

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

OKLAHOMA INDEPENDENT PETROLEUM ASSOCIATION FEDERAL PAC (OIPA FEDERAL PAC)

ADDRESS (number and street) 500 N.E. 4th Street Suite 200 Oklahoma City OK 73104

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00444430

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

### 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)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2)
  - Mar 20 (M3)
  - Apr 20 (M4)
  - May 20 (M5)
  - Jun 20 (M6)
  - Jul 20 (M7)
  - Aug 20 (M8)
  - Sep 20 (M9)
  - Oct 20 (M10)
  - Nov 20 (M11) (Non-Election Year Only)
  - Dec 20 (M12) (Non-Election Year Only)
  - Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P)
  - General (12G)
  - Runoff (12R)
  - Convention (12C)
  - Special (12S)

Election on [MM] / [DD] / [YYYY] in the State of [ ]

- (d) 30-Day POST-Election Report for the:
- General (30G)
  - Runoff (30R)
  - Special (30S)

Election on [MM] / [DD] / [YYYY] in the State of [ ]

5. Covering Period [MM] / [DD] / [YYYY] 07 / 01 / 2015 through [MM] / [DD] / [YYYY] 12 / 31 / 2015

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 Mike Terry

Signature of Treasurer Mike Terry [Electronically Filed] Date 01 / 27 / 2016

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**OKLAHOMA INDEPENDENT PETROLEUM ASSOCIATION FEDERAL PAC (OIPA FEDERAL PAC)**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>	<input type="text" value="5333.41"/>	<input type="text" value="5333.41"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="8393.25"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="8256.05"/>	<input type="text" value="23759.87"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="16649.30"/>	<input type="text" value="29093.28"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="5589.18"/>	<input type="text" value="18033.16"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="11060.12"/>	<input type="text" value="11060.12"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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 INDEPENDENT PETROLEUM ASSOCIATION FEDERAL PAC (OIPA FEDERAL PAC)

Report Covering the Period: From: 07 / 01 / 2015 To: 12 / 31 / 2015

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		
(i) Itemized (use Schedule A).....	8250.00	23750.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	8250.00	23750.00
(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 Totals to Line 33, page 5) .....	8250.00	23750.00
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).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	6.05	9.87
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	8256.05	23759.87
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	8256.05	23759.87

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	1089.18	3633.16
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	1089.18	3633.16
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4500.00	14400.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (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	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
29. Other Disbursements .....	0.00	0.00
30. 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
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	5589.18	18033.16
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5589.18	18033.16

**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
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	8250.00	23750.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	8250.00	23750.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	1089.18	3633.16
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1089.18	3633.16

**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 6 OF 14
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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 INDEPENDENT PETROLEUM ASSOCIATION FEDERAL PAC (OIPA FEDERAL PAC)**

**A. Kevin Bourque**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15021 Katy Freeway  
 Ste 400  
 City Houston State TX Zip Code 77094  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Alta Mesa Holdings, LP Occupation VP of Exploration  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 07 / 2015  
**Transaction ID : SA11AI.5343**  
 Amount of Each Receipt this Period  
 1500.00  
 Contribution

**B. Lauren Burnett**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 500 NE 4th St  
 City Oklahoma City State OK Zip Code 73104  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer OIPA Occupation Events Director  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 05 / 2015  
**Transaction ID : SA11AI.5351**  
 Amount of Each Receipt this Period  
 250.00  
 Contribution

**C. Cory G Charlston**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 500 S 336th St  
 #111  
 City Federal Way State WA Zip Code 98003  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Westfall Gooden Occupation Oil  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 03 / 2015  
**Transaction ID : SA11AI.5326**  
 Amount of Each Receipt this Period  
 500.00  
 Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2250.00
<b>TOTAL</b> 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 7 OF 14
	<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 INDEPENDENT PETROLEUM ASSOCIATION FEDERAL PAC (OIPA FEDERAL PAC)**

Full Name (Last, First, Middle Initial) <b>A. Dave Deardeuff</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 05 / 2015 <b>Transaction ID : SA11AI.5352</b>
Mailing Address PO Box 25928		Amount of Each Receipt this Period 1000.00
City Oklahoma City	State OK	Zip Code 73125
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Insurica	Occupation Energy Practice Leader & Producer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Jeremy Fitzpatrick</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 26 / 2015 <b>Transaction ID : SA11AI.5369</b>
Mailing Address 1608 Avondale Cr		Amount of Each Receipt this Period 1000.00
City Edmond	State OK	Zip Code 73013
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Kirkpatrick Oil	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Michael McCabe</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 07 / 2015 <b>Transaction ID : SA11AI.5345</b>
Mailing Address 15021 Katy Freeway Ste 400		Amount of Each Receipt this Period 500.00
City Houston	State TX	Zip Code 77094
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer Alta Mesa Holdings, LP	Occupation VP/CFO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2500.00
<b>TOTAL</b> 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 8 OF 14  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**OKLAHOMA INDEPENDENT PETROLEUM ASSOCIATION FEDERAL PAC (OIPA FEDERAL PAC)**

**A. David McClure**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15021 Katy Freeway  
 Ste 400  
 City Houston State TX Zip Code 77094  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Alta Mesa Holdings, LP Occupation VP Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 07 / 2015  
**Transaction ID : SA11AI.5347**  
 Amount of Each Receipt this Period 500.00  
 Contribution

**B. Valerie Ann Mitchell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12925 N 68th W Ave  
 City Skiatook State OK Zip Code 74070  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Newfield Occupation VP Mid Continent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 08 / 19 / 2015  
**Transaction ID : SA11AI.5349**  
 Amount of Each Receipt this Period 2500.00  
 Contribution

**C. Travis Wilson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 376 W Main St  
 #238  
 City Norman State OK Zip Code 73072  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Primexx Energy Partners Occupation Exploration Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 03 / 2015  
**Transaction ID : SA11AI.5367**  
 Amount of Each Receipt this Period 500.00  
 Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	8250.00

**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 checked="" 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 type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OKLAHOMA INDEPENDENT PETROLEUM ASSOCIATION FEDERAL PAC (OIPA FEDERAL PAC)**

Full Name (Last, First, Middle Initial)

**A. BancFirst**

Mailing Address PO Box 26788

City Oklahoma City State OK Zip Code 73126-0788

Purpose of Disbursement  
Bank Charge

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 31 / 2015

**Transaction ID : SB21B.5335**

Amount of Each Disbursement this Period

28.60

Full Name (Last, First, Middle Initial)

**B. BancFirst**

Mailing Address PO Box 26788

City Oklahoma City State OK Zip Code 73126-0788

Purpose of Disbursement  
Bank Charge

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 31 / 2015

**Transaction ID : SB21B.5337**

Amount of Each Disbursement this Period

113.94

Full Name (Last, First, Middle Initial)

**C. BancFirst**

Mailing Address PO Box 26788

City Oklahoma City State OK Zip Code 73126-0788

Purpose of Disbursement  
Bank Charge

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2015

**Transaction ID : SB21B.5358**

Amount of Each Disbursement this Period

8.70

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

151.24

**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 checked="" 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 type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**OKLAHOMA INDEPENDENT PETROLEUM ASSOCIATION FEDERAL PAC (OIPA FEDERAL PAC)**

Full Name (Last, First, Middle Initial) <b>A. BancFirst</b>		Date of Disbursement MM / DD / YYYY 10 / 31 / 2015
Mailing Address PO Box 26788		<b>Transaction ID : SB21B.5360</b>
City Oklahoma City	State OK	
Purpose of Disbursement Bank Charge	Candidate Name	Amount of Each Disbursement this Period 31.30
Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. BancFirst</b>		Date of Disbursement MM / DD / YYYY 11 / 10 / 2015
Mailing Address PO Box 26788		<b>Transaction ID : SB21B.5361</b>
City Oklahoma City	State OK	
Purpose of Disbursement Merchant Fees	Candidate Name	Amount of Each Disbursement this Period 114.95
Category/Type 001		
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) <b>C. BancFirst</b>		Date of Disbursement MM / DD / YYYY 11 / 30 / 2015
Mailing Address PO Box 26788		<b>Transaction ID : SB21B.5362</b>
City Oklahoma City	State OK	
Purpose of Disbursement Bank Fee	Candidate Name	Amount of Each Disbursement this Period 1.33
Category/Type 001		
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).....▶	147.58
<b>TOTAL</b> 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 checked="" 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 type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**OKLAHOMA INDEPENDENT PETROLEUM ASSOCIATION FEDERAL PAC (OIPA FEDERAL PAC)**

Full Name (Last, First, Middle Initial)

**A. BancFirst**

Mailing Address PO Box 26788

City Oklahoma City State OK Zip Code 73126-0788

Purpose of Disbursement  
Merchant Fees

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.5363**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. BancFirst**

Mailing Address PO Box 26788

City Oklahoma City State OK Zip Code 73126-0788

Purpose of Disbursement  
Bank Fee

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.5364**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Professionals, LLC Campaign Technology**

Mailing Address 2601 NW Expressway Suite 503W

City Oklahoma City State OK Zip Code 73112

Purpose of Disbursement  
Ethics Reporting

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.5329**

Amount of Each Disbursement this Period

**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)

<input checked="" 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 type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**OKLAHOMA INDEPENDENT PETROLEUM ASSOCIATION FEDERAL PAC (OIPA FEDERAL PAC)**

Full Name (Last, First, Middle Initial)

**A. Professionals, LLC Campaign Technology**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2015

Mailing Address 2601 NW Expressway  
Suite 503W

City Oklahoma City State OK Zip Code 73112

**Transaction ID : SB21B.5341**

Purpose of Disbursement  
Ethics Reporting

001
Category/ Type

Amount of Each Disbursement this Period

180.00
--------

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/ Type

Amount of Each Disbursement this Period

--

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/ Type

Amount of Each Disbursement this Period

--

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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

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

180.00
--------

969.45
--------

**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 checked="" 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 type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**OKLAHOMA INDEPENDENT PETROLEUM ASSOCIATION FEDERAL PAC (OIPA FEDERAL PAC)**

Full Name (Last, First, Middle Initial)

**A. COLE FOR CONGRESS**

Mailing Address P.O. Box 722256

City Norman State OK Zip Code 73070

Purpose of Disbursement  
Contribution

011

Candidate Name  
**TOM COLE**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: OK District: 04

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			05			2015			

Transaction ID : **SB23.5342**

Amount of Each Disbursement this Period

1500.00
---------

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF JIM INHOFE COMMITTEE**

Mailing Address PO BOX 13300

City OKLAHOMA CITY State OK Zip Code 73113

Purpose of Disbursement  
Contribution

011

Candidate Name  
**Jim Inhofe**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
08			25			2015			

Transaction ID : **SB23.5330**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. HOEVEN FOR SENATE**

Mailing Address PO BOX 15114

City ARLINGTON State VA Zip Code 22215

Purpose of Disbursement  
Contribution

011

Candidate Name  
**John Hoeven**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: ND District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
08			04			2015			

Transaction ID : **SB23.5328**

Amount of Each Disbursement this Period

1000.00
---------

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

3500.00
---------

**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 checked="" 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 type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**OKLAHOMA INDEPENDENT PETROLEUM ASSOCIATION FEDERAL PAC (OIPA FEDERAL PAC)**

Full Name (Last, First, Middle Initial)

**A. SHELBY FOR U S SENATE**

Mailing Address PO BOX 1091

City TUSCALOOSA State AL Zip Code 35403

Purpose of Disbursement  
Contribution

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: AL District: 00

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB23.5338**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

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