Code
ARDMORE OK 73401

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2008
Transaction ID: SA15.13889
 Amount of Each Receipt this Period
 300.00
 REIMBURSE FOR THEIR SHARE OF YARD SIGNS

B. Full Name (Last, First, Middle Initial)
CLEVELAND COUNTY REPUBLICAN PARTY
Mailing Address 615 24TH AVE SW

City State Zip Code
NORMAN OK 73069

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 875.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2008
Transaction ID: SA15.13890
 Amount of Each Receipt this Period
 875.00
 REIMBURSE FOR THEIR SHARE OF YARD SIGNS

C. Full Name (Last, First, Middle Initial)
GARFIELD COUNTY REPUBLICAN PARTY
Mailing Address P.O. BOX 1744

City State Zip Code
ENID OK 73702

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2008
Transaction ID: SA15.13891
 Amount of Each Receipt this Period
 500.00
 REIMBURSE FOR THEIR SHARE OF YARD SIGNS

SUBTOTAL of Receipts This Page (optional) ► 1675.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 37
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.

Full Name (Last, First, Middle Initial)
SEWARD COUNTY (KS) GOP PARTY

Mailing Address 1114 NORTH CARLTON

City LIBERAL State KS Zip Code 67901

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt: 09 / 30 / 2008
Transaction ID: SA15.13995
 Amount of Each Receipt this Period: 650.00
 REIMBURSE FOR THEIR SHARE OF YARD SIGN

B.

Full Name (Last, First, Middle Initial)
TULSA COUNTY REPUBLICAN PARTY

Mailing Address P.O. BOX 55014

City TULSA State OK Zip Code 74155

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 09 / 30 / 2008
Transaction ID: SA15.13888
 Amount of Each Receipt this Period: 2000.00
 REIMBURSE FOR THEIR SHARE OF YARD SIGNS

SUBTOTAL of Receipts This Page (optional)	▶	2650.00
TOTAL This Period (last page this line number only)	▶	4325.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 15 / 37	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.

Full Name (Last, First, Middle Initial)
ARVEST BANK

Mailing Address P.O. BOX 55500

City State Zip Code
OKLAHOMA CITY OK 73155

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
371.47

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2008

Transaction ID: SA17.13769

Amount of Each Receipt this Period
33.63

INTEREST ON ACCOUNT

SUBTOTAL of Receipts This Page (optional)	▶	33.63
TOTAL This Period (last page this line number only)	▶	33.63

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 16 / 37

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

<p>A. Full Name (Last, First, Middle Initial) AARON COOPER, LLC</p> <p>Mailing Address 10213 BUCCANEER DR</p> <p>City OKLAHOMA CITY State OK Zip Code 73159</p> <p>Purpose of Disbursement PROF. SERVICES - PRESS RELEASES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.13952 Date of Disbursement: 09 / 09 / 2008</p> <p>Amount of Each Disbursement this Period 1806.25</p>
<p>B. Full Name (Last, First, Middle Initial) AARON SNOW PHOTO</p> <p>Mailing Address 2754 NW 68TH STREET</p> <p>City OKLAHOMA CITY State OK Zip Code 73116</p> <p>Purpose of Disbursement PHOTOS FOR EVENT</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.13955 Date of Disbursement: 09 / 11 / 2008</p> <p>Amount of Each Disbursement this Period 720.00</p>
<p>C. Full Name (Last, First, Middle Initial) ARVEST BANK</p> <p>Mailing Address P.O. BOX 55500</p> <p>City OKLAHOMA CITY State OK Zip Code 73155</p> <p>Purpose of Disbursement FEDERAL PAYROLL TAX DEPOSIT</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.13935 Date of Disbursement: 09 / 08 / 2008</p> <p>Amount of Each Disbursement this Period 1131.31</p>

SUBTOTAL of Disbursements This Page (optional)	3657.56
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 17 / 37

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.	Full Name (Last, First, Middle Initial) ARVEST BANK	Transaction ID: SB30B.13956 Date of Disbursement
	Mailing Address P.O. BOX 55500	<input type="text" value="09"/> / <input type="text" value="17"/> / <input type="text" value="2008"/>
	City OKLAHOMA CITY State OK Zip Code 73155	Amount of Each Disbursement this Period
	Purpose of Disbursement CASHIERS CHECK - DIRECT MAILING	<input type="text" value="80259.11"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ARVEST BANK	Transaction ID: SB30B.13948 Date of Disbursement
	Mailing Address P.O. BOX 55500	<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2008"/>
	City OKLAHOMA CITY State OK Zip Code 73155	Amount of Each Disbursement this Period
	Purpose of Disbursement FEDERAL PAYROLL TAX DEPOSIT	<input type="text" value="1138.39"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) ARVEST BANK	Transaction ID: SB30B.13931 Date of Disbursement
	Mailing Address P.O. BOX 55500	<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City OKLAHOMA CITY State OK Zip Code 73155	Amount of Each Disbursement this Period
	Purpose of Disbursement BANK SERVICE CHARGE	<input type="text" value="10.27"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="81407.77"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.	Full Name (Last, First, Middle Initial) BAGS, INC	Transaction ID: SB30B.13924
	Mailing Address 1500 N. SOONER RD	Date of Disbursement 09 / 08 / 2008
	City OKLAHOMA CITY State OK Zip Code 73141	Amount of Each Disbursement this Period 808.50
	Purpose of Disbursement YARD SIGNS	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) BAGS, INC	Transaction ID: SB30B.13962
	Mailing Address 1500 N. SOONER RD	Date of Disbursement 09 / 12 / 2008
	City OKLAHOMA CITY State OK Zip Code 73141	Amount of Each Disbursement this Period 7222.60
	Purpose of Disbursement YARD SIGNS	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:	

C.	Full Name (Last, First, Middle Initial) BAGS, INC	Transaction ID: SB30B.13925
	Mailing Address 1500 N. SOONER RD	Date of Disbursement 09 / 16 / 2008
	City OKLAHOMA CITY State OK Zip Code 73141	Amount of Each Disbursement this Period 1617.00
	Purpose of Disbursement YARD SIGNS	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)	9648.10
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.

Full Name (Last, First, Middle Initial)
BAGS, INC

Transaction ID: SB30B.13926
Date of Disbursement

Mailing Address 1500 N. SOONER RD

/ /

City OKLAHOMA CITY State OK Zip Code 73141

Amount of Each Disbursement this Period

Purpose of Disbursement
YARD SIGNS

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
BAGS, INC

Transaction ID: SB30B.13966
Date of Disbursement

Mailing Address 1500 N. SOONER RD

/ /

City OKLAHOMA CITY State OK Zip Code 73141

Amount of Each Disbursement this Period

Purpose of Disbursement
YARD SIGNS

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
BAGS, INC

Transaction ID: SB30B.13927
Date of Disbursement

Mailing Address 1500 N. SOONER RD

/ /

City OKLAHOMA CITY State OK Zip Code 73141

Amount of Each Disbursement this Period

Purpose of Disbursement
YARD SIGNS

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 20 / 37

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A. Full Name (Last, First, Middle Initial) BANKCARD OPERATIONS Mailing Address PO BXO 24990 City TULSA State OK Zip Code 73124 Purpose of Disbursement CREDIT CARD RECEIPTS PROCESSING FEE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.13932 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 3 / 2 0 0 8
	Amount of Each Disbursement this Period 93.96

B. Full Name (Last, First, Middle Initial) BANKCARD OPERATIONS Mailing Address PO BXO 24990 City TULSA State OK Zip Code 73124 Purpose of Disbursement CREDIT CARD PAYMENT Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.13930 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 0 8
	Amount of Each Disbursement this Period 400.00

C. Full Name (Last, First, Middle Initial) BANKCARD OPERATIONS Mailing Address PO BXO 24990 City TULSA State OK Zip Code 73124 Purpose of Disbursement CREDIT CARD PAYMENT Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.13957 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 0 8
	Amount of Each Disbursement this Period 1166.00

SUBTOTAL of Disbursements This Page (optional) ▶	1659.96
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.

Full Name (Last, First, Middle Initial)
CARISSA DARLING

Transaction ID: SB30B.13938
Date of Disbursement

Mailing Address 808 SW 15TH STREET
#203

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	0	8

City MOORE State OK Zip Code 73160

Amount of Each Disbursement this Period

1334.13

Purpose of Disbursement
STAFF WAGES -- NET PAYROLL

Category/Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
CARISSA DARLING

Transaction ID: SB30B.13950
Date of Disbursement

Mailing Address 808 SW 15TH STREET
#203

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	0	8

City MOORE State OK Zip Code 73160

Amount of Each Disbursement this Period

16.80

Purpose of Disbursement
REIMBURSEMENT FOR STAFF TRAVEL

Category/Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
CARISSA DARLING

Transaction ID: SB30B.13960
Date of Disbursement

Mailing Address 808 SW 15TH STREET
#203

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	8		2	0	0	8

City MOORE State OK Zip Code 73160

Amount of Each Disbursement this Period

95.00

Purpose of Disbursement
REIMBURSE - STAFF TRAVEL

Category/Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

1445.93

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

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

<p>A. Full Name (Last, First, Middle Initial) CARISSA DARLING</p> <p>Mailing Address 808 SW 15TH STREET #203</p> <p>City MOORE State OK Zip Code 73160</p> <p>Purpose of Disbursement REIMBURSE - STAFF TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.13961</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="1"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="44.20"/></p>
<p>B. Full Name (Last, First, Middle Initial) CARISSA DARLING</p> <p>Mailing Address 808 SW 15TH STREET #203</p> <p>City MOORE State OK Zip Code 73160</p> <p>Purpose of Disbursement STAFF WAGES -- NET PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.13943</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1334.14"/></p>
<p>C. Full Name (Last, First, Middle Initial) CARISSA DARLING</p> <p>Mailing Address 808 SW 15TH STREET #203</p> <p>City MOORE State OK Zip Code 73160</p> <p>Purpose of Disbursement REIMBURSE STAFF TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.13970</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="95.00"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="1473.34"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.	Full Name (Last, First, Middle Initial) EDONATION.COM	Transaction ID: SB30B.13971 Date of Disbursement 09 / 07 / 2008
	Mailing Address 118 N. ST ASAPH STREET	Amount of Each Disbursement this Period 225.00
	City ALEXANDRIA State VA Zip Code 22314	
	Purpose of Disbursement E-DONATION COLLECTION & PROCESSING FEE	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) GARY JONES	Transaction ID: SB30B.13965 Date of Disbursement 09 / 24 / 2008
	Mailing Address 20237 SW TINNEY RD	Amount of Each Disbursement this Period 40.00
	City CACHE State OK Zip Code 73527	
	Purpose of Disbursement REIMBURSE FOR MEALS	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) MARY JANE JONES	Transaction ID: SB30B.13928 Date of Disbursement 09 / 12 / 2008
	Mailing Address 20237 SW TINNER RD	Amount of Each Disbursement this Period 4177.25
	City CACHE State OK Zip Code 73027	
	Purpose of Disbursement REIMBURSEMENT FOR LAPEL PINS	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	4442.25
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.	Full Name (Last, First, Middle Initial) PATRICK MOIR	Transaction ID: SB30B.13936
	Mailing Address 2000 CANYON BREEZE DRIVE	Date of Disbursement MM / DD / YYYY 09 / 08 / 2008
	City LAS VEGAS State NV Zip Code 89134	Amount of Each Disbursement this Period 1250.00
	Purpose of Disbursement COMMUNICATION PLANNING AND DIRECTION	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PATRICK MOIR	Transaction ID: SB30B.13963
	Mailing Address 2000 CANYON BREEZE DRIVE	Date of Disbursement MM / DD / YYYY 09 / 18 / 2008
	City LAS VEGAS State NV Zip Code 89134	Amount of Each Disbursement this Period 1250.00
	Purpose of Disbursement COMMUNICATION PLANNING & DIRECTION	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) JACOB A PARSONS	Transaction ID: SB30B.13939
	Mailing Address 200 CLASSEN BLVD #3117	Date of Disbursement MM / DD / YYYY 09 / 08 / 2008
	City NORMAN State OK Zip Code 73071	Amount of Each Disbursement this Period 919.89
	Purpose of Disbursement STAFF WAGES -- NET PAYROLL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3419.89
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.	Full Name (Last, First, Middle Initial) JACOB A PARSONS	Transaction ID: SB30B.13944
	Mailing Address 200 CLASSEN BLVD #3117	Date of Disbursement MM / DD / YYYY 09 / 19 / 2008
	City NORMAN State OK Zip Code 73071	Amount of Each Disbursement this Period 919.89
	Purpose of Disbursement STAFF WAGES -- NET PAYROLL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ANNE PATTERSON	Transaction ID: SB30B.13940
	Mailing Address 6831 E 47TH STEET	Date of Disbursement MM / DD / YYYY 09 / 08 / 2008
	City TULSA State OK Zip Code 73160	Amount of Each Disbursement this Period 957.75
	Purpose of Disbursement STAFF WAGES -- NET PAYROLL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) ANNE PATTERSON	Transaction ID: SB30B.13945
	Mailing Address 6831 E 47TH STEET	Date of Disbursement MM / DD / YYYY 09 / 19 / 2008
	City TULSA State OK Zip Code 73160	Amount of Each Disbursement this Period 957.75
	Purpose of Disbursement STAFF WAGES -- NET PAYROLL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2835.39
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.	Full Name (Last, First, Middle Initial) ROBERT JOSH PELLOW	Transaction ID: SB30B.13942 Date of Disbursement 09 / 08 / 2008
	Mailing Address 1001 E. BROOKS AVE	Amount of Each Disbursement this Period 753.39
	City STILLWATER State OK Zip Code 74075	
	Purpose of Disbursement STAFF WAGES -- NET PAYROLL	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) ROBERT JOSH PELLOW	Transaction ID: SB30B.13959 Date of Disbursement 09 / 18 / 2008
	Mailing Address 1001 E. BROOKS AVE	Amount of Each Disbursement this Period 51.20
	City STILLWATER State OK Zip Code 74075	
	Purpose of Disbursement REIMBURSE - STAFF TRAVEL	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) ROBERT JOSH PELLOW	Transaction ID: SB30B.13947 Date of Disbursement 09 / 19 / 2008
	Mailing Address 1001 E. BROOKS AVE	Amount of Each Disbursement this Period 753.38
	City STILLWATER State OK Zip Code 74075	
	Purpose of Disbursement STAFF WAGES -- NET PAYROLL	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	1557.97
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.	Full Name (Last, First, Middle Initial) JEFFREY J PETERS	Transaction ID: SB30B.13941 Date of Disbursement
	Mailing Address 404 HUNTERS GLEN COURT	<input type="text" value="09"/> <input type="text" value="08"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City MOORE State OK Zip Code 73160	Amount of Each Disbursement this Period
	Purpose of Disbursement STAFF WAGES -- NET PAYROLL	<input type="text" value="218.64"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) JEFFREY J PETERS	Transaction ID: SB30B.13946 Date of Disbursement
	Mailing Address 404 HUNTERS GLEN COURT	<input type="text" value="09"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City MOORE State OK Zip Code 73160	Amount of Each Disbursement this Period
	Purpose of Disbursement STAFF WAGES -- NET PAYROLL	<input type="text" value="241.70"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) PINPOINT CONSULTANTS	Transaction ID: SB30B.13937 Date of Disbursement
	Mailing Address 8622 E. 98TH PLACE	<input type="text" value="09"/> <input type="text" value="08"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City TULSA State OK Zip Code 74133	Amount of Each Disbursement this Period
	Purpose of Disbursement WEBSITE MAINTENANCE & STRATEGIC PLANNING	<input type="text" value="2500.00"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2960.34"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.	Full Name (Last, First, Middle Initial) PINPOINT CONSULTANTS	Transaction ID: SB30B.13949 Date of Disbursement
	Mailing Address 8622 E. 98TH PLACE	<input type="text" value="09"/> / <input type="text" value="08"/> / <input type="text" value="2008"/>
	City TULSA State OK Zip Code 74133	Amount of Each Disbursement this Period
	Purpose of Disbursement REIMBURSEMENT FOR STAFF TRAVEL/CELL	<input type="text" value="36.90"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PINPOINT CONSULTANTS	Transaction ID: SB30B.13954 Date of Disbursement
	Mailing Address 8622 E. 98TH PLACE	<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2008"/>
	City TULSA State OK Zip Code 74133	Amount of Each Disbursement this Period
	Purpose of Disbursement REIMBURSE STAFF TRAVEL & CELL PHONE	<input type="text" value="120.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) PINPOINT CONSULTANTS	Transaction ID: SB30B.13958 Date of Disbursement
	Mailing Address 8622 E. 98TH PLACE	<input type="text" value="09"/> / <input type="text" value="18"/> / <input type="text" value="2008"/>
	City TULSA State OK Zip Code 74133	Amount of Each Disbursement this Period
	Purpose of Disbursement WEBSITE MAINTENANCE & STRATGIC PLANNING	<input type="text" value="2500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2656.90"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.	Full Name (Last, First, Middle Initial) PINPOINT CONSULTANTS	Transaction ID: SB30B.13969
	Mailing Address 8622 E. 98TH PLACE	Date of Disbursement MM / DD / YYYY 09 / 26 / 2008
	City TULSA State OK Zip Code 74133	Amount of Each Disbursement this Period 55.61
	Purpose of Disbursement REIMBURSE STAFF TRAVEL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) RAPID FORMS, INC.	Transaction ID: SB30B.13964
	Mailing Address P.O. BOX 88042	Date of Disbursement MM / DD / YYYY 09 / 23 / 2008
	City CHICAGO State IL Zip Code 60630	Amount of Each Disbursement this Period 107.19
	Purpose of Disbursement PRINTING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) U.S. CELLULAR	Transaction ID: SB30B.13968
	Mailing Address P.O. 650684	Date of Disbursement MM / DD / YYYY 09 / 25 / 2008
	City DALLAS State TX Zip Code 75265	Amount of Each Disbursement this Period 1147.20
	Purpose of Disbursement CELL PHONE SERVICE	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	1310.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.

Full Name (Last, First, Middle Initial)
WESTERN PHONESTRATEGIES

Transaction ID: SB30B.13967

Date of Disbursement

Mailing Address 5530 WESTERN AVE

^M 0	^M 9	/	^D 2	^D 5	/	^Y 2	^Y 0	^Y 0	^Y 8
----------------	----------------	---	----------------	----------------	---	----------------	----------------	----------------	----------------

City OKLAHOMA CITY State OK Zip Code 73118

Amount of Each Disbursement this Period

15000.00

Purpose of Disbursement
PHONE SURVEY, GET OUT THE VOTE

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

15000.00

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

152144.21

SCHEDULE L (FEC Form 3X)

AGGREGATION PAGE: LEVIN FUNDS

Transaction ID: SL.13991

NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

NAME OF ACCOUNT
OKLAHOMA LEADERSHIP LEVIN ACCOUNT

	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
a. Itemized..... (Use Schedule L-A)	0.00	11591.95
b. Unitemized.....	0.00	200.00
c. Total.....	0.00	11791.95
2. OTHER RECEIPTS.....	2.33	24.54
3. TOTAL RECEIPTS..... (Add Lines 1c and 2)	2.33	11816.49
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
a. Voter Registration.....	0.00	0.00
b. Voter ID.....	0.00	0.00
c. GOTV.....	0.00	0.00
d. Generic Campaign.....	0.00	0.00
e. Total.....	0.00	0.00
5. OTHER DISBURSEMENTS.....	0.00	3.19
6. TOTAL DISBURSEMENTS..... (Add Lines 4e and 5)	0.00	3.19
7. BEGINNING CASH ON HAND..... (for Column B, use cash as of January 1st)	18908.65	7097.68
8. RECEIPTS..... (from Line 3)	2.33	11816.49
9. SUBTOTAL..... (Add Lines 7 and 8)	18910.98	18914.17
10. DISBURSEMENTS..... (From Line 6)	0.00	3.19
11. ENDING CASH ON HAND..... (Subtract Line 10 From Line 9)	18910.98	18910.98

SCHEDULE L-A (FEC Form 3X)
ITEMIZED RECEIPTS OF LEVIN FUNDS

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

FOR LINE NUMBER: 1a 2
 (check only one)

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NAME OF COMMITTEE (In Full)
 Oklahoma Leadership Council

Full Name (Last, First, Middle Initial)

A. ARVEST BANK

Mailing Address P.O. BOX 55500

City OKLAHOMA CITY State OK Zip Code 73155

Name of Employer or Principal Place of Business

Occupation

Transaction ID: SASL2.13992

Date of Receipt

/ /

Amount of Each Receipt this Period

Aggregate Year-to-Date

Account: 12678

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

Image# 28992743138

Form/Schedule: SA11C

Transaction ID: SA11C.13975

ON 7-22-08 FALLIN FOR CONGRESS COMMITTEE TRANSFERED \$1,500 TO THE OKLAHOMA LEADERSHIP PART OF THE COSTS OF THE STATE DELEGATES TO THE NATIONAL CONVENTION. THIS \$1,500 WAS DEBITED TO THE COMMITTEE'S NON-FEDERAL ACCOUNT BY MISTAKE. ON 9-22-08 THE FUNDS WERE TRANSFERED INTO THE COMMITTEE'S NON-FEDERAL ACCOUNT. AT ALL TIMES, THE STATE ACCOUNT HOLDING \$1,500 HAD SUFFICIENT FEDERALLY ACCEPTIBLE FUNDS TO COVER THE \$1,500.

Form/Schedule: SA15

Transaction ID: SA15.13889

THIS RECEIPT REPRESENTS CARTER COUNTY REPUBLICAN PARTY'S PROPORTIONATE SHARE OF YEAR-END CONTRIBUTIONS TO THE NATIONAL CONVENTION.

Image# 28992743139

Form/Schedule: **SA15**
Transaction ID: **SA15.13890**

THIS RECEIPT REPRESENTS CLEVELAND COUNTY REPUBLICAN PARTY'S PROPORTIONATE SHARE OF Y

Form/Schedule: **SA15**
Transaction ID: **SA15.13891**

THIS RECEIPT REPRESENTS GARFIELD COUNTY REPUBLICAN PARTY'S PROPORTIONATE SHARE OF YA

Image# 28992743140

Form/Schedule: **SA15**

Transaction ID: **SA15.13995**

THIS RECEIPT REPRESENTS SEWARD CO (KS) PROPORTIONATE SHARE OF YARD SIGNS

Form/Schedule: **SA15**

Transaction ID: **SA15.13888**

THIS RECEIPT REPRESENTS TULSA COUNTY REPUBLICAN PARTY'S PROPORTIONATE SHARE OF YARD

Image# 28992743141

Form/Schedule: **SB30B**
Transaction ID: **SB30B.13956**

CASHIERS CHECK TO MAJORITY STRATIGIES, 135 PROFESSIONAL DRIVE, SUITE 104, PONTE VEDRA BE
MAILING FOR GET OUT THE VOTE AND VOTER REGISTRATION

Form/Schedule: **SB30B**
Transaction ID: **SB30B.13930**

ROOM RENTAL FOR STAFF AT NATIONAL CONVENTION; SHERIDAN FOUR POINTS HOTEL, 1330 INSUST
MINN. SEPT 4, 2008

Image# 28992743142

Form/Schedule: **SB30B**

Transaction ID: **SB30B.13957**

CREDIT CARD PAYMENT TO SOUTHWEST AIRLINES FOR AIRFARE FOR EVENT SPEAKER

Form/Schedule: **SB30B**

Transaction ID: **SB30B.13928**

RIMBURSEMENT FOR OKLAHOMA MCCAIN AND OKLAHOMA GOP PINS. VENDOR WAS T & S PRINTING, IN WTON, OK. 73505.
