

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Chad Wilbanks for Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	7675.00	59035.00
(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)).....	7675.00	59035.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	7712.64	13157.69
(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)).....	7712.64	13157.69
8. Cash on Hand at Close of Reporting Period (from Line 27).....	88877.31	
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).....	43000.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Chad Wilbanks for Congress

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

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).....	4550.00	50750.00
(ii) Unitemized.....	3125.00	8160.00
(iii) TOTAL of contributions from individuals ▶	7675.00	58910.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	125.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	7675.00	59035.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	18000.00	43000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	18000.00	43000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	25675.00	102035.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	7712.64	13157.69
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	7712.64	13157.69

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	70914.95
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	25675.00
25. SUBTOTAL (add Line 23 and Line 24).....	96589.95
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	7712.64
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	88877.31

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 16
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Chad Wilbanks for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Tom Allen

Mailing Address 2400 McCue
Suite 362

City Houston State TX Zip Code 77056

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

Name of Employer IPR-GDF Suez Occupation Director

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 11 / 2011

Transaction ID : SA11AI.4456

Amount of Each Receipt this Period
500.00
donation

B. Full Name (Last, First, Middle Initial)
Mr. John Boyle

Mailing Address 1718 Cripple Creek

City Irving State TX Zip Code 75061

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

Name of Employer Boyle & Lowry Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 22 / 2011

Transaction ID : SA11AI.4488

Amount of Each Receipt this Period
250.00
donation

C. Full Name (Last, First, Middle Initial)
Ms Nancy Fisher

Mailing Address 1005 Congress Avenue
#480

City Austin State TX Zip Code 78701

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

Name of Employer Texas Strategy Group Occupation Lobbyist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 05 / 2011

Transaction ID : SA11AI.4497

Amount of Each Receipt this Period
250.00
donation

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 16
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Chad Wilbanks for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Michael Gardner

Mailing Address 7 Falling Oaks Trail

City Austin State TX Zip Code 78738

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

Name of Employer Riata Hunting Ranches Occupation Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 05 / 2011

Transaction ID : SA11AI.4484

Amount of Each Receipt this Period
 250.00
 donation

B. Full Name (Last, First, Middle Initial)
Mrs. Mary Humphrey

Mailing Address 3531 Blueberry Lane

City Grapevine State TX Zip Code 76051

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

Name of Employer Self Occupation Homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 16 / 2011

Transaction ID : SA11AI.4458

Amount of Each Receipt this Period
 250.00
 donation

C. Full Name (Last, First, Middle Initial)
Mr. Robert Kleberg

Mailing Address PO Box 12808

City San Antonio State TX Zip Code 78212

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

Name of Employer University of Texas Occupation Student

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 02 / 2011

Transaction ID : SA11AI.4448

Amount of Each Receipt this Period
 500.00
 donation

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 16
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Chad Wilbanks for Congress

A. Full Name (Last, First, Middle Initial)
Mrs. Cynthia Kopec

Mailing Address 1602 Bauerle Avenue

City Austin State TX Zip Code 78704

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

Name of Employer Self Occupation Consultant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 06 / 2011

Transaction ID : SA11AI.4454

Amount of Each Receipt this Period
 250.00
 donation

B. Full Name (Last, First, Middle Initial)
Mr. James Perkins

Mailing Address PO Box 288

City Rusk State TX Zip Code 75785

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

Name of Employer Perkins & Perkins Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 22 / 2011

Transaction ID : SA11AI.4481

Amount of Each Receipt this Period
 250.00
 donation

C. Full Name (Last, First, Middle Initial)
Mr. Dale Snelling

Mailing Address PO Box 700

City Elm Mott State TX Zip Code 76640

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

Name of Employer Axtell ISD Occupation Educator

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 22 / 2011

Transaction ID : SA11AI.4469

Amount of Each Receipt this Period
 300.00
 donation

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

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

800.00

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

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

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NAME OF COMMITTEE (In Full)
Chad Wilbanks for Congress

Full Name (Last, First, Middle Initial) Mr. James Tobin		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 06 / 2011
Mailing Address 2201 Wilson Blvd. Suite 313		Transaction ID : SA11AI.4450
City Arlington	State VA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self	Occupation Consultant	donation
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) Susan Vignaroli		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 03 / 2011
Mailing Address 3412 Marsh Lane		Transaction ID : SA11AI.4496
City Grapevine	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer GCISD	Occupation Driver	donation
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1100.00	

Full Name (Last, First, Middle Initial) Susan Vignaroli		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 23 / 2011
Mailing Address 3412 Marsh Lane		Transaction ID : SA11AI.4509
City Grapevine	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer GCISD	Occupation Driver	donation
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1250.00	

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)
Chad Wilbanks for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Pete Winstead

Mailing Address 401 Congress Avenue
2100

City Austin State TX Zip Code 78701

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

Name of Employer Winstead PC Occupation Partner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2011

Transaction ID : SA11Al.4477

Amount of Each Receipt this Period
 500.00
 donation

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

500.00

4550.00

**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 16			
	<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)
Chad Wilbanks for Congress

Full Name (Last, First, Middle Initial) A. Best Buy		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2011
Mailing Address 12909 Shops Parkway #100		Amount of Each Disbursement this Period 389.68
City Bee Cave State TX Zip Code 78738	Purpose of Disbursement Campaign Supplies 001 Category/Type	
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:	Transaction ID : SB17.4547	

Full Name (Last, First, Middle Initial) B. Campaign Solutions		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2011
Mailing Address 117 North St. Asaph		Amount of Each Disbursement this Period 331.11
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Marketing 004 Category/Type	
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:	Transaction ID : SB17.4541	

Full Name (Last, First, Middle Initial) c. Campaign Solutions		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2011
Mailing Address 117 North St. Asaph		Amount of Each Disbursement this Period 101.99
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Online Fundraising 003 Category/Type	
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:	Transaction ID : SB17.4542	

SUBTOTAL of Disbursements This Page (optional).....	822.78
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 16			
	<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)
Chad Wilbanks for Congress

Full Name (Last, First, Middle Initial) A. Campaign Solutions		Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2011
Mailing Address 117 North St. Asaph		Amount of Each Disbursement this Period 518.98 Transaction ID : SB17.4543
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Marketing	Category/ Type 004
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:	

Full Name (Last, First, Middle Initial) B. Lake Travis Chamber of Commerce		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2011
Mailing Address 1415 RR 620 South Suite 202		Amount of Each Disbursement this Period 300.00 Transaction ID : SB17.4544
City Austin	State TX	
Zip Code 78734	Purpose of Disbursement Campaign Advertising	Category/ Type 004
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:	

Full Name (Last, First, Middle Initial) c. Lake Travis GOP		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2011
Mailing Address PO Box 340327		Amount of Each Disbursement this Period 650.00 Transaction ID : SB17.4521
City Austin	State TX	
Zip Code 78734	Purpose of Disbursement Marketing	Category/ Type 004
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:	

SUBTOTAL of Disbursements This Page (optional).....	1468.98
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 16			
	<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)
Chad Wilbanks for Congress

Full Name (Last, First, Middle Initial) A. Lake Travis GOP			Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2011	
Mailing Address PO Box 340327			Amount of Each Disbursement this Period 15.00	
City Austin	State TX	Zip Code 78734	Transaction ID : SB17.4522	
Purpose of Disbursement Campaign Luncheon		Category/ Type 001		
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:				

Full Name (Last, First, Middle Initial) B. Lake Travis GOP			Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2011	
Mailing Address PO Box 340327			Amount of Each Disbursement this Period 20.00	
City Austin	State TX	Zip Code 78734	Transaction ID : SB17.4515	
Purpose of Disbursement Campaign Luncheon		Category/ Type 001		
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:				

Full Name (Last, First, Middle Initial) c. Republican Party of Texas			Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2011	
Mailing Address 1108 Lavaca Suite 500			Amount of Each Disbursement this Period 3125.00	
City Austin	State TX	Zip Code 78701	Transaction ID : SB17.4513	
Purpose of Disbursement Filing Fee		Category/ Type 001		
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:				

SUBTOTAL of Disbursements This Page (optional).....	3160.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 OF 16	
	<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)
Chad Wilbanks for Congress

Full Name (Last, First, Middle Initial) A. Stokes Sign Company		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2011
Mailing Address 1909 RR 620 South		Amount of Each Disbursement this Period 1478.70
City Austin State TX Zip Code 78734	Purpose of Disbursement Marketing Category/Type 006	
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)	Transaction ID : SB17.4520
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement 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).....	1478.70
TOTAL This Period (last page this line number only).....	6930.46

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4334

Chad Wilbanks for Congress

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

[PERSONAL FUNDS]

Election: 2012

Chad Wilbanks

Primary

General

Other (specify) ▼

Mailing Address
PO Box 342693

City State ZIP Code
Lakeway TX 78734

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
25000.00 0.00 25000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

09

30

2011

12/31/2012

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)..... 25000.00

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

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

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

NAME OF COMMITTEE (In Full) **Chad Wilbanks for Congress** Transaction ID : **SC/10.4427**

LOAN SOURCE Full Name (Last, First, Middle Initial) Chad Wilbanks	[PERSONAL FUNDS]	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO Box 342693		

City	State	ZIP Code
Lakeway	TX	78734

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
18000.00	0.00	18000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 12 / D 31 / Y 2011	M / D / Y 12/31/12	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: []

SUBTOTALS This Period This Page (optional).....	▶	18000.00
TOTALS This Period (last page in this line only).....	▶	43000.00

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