

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

12FE4M5

MICHAEL COLE FOR CONGRESS

ADDRESS (number and street)

PO BOX 1486

Check if different than previously reported. (ACC)

ORANGE

TX

77630

2. **FEC IDENTIFICATION NUMBER**

C C00551523

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

TX

36

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y  
04 / 01 / 2014

through

M M / D D / Y Y Y Y  
06 / 30 / 2014

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

Type or Print Name of Treasurer Michael Kenneth Cole Jr.

Signature of Treasurer Michael Kenneth Cole Jr.

[Electronically Filed]

Date

M M / D D / Y Y Y Y  
07 / 27 / 2014

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

Office Use Only

FEC FORM 3  
(Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**MICHAEL COLE FOR CONGRESS**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	4075.00	11138.64
(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)).....	4075.00	11138.64
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	2177.06	8711.82
(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)).....	2177.06	8711.82
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	2301.82	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	3000.00	

**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

**MICHAEL COLE FOR CONGRESS**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	200.00	2513.50
(ii) Unitemized.....	375.00	1625.14
(iii) TOTAL of contributions from individuals ▶	575.00	4138.64
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	3500.00	7000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	4075.00	11138.64
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	3000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	3000.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	4075.00	14138.64

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	2177.06	8711.82
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	3125.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	2177.06	11836.82

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	403.88
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	4075.00
25. SUBTOTAL (add Line 23 and Line 24).....	4478.88
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	2177.06
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2301.82

**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 14
	<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)  
**MICHAEL COLE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Vickie Brekel**

Mailing Address 2902 Leatherwood Drive

City State Zip Code  
Kountze TX 77625

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

Name of Employer N?A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
240.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2014

**Transaction ID : SA11AI.4161**

Amount of Each Receipt this Period  
 100.00  
 check

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

Mailing Address 15514 T C Jester Blvd

City State Zip Code  
Houston TX 77068

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

Name of Employer Self-employed Occupation Management

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 29 / 2014

**Transaction ID : SA11AI.4122**

Amount of Each Receipt this Period  
 100.00

**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).....

200.00

200.00

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

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NAME OF COMMITTEE (In Full)  
**MICHAEL COLE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**CWA- COPE PCC**

Mailing Address 501 3rd Street, NW

City Washington State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 08 / 2014

**Transaction ID : SA11C.4203**

Amount of Each Receipt this Period  
 2500.00

PAC check

**B.** Full Name (Last, First, Middle Initial)  
**IBEW Voluntary PAC Fund**

Mailing Address 900 7th Street

City Washington State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2014

**Transaction ID : SA11C.4127**

Amount of Each Receipt this Period  
 1000.00

PAC contribution

**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).....

3500.00

3500.00

**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 7 OF 14			
	<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)  
**MICHAEL COLE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Bank of America</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2014
Mailing Address 100 North Tryon Street		Amount of Each Disbursement this Period 35.00 <b>Transaction ID : SB17.4390</b>
City Charlotte	State NC	
Zip Code 28202	Purpose of Disbursement NSF Fee	Category/ Type 001
Candidate Name <b>MICHAEL COLE FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 36	

Full Name (Last, First, Middle Initial) <b>B. Bank of America</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014
Mailing Address 100 North Tryon Street		Amount of Each Disbursement this Period 12.00 <b>Transaction ID : SB17.4389</b>
City Charlotte	State NC	
Zip Code 28202	Purpose of Disbursement monthly maintenance fee	Category/ Type 001
Candidate Name <b>MICHAEL COLE FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 36	

Full Name (Last, First, Middle Initial) <b>c. Bank of America</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 100 North Tryon Street		Amount of Each Disbursement this Period 35.00 <b>Transaction ID : SB17.4418</b>
City Charlotte	State NC	
Zip Code 28202	Purpose of Disbursement Extended overdraft fee	Category/ Type 001
Candidate Name <b>MICHAEL COLE FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 36	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	82.00
<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 8 OF 14			
	<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)  
**MICHAEL COLE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Central Office Supply</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.4404</b>
City Bridge City Texas	State TX	
Purpose of Disbursement push cards/business cards/starionary	Zip Code	Category/ Type 006
Candidate Name <b>MICHAEL COLE FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 36	

Full Name (Last, First, Middle Initial) <b>B. Conns</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address		Amount of Each Disbursement this Period 65.00 <b>Transaction ID : SB17.4399</b>
City Orange	State TX	
Purpose of Disbursement Computer fee	Zip Code	Category/ Type 001
Candidate Name <b>MICHAEL COLE FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 36	

Full Name (Last, First, Middle Initial) <b>C. Exxon Mobil 477</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address		Amount of Each Disbursement this Period 40.14 <b>Transaction ID : SB17.4403</b>
City Orange	State TX	
Purpose of Disbursement petrol	Zip Code 77632	Category/ Type 002
Candidate Name <b>MICHAEL COLE FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 36	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	605.14
<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 9 OF 14			
	<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)  
**MICHAEL COLE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Exxon Mobil 477</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address		Amount of Each Disbursement this Period 35.48
City Orange	State TX	
Zip Code 77632	Purpose of Disbursement petrol	Transaction ID : SB17.4405
Candidate Name <b>MICHAEL COLE FOR CONGRESS</b>	Category/ Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 36	

Full Name (Last, First, Middle Initial) <b>B. Exxon Mobil 477</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address		Amount of Each Disbursement this Period 17.96
City Orange	State TX	
Zip Code 77632	Purpose of Disbursement petrol	Transaction ID : SB17.4412
Candidate Name <b>MICHAEL COLE FOR CONGRESS</b>	Category/ Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 36	

Full Name (Last, First, Middle Initial) <b>c. Facebook.com</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2014
Mailing Address		Amount of Each Disbursement this Period 26.70
City	State	
Zip Code	Purpose of Disbursement internet advertising	Transaction ID : SB17.4409
Candidate Name <b>MICHAEL COLE FOR CONGRESS</b>	Category/ Type 004	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 36	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	80.14
<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 10 OF 14			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 20d	<input type="checkbox"/> 19c 21

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NAME OF COMMITTEE (In Full)  
**MICHAEL COLE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Facebook.com</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address		Amount of Each Disbursement this Period 20.30 <b>Transaction ID : SB17.4406</b>
City	State Zip Code	
Purpose of Disbursement internet advertising	Category/Type 004	
Candidate Name <b>MICHAEL COLE FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 36		

Full Name (Last, First, Middle Initial) <b>B. Facebook.com</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address		Amount of Each Disbursement this Period 33.39 <b>Transaction ID : SB17.4414</b>
City	State Zip Code	
Purpose of Disbursement internet advertising	Category/Type 004	
Candidate Name <b>MICHAEL COLE FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 36		

Full Name (Last, First, Middle Initial) <b>c. Kroger</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address #950		Amount of Each Disbursement this Period 20.66 <b>Transaction ID : SB17.4410</b>
City	State Zip Code Houston TX	
Purpose of Disbursement petrol	Category/Type 002	
Candidate Name <b>MICHAEL COLE FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 36		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	74.35
<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 11 OF 14			
	<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)  
**MICHAEL COLE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Nationbuilder.com</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2014
Mailing Address		Amount of Each Disbursement this Period 29.00 <b>Transaction ID : SB17.4261</b>
City	State Zip Code	
Purpose of Disbursement website	004 Category/Type	
Candidate Name <b>MICHAEL COLE FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 36		

Full Name (Last, First, Middle Initial) <b>B. Nationbuilder.com</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2014
Mailing Address		Amount of Each Disbursement this Period 29.00 <b>Transaction ID : SB17.4262</b>
City	State Zip Code	
Purpose of Disbursement website	004 Category/Type	
Candidate Name <b>MICHAEL COLE FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 36		

Full Name (Last, First, Middle Initial) <b>c. Soileau Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address 1009 Orange Avenue		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.4393</b>
City	State Zip Code Beaumont TX 77701	
Purpose of Disbursement campaign signs	006 Category/Type	
Candidate Name <b>MICHAEL COLE FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 36		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	558.00
<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 12 OF 14
	<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)  
**MICHAEL COLE FOR CONGRESS**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. T-Mobile</b>		M M / D D / Y Y Y Y 04 / 23 / 2014
Mailing Address		Amount of Each Disbursement this Period 158.61
City State Zip Code		
Purpose of Disbursement cell phones	001	<b>Transaction ID : SB17.4395</b>
Candidate Name <b>MICHAEL COLE FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 36		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. T-Mobile</b>		M M / D D / Y Y Y Y 05 / 23 / 2014
Mailing Address		Amount of Each Disbursement this Period 158.61
City State Zip Code		
Purpose of Disbursement cell phones	001	<b>Transaction ID : SB17.4396</b>
Candidate Name <b>MICHAEL COLE FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 36		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C. T-Mobile</b>		M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address		Amount of Each Disbursement this Period 158.61
City State Zip Code		
Purpose of Disbursement cell phones	001	<b>Transaction ID : SB17.4397</b>
Candidate Name <b>MICHAEL COLE FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 36		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	475.83
<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 14	
	<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)  
**MICHAEL COLE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. walmart 777</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014
Mailing Address		Amount of Each Disbursement this Period 14.76
City Orange	State TX	
Zip Code 77630		Transaction ID : SB17.4394
Purpose of Disbursement petrol		
Candidate Name <b>MICHAEL COLE FOR CONGRESS</b>		Category/ Type 002
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 36	

Full Name (Last, First, Middle Initial) <b>B. walmart 777</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address		Amount of Each Disbursement this Period 33.68
City Orange	State TX	
Zip Code 77630		Transaction ID : SB17.4413
Purpose of Disbursement petrol		
Candidate Name <b>MICHAEL COLE FOR CONGRESS</b>		Category/ Type 002
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 36	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code		Transaction ID
Purpose of Disbursement		
Candidate Name		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>SUBTOTAL</b> of Disbursements This Page (optional).....	48.44
<b>TOTAL</b> This Period (last page this line number only).....	1923.90

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

NAME OF COMMITTEE (In Full) **MICHAEL COLE FOR CONGRESS** Transaction ID : **SC/10.4218**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) *[PERSONAL FUNDS]* Election: 2014  
**Michael Kenneth Cole Jr.**  Primary  
 Mailing Address: 2486 Abes Drive General  
 Other (specify) ▼

City State ZIP Code  
 ORANGE TX 77632

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3000.00	0.00	3000.00

**TERMS** Date Incurred Date Due Interest Rate Secured:  
 M 11 / D 30 / Y 2013 M M / D D / Y 1/01/2015 % (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).....	3000.00
<b>TOTALS</b> This Period (last page in this line only).....	3000.00

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