Image# 12950540436 PAGE 1 / 8

# **FEC** FORM 3X

# **REPORT OF RECEIPTS** AND DISBURSEMENTS For Other Than An Authorized Committee

	or Other Than A	II Authorize	Committee			Office Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼		ample: If typir or the lines.	ng, type	12FE4M5	
CAPELLA HEALTHCAI	RE, INC. GOVE	RNMENT	AFFAIRS	COMMIT	TEE	
<u> </u>						
ADDRESS (number and street)	501 CORPORATE C	CENTRE DRIVE	STE 200			
Check if different						
than previously reported. (ACC)	FRANKLIN				TN [	37067
2. FEC IDENTIFICATION NUI	MBER ▼	CITY 🛦		S	STATE A	ZIP CODE ▲
C C00421420		3. IS THIS REPORT	$\sim$	N) <b>OR</b>	AN (A)	ENDED
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2)		May 20 (M5)	-	20 (M8) Nov 20 (M11) (Non-Election Year Only) 20 (M9) Dec 20 (M12)
(a) Quarterly Reports:				, ,	Η.	(Non-Election Year Only)
April 15 Quarterly Report (Q1	(c) 12-Day	Apr 20 (M4)	Primary (12P	Jul 20 (M7)	General	20 (M10) Jan 31 (YE) (12G) Runoff (12R)
July 15 Quarterly Report (Q2	PRF-Flect		Convention (	_	Special (	
October 15 Quarterly Report (Q3	3)		M = M /	D D /	Y Y Y	in the
January 31 Year-End Report (YE	<u> </u>	Election on				State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	POST-Ele		General (300	à)	Runoff (3	0R) Special (30S)
Termination Report (TER)	Report for	Election on	M = M /	D D /	Y = Y = Y	in the State of
5. Covering Period 01	/ DID / Y	2012	through	01_	/ 31_ /	2012
I certify that I have examined this	s Report and to the	best of my kno	wledge and b	pelief it is true	e, correct and	I complete.
Type or Print Name of Treasurer	James R. Wiseman					
Signature of Treasurer James	R. Wiseman		[Electronically	, Filed] Da	ate 02	/ D D / Y Y Y Y Y Y 15 2012
NOTE: Submission of false, erroned	ous, or incomplete info	ormation may su	ubject the pers	son signing th	is Report to th	e penalties of 2 U.S.C. §437g.
Office Use Only						FEC FORM 3X Rev. 12/2004

#### **SUMMARY PAGE** OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

### CAPELLA HEALTHCARE, INC. GOVERNMENT AFFAIRS COMMITTEE

01 2012 Report Covering the Period: 2012 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 18073.66 January 1, 2012 (b) Cash on Hand at 18073.66 Beginning of Reporting Period..... 3066.99 3066.99 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 21140.65 21140.65 6(a) and 6(c) for Column B)..... 7152.50 7152.50 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 13988.15 13988.15 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

# CAPELLA HEALTHCARE, INC. GOVERNMENT AFFAIRS COMMITTEE

I. Receipts		COLUMN A	COLUMN B		
11 000		Total This Period	Calendar Year-to-Date		
	tributions (other than loans) From: Individuals/Persons Other				
(\$\infty\$)	Than Political Committees				
	(i) Itemized (use Schedule A)	491.25	491.25		
	,				
	(ii) Unitemized	2575.74	2575.74		
	(iii) TOTAL (add				
	Lines 11(a)(i) and (ii)▶	3066.99	3066.99		
(b)	Political Party Committees	0.00	0.00		
(c)	Other Political Committees				
	(such as PACs)	0.00	0.00		
(d)	Total Contributions (add Lines				
	11(a)(iii), (b), and (c)) (Carry	2000.00	3066.99		
	Totals to Line 33, page 5)	3066.99	3000.99		
	nsfers From Affiliated/Other	0.00	0.00		
ran	ty Committees	0.00	0.00		
13. All I	Loans Received	0.00	0.00		
		7			
14 I oa	n Repayments Received	0.00	0.00		
	sets To Operating Expenditures	7			
	funds, Rebates, etc.)				
(Ca	rry Totals to Line 37, page 5)	0.00	0.00		
16. Ref	unds of Contributions Made	, , , , , , , , , , , , , , , , , , , ,			
	ederal Candidates and Other				
	tical Committees	0.00	0.00		
	er Federal Receipts		0.00		
	idends, Interest, etc.)nsfers from Non-Federal and Levin Funds	0.00	0.00		
	Non-Federal Account				
(α)	(from Schedule H3)	0.00	0.00		
	(	7	, , , , ,		
(b)	Levin Funds (from Schedule H5)	0.00	0.00		
(6)	Levin Fands (nom Concado Fio)				
(c)	Total Transfers (add 18(a) and 18(b))	0.00	0.00		
19. Tota	al Receipts (add Lines 11(d),				
	13, 14, 15, 16, 17, and 18(c))▶	3066.99	3066.99		
		7			
20. Tota	al Federal Receipts				
/	otract Line 18(c) from Line 19)▶	3066.99	3066.99		

## **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		
1. (	Operating Expenditures:  (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	1110 1 01104	Calcinal Ical-to-Date		
	(i) Federal Share	0.00	0.00		
	(ii) Non-Federal Share	0.00	0.00		
(	(b) Other Federal Operating	7			
	Expenditures	152.50	152.50		
(	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	152.50	152.50		
-	Transfers to Affiliated/Other Party				
	CommitteesContributions to	0.00	0.00		
F	Federal Candidates/Committees and Other Political Committees	5000.00	5000.00		
	Independent Expenditures	0.00	0.00		
. (	(use Schedule E)				
(	(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00		
l	Loan Repayments Made	0.00	0.00		
	Loans Made Refunds of Contributions To:	0.00	0.00		
(	(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 28(a), (b), and (c))▶	0.00	0.00		
. (	Other Disbursements	2000.00	2000.00		
	Federal Election Activity (2 U.S.C. §431(20))				
(	(a) Allocated 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	0.00	0.00		
(	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00		
_					
	Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	7152.50	7152.50		
-	Total Federal Disbursements				
(	(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	7152.50	7152.50		

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
3. Total Contributions (other than loans) (from Line 11(d), page 3)	3066.99	3066.99		
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00		
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3066.99	3066.99		
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	152.50	152.50		
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00		
8. Net Operating Expenditures (subtract Line 37 from Line 36)	152.50	152.50		

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:			PAGE		6	OF		8	
(chec	(check only one)								
X	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.

or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) CAPELLA HEALTHCARE, INC	C. GOVERNMENT AFFAIRS COMI	MITTEE
Full Name (Last, First, Middle Initial)  1. Dan Slipkovich		Date of Receipt
Mailing Address 501 Corporate Centre Drive Suite 200		01 31 2012
City	State Zip Code	Transaction ID : SA11AI.5820
Franklin	TN 37067	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Capella Healthcare Company	Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial)  3. Michael Wiechart		Date of Receipt
Mailing Address 501 Corporate Centre Drive		01 31 2012
City	State Zip Code	Transaction ID : SA11AI.5837
Franklin	TN 37067	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	241.25
Name of Employer	Occupation	
Capella Healthcare	coo	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  241.25	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	Amount of Lauri recorpt this renou
Name of Employer	Occupation	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)		491.25
TOTAL This Period (last page this line number	<u> </u>	491.25

SCHEDULE B (FEC Form 3X)		EOD LINE	NUMBER: PAGE 7 OF 8		
TEMIZED DISBURSEMENTS	Use separate schedule(s)				
LIMELD DIODONOLIVILIANO	for each category of the Detailed Summary Page	` 21b	22 🗙 23 24 25 26		
		27	28a 28b 28c 29 30		
Any information copied from such Reports and Statem					
or for commercial purposes, other than using the name	e and address of any politi	cal committee to	solicit contributions from such committee.		
NAME OF COMMITTEE (In Full)					
angle CAPELLA HEALTHCARE, INC. G(	OVERNMENT AFF.	AIRS COMI	MITTEE		
Full Name (Last, First, Middle Initial)					
- FEDERATION OF AMERICAN HO	CDITAL C DAC		Date of Disbursement		
" FEDERATION OF AWERICAN HO	SPITALS PAC		M M / D D / Y Y Y Y		
Mailing Address 801 PENNSYLVANIA AVENUE			01 13 2012		
SUITE 245					
•	State Zip Code		Transaction ID : SB23.5808		
WASHINGTON	DC 20004				
Purpose of Disbursement contribution			Amount of Each Disbursement this Period		
Candidate Name			Amount of Each Disbursement this I chou		
		Category/ Type	5000.00		
Office Sought: House Disbursen	nent For:	.,,,,			
	Primary General				
President	Other (specify) ▼				
State: District:					
Full Name (Last, First, Middle Initial)					
•			Date of Disbursement		
Mailing Address			M = M / D = D / Y = Y = Y		
Mailing Address					
City	State Zip Code				
Purpose of Disbursement					
Candidate Name			Amount of Each Disbursement this Period		
Candidate Name		Category/ Type			
Office Sought: House Disbursen	nent For:	Туре	, , , , , , , , , , , , , , , , , , , ,		
	Primary General				
President	Other (specify) ▼				
State: District:					
Full Name (Last, First, Middle Initial)					
			Date of Disbursement		
Marilian Adduses			M M / D D / Y Y Y Y		
Mailing Address					
City	State Zip Code				
•	·				
Purpose of Disbursement					
Canadialata Nama			Amount of Each Disbursement this Period		
Candidate Name		Category/			
Office Sought: House Disbursen	nent For:	Туре	7 7		
	Primary General				
	Other (specify)				
State: District:	· · · · · · · · · · · · · · · · · · ·				
		I			
SUBTOTAL of Disbursements This Page (optional)			5000.00		
		<u> </u>			
TOTAL This Period (last page this line number only)			5000.00		

Use separate schedule(s) to reach category of the Detailed Gurmany of the Detailed Gurmany of the Detailed Gurmany of the Detailed Gurmany Page  Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such committee.  NAME OF COMMITTEE (in Full)  NAME OF COMMITTEE (in Full)  CAPELLA HEALTH-CARE, INC. GOVERNMENT AFFAIRS COMMITTEE  Full Name (Last, First, Middle Initial)  Douglas Cox for State Representative - 2012  Mailing Address 59877 E 333 Rd  City State Zip Code Ofter (specify) ▼  Douglas Cox for State Representative - 2012  Office Sought: House Senate President Ofter (specify) ▼  State: OK District: OS  Full Name (Last, First, Middle Initial)  Douglas Cox for State Representative - 2012  Mailing Address 59877 E 333 Rd  City State Zip Code Ofter (specify) ▼  State: OK District: OS  Full Name (Last, First, Middle Initial)  Douglas Cox for State Representative - 2012  Mailing Address 59877 E 333 Rd  City State Zip Code Ofter (specify) ▼  State: OK District: OS  Full Name (Last, First, Middle Initial)  Douglas Cox for State Representative - 2012  Office Sought: House Senate President Ofter (specify) ▼  Full Name (Last, First, Middle Initial)  Douglas Cox for State Representative - 2012  Office Sought: House Senate President Prize Ofter (specify) ▼  Mailing Address  City State Zip Code Primary General President President Primary General President President Primary General President President Primary General President President Primary General President Primary General Primary General President Primary General Primary General Primary General President President Primary General Prim	SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 8 OF 8			
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such Committee or for commencial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (in Full)  CAPELLA HEALTHCARE, INC. GOVERNMENT AFFAIRS COMMITTEE  Full Name (Last, First, Middle Initial)  Douglas Cox for State Representative - 2012  Mailing Address 58877 E 333 Rd  City State Zip Code OK 74344  Purpose of Disbursement coertibution  Candidate Name  Douglas Cox for State Representative - 2012  Senate Nemary General Primary General Pri	ITEMIZED DISBURSEMENTS	for each category of the	(check only	one) 22 23 24 25 26		
CAPELLA HEALTHCARE, INC. GOVERNMENT AFFAIRS COMMITTEE  Full Name (Last, First, Middle Initial)  Douglas Cox for State Representative - 2012  Mailing Address 59877 E 333 Rd  City  State: OK District: 05  Full Name (Last, First, Middle Initial)  Douglas Cox for State Representative - 2012  Office Sought: Senate  President  State: OK District: 05  Full Name (Last, First, Middle Initial)  Disbursement For: 2012  Mailing Address  Category  Transaction ID: SB29.5804  Amount of Each Disbursement  Other (specify) ▼  Transaction ID: SB29.5804  Amount of Each Disbursement this Period  Category  Transaction ID: SB29.5804  Transaction ID: SB29.5804  Amount of Each Disbursement  Other (specify) ▼  Transaction ID: SB29.5804  Transaction ID: SB29.5804  Amount of Each Disbursement  Other (specify) ▼  Transaction ID: SB29.5804  Amount of Each Disbursement  Other (specify) ▼  Transaction ID: SB29.5804  Amount of Each Disbursement this Period  Category  Type  Office Sought: Senate  President  State: OK District: 05  Full Name (Last, First, Middle Initial)  Date of Disbursement this Period  Category  Type  Other (specify) ▼  Date of Disbursement this Period  Category  Type  Date of Disbursement  Transaction ID: SB29.5846  Amount of Each Disbursement this Period  Category  Type  Date of Disbursement  Transaction ID: SB29.5846  Amount of Each Disbursement  Category  Type  Date of Disbursement  Transaction ID: SB29.5846  Amount of Each Disburse				on for the purpose of soliciting contributions		
Mailing Address 59877 E 333 Rd  City State Zip Code OK 74344  Purpose of Disbursement Contribution Candidate Name  Douglas Cox for State Representative - 2012  Mailing Address 59877 E 333 Rd  City State Zip Code OK 74344  Amount of Each Disbursement this Period Category' Type  Toul Name (Last, First, Middle Initial)  State: OK District OS  Full Name (Last, First, Middle Initial)  State: OK District OS  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code OK 74344  Purpose of Disbursement Contribution  Candidate Name  Douglas Cox for State Representative - 2012  Mailing Address  City State Zip Code OK 74344  Purpose of Disbursement Contribution  Candidate Name  Douglas Cox for State Representative - 2012  Senate President  State: OK District O5  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code Purpose of Disbursement  Category' Type  Date of Disbursement this Period Category' Type  Total Category' Type  Date of Disbursement this Period Category' Type  Disbursement  Category' Type  Disbursement this Period Category' Type  Disbursement  Category' Type  Disbursement  Category' Type  Disbursement  Category' Type  Disbursement  Disbursement  Category' Type  Disbursement  Category' Type  Disbursement  Disbursement  Category' Type  Disbursement  Disburse	, ,	OVERNMENT AFF	AIRS COM	MITTEE		
City Grove OK 74344  Purpose of Disbursement contribution Candidate Name Douglas Cox for State Representative - 2012  Mailing Address 59877 E 333 Rd  City State OK District: 05  Full Name (Last, First, Middle Initial)  Mailing Address City Senate President State: OK District: 05  Full Name (Last, First, Middle Initial)  Mailing Address City State Zip Code OK 74344  Primary General Disbursement to: 2012  Category/ Type  1000.00  Transaction ID: SB29.5804  Amount of Each Disbursement this Period Category/ Type  1000.00  Transaction ID: SB29.5804  Amount of Each Disbursement Category/ Type 1000.00  Transaction ID: SB29.5804  Amount of Each Disbursement this Period Category/ Type 1000.00  Transaction ID: SB29.5846  Amount of Each Disbursement this Period Category/ Type 1000.00  Transaction ID: SB29.5846  Amount of Each Disbursement this Period Category/ Type 1000.00  Transaction ID: SB29.5846  Amount of Each Disbursement this Period Category/ Type 1000.00  Transaction ID: SB29.5846  Amount of Each Disbursement this Period Category/ Type 1000.00  Transaction ID: SB29.5846  Amount of Each Disbursement this Period Category/ Type 1000.00  Transaction ID: SB29.5846  Amount of Each Disbursement this Period Category/ Type 1000.00  Transaction ID: SB29.5846  Amount of Each Disbursement this Period Category/ Type 1000.00  Transaction ID: SB29.5846  Amount of Each Disbursement this Period Category/ Type 1000.00  Transaction ID: SB29.5804  Amount of Each Disbursement this Period Category/ Type 1000.00  Transaction ID: SB29.5804  Transaction ID: SB29.5804  Amount of Each Disbursement this Period Category/ Type 1000.00  Transaction ID: SB29.5804  Transacti	_			5		
City State Zip Code OK 74344  City State Zip Code OK 74344  Amount of Each Disbursement this Period Category/ 1/1000.00  Citice Sought: House Disbursement For: 2012  Mailing Address 59877 E 333 Rd  City State Representative - 2012  Mailing Address 59877 E 333 Rd  City State Zip Code OK 74344  City State Zip Code OK 74344  City State Zip Code OK 74344  City State Representative - 2012  Category/ 1/1000.00  Category/ 1/1000.00  Date of Disbursement of 1 13 2012  Date of Disbursement Tot: 2012  Date of Disbursement Tot: 2012  Transaction ID: SB29.5846  Amount of Each Disbursement this Period Category/ 1/1000.00  Transaction ID: SB29.5846  Amount of Each Disbursement this Period Category/ 1/1000.00  Transaction ID: SB29.5846  Amount of Each Disbursement this Period Category/ 1/1000.00  Transaction ID: SB29.5846  Amount of Each Disbursement this Period Category/ 1/1000.00  Transaction ID: SB29.5846  Amount of Each Disbursement this Period Category/ 1/1000.00  Date of Disbursement this Period Category/ 1/1000.00  Date of Disbursement this Period Category/ 1/1000.00  Date of Disbursement Category/ 1/1000.00  Date of Disbursement this Period Category/ 1/1000.00  Date of Disbursement Category/ 1/1000.00  Date of Disbur	A. Douglas Cox for State Representat	ive - 2012				
Grove OK 74344 Purpose of Disbursement contribution Candidate Name Douglas Cox for State Representative - 2012 Office Sought:	Mailing Address 59877 E 333 Rd					
Grove of Disbursement contribution Candidate Name Douglas Cox for State Representative - 2012 Office Sought:				Transaction ID · SR29 5804		
contribution Candidate Name Douglas Cox for State Representative - 2012 Office Sought: State: OK District: 05 Full Name (Last, First, Middle Initial) Category/Type  Disbursement For: 2012 Primary General Other (specify) ▼  Date of Disbursement  Transaction ID: SB29.5846  Amount of Each Disbursement this Period Category/Type  Date of Disbursement  Transaction ID: SB29.5846  Amount of Each Disbursement  Other (specify) ▼  Transaction ID: SB29.5846  Amount of Each Disbursement  Other (specify) ▼  Transaction ID: SB29.5846  Amount of Each Disbursement  Other (specify) ▼  Date of Disbursement  Transaction ID: SB29.5846  Amount of Each Disbursement this Period Category/Type  Transaction ID: SB29.5846  Amount of Each Disbursement this Period Category/Type  Other (specify) ▼  Date of Disbursement this Period Category/Type  Office Sought: First, Middle Initial)  Date of Disbursement  Category/Type  Office Sought: President Candidate Name  Other (specify) ▼  Date of Disbursement this Period Category/Type  Office Sought: President Candidate Name  Office Sought: House President Candidate Name  Office Sought: President Candidate Name  Office Sought		OK 74344		Transaction ID . 0D23.3004		
Douglas Cox for State Representative - 2012  Office Sought: House Senate President Primary Other (specify) ▼  Full Name (Last, First, Middle Initial)  Douglas Cox for State Representative - 2012  Mailing Address 59877 E 333 Rd  City State Zip Code Grove OK 74344  Purpose of Disbursement Contribution  Candidate Name Douglas Cox for State Representative - 2012  Office Sought: House Senate President Primary General President State: District: 05  Full Name (Last, First, Middle Initial)  Date of Disbursement This Period Category/ Type  Date of Disbursement This Period Category/ Type  Date of Disbursement This Period Category/ Type  Transaction ID: \$829.5846  Amount of Each Disbursement this Period Category/ Type  Date of Disbursement this Period Category/ Type  Date of Disbursement this Period Category/ Type  Date of Disbursement This Period Category/ Type  Office Sought: House Senate President Primary General President Disbursement This Period Category/ Type  Office Sought: House Disbursement For: Senate President Disbursement For: Senate President Disbursement For: Disbursement This Period Category/ Type  Office Sought: House Disbursement For: Senate President Disbursement For: Disbursement This Period Category/ Type  Office Sought: House Disbursement For: Senate President Disbursement This Period Category/ Type  Office Sought: House Disbursement For: Senate President Disbursement This Period Category/ Type  Office Sought: House Disbursement For: Senate President Disbursement This Period Category/ Type  Office Sought: House Disbursement For: Senate President Disbursement This Page (optional)	contribution			Amount of Each Disbursement this Period		
Office Sought:		ive - 2012		1000.00		
Douglas Cox for State Representative - 2012  Mailing Address 59877 E 333 Rd  City State Zip Code Grove OK 74344  Purpose of Disbursement contribution  Candidate Name Douglas Cox for State Representative - 2012  Office Sought: House President State: OK District: 05  Full Name (Last, First, Middle Initial)  Candidate Name  Category/ Type  Office Sought: State: Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: State: Disbursement  Candidate Name  City State: Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Category/ Type  Office Sought: House Disbursement For: Category/ Type  Office Sought: House Disbursement For: Senate Primary General Category/ Type  Office Sought: House Disbursement For: Senate Primary General Category/ Type  Office Sought: President Senate Primary General Category/ Type  Office Sought: Possibursement For: Senate Primary General Category/ Type  Office Sought: Possibursement For: Senate Primary General Primary General Category/ Type  Other (specify) ▼  Subtotal of Disbursements This Page (optional)	Office Sought: House Disbursem Senate President	nent For: 2012 Primary General	Турс			
City State Zip Code Grove OK 74344  Purpose of Disbursement contribution  Candidate Name  Douglas Cox for State Representative - 2012  Office Sought: House Senate President State: OK District: 05  Full Name (Last, First, Middle Initial)  Category/ Type  Other (specify) ▼  Date of Disbursement  Category/ Type  Date of Disbursement  Category/ Type  Date of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General  Candidate Name  Category/ Type  Office Sought: House Primary General  Category/ Type  Office Sought: House Primary General  Other (specify) ▼  State: Disbursement For: Senate Primary General Other (specify) ▼  Substortal of Disbursements This Page (optional)	B. Douglas Cox for State Representat	ive - 2012		M = M / D = D / Y = Y = Y		
Grove OK 74344 Purpose of Disbursement contribution  Candidate Name  Douglas Cox for State Representative - 2012  Office Sought: House Senate President State: OK District: 05  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate President State: Disbursement For: Category/ Type  Office Sought: State Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify) Type  Office Sought: House Disbursement For: Senate Primary General Other (specify) Type  State: District: Disbursement For: Senate Primary General Other (specify) Type  State: District: Disbursements This Page (optional) 2000.00	Mailing Address 59877 E 333 Rd			01 13 2012		
Candidate Name  Douglas Cox for State Representative - 2012  Office Sought:				Transaction ID : SB29.5846		
Douglas Cox for State Representative - 2012  Office Sought:				Amount of Each Disbursement this Period		
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Candidate Name  Category/ Type  Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼  Subtrotal of Disbursements This Page (optional)	Purpose of Disbursement			Amount of Each Dishursement this Pariod		
Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼  SUBTOTAL of Disbursements This Page (optional)	Candidate Name			Amount of Each Dispursement this Feriod		
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