

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines Oklahoma Leadership Council

ADDRESS (number and street) 4031 N. Lincoln Boulevard Check if different than previously reported. (ACC) Oklahoma City OK 73105

2. FEC IDENTIFICATION NUMBER C00167213 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special Election on 11 04 2008 in the State of

5. Covering Period 10 16 2008 through 11 24 2008

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 MELVIN H. GRAGG

Signature of Treasurer Electronically Filed by MELVIN H. GRAGG Date 02 03 2009

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

Table with 8 columns and 1 row for Office Use Only

FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Oklahoma Leadership Council

Report Covering the Period: From:

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		183067.74
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	190022.11									
(c) Total Receipts (from Line 19)	127976.16	589173.56								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	317998.27	772241.30								
7. Total Disbursements (from Line 31)	229378.17	683621.20								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	88620.10	88620.10								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Oklahoma Leadership Council

Report Covering the Period: From:

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	68631.36	357286.43
(i) Itemized (use Schedule A)		
(ii) Unitemized	13673.29	54671.15
(iii) TOTAL (add Lines 11(a)(i) and (ii)	82304.65	411957.58
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	16000.00	133600.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	98304.65	545557.58
12. Transfers From Affiliated/Other Party Committees	26000.00	26000.00
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	4525.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	3671.51	12177.98
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	913.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	913.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	127976.16	589173.56
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	127976.16	588260.56

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	4677.77	29500.11
(ii) Non-Federal Share.....	3528.89	47657.41
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	8206.66	77157.52
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	59.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	1000.00	1000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	1000.00	1059.00
29. Other Disbursements.....	0.00	520.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	220171.51	604884.68
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	220171.51	604884.68
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	229378.17	683621.20
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	225849.28	635963.79

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	98304.65	545557.58
34. Total Contribution Refunds (from Line 28(d))	1000.00	1059.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	97304.65	544498.58
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	4677.77	29500.11
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	4525.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	4677.77	24975.11

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 / 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.	Full Name (Last, First, Middle Initial) Dr. JANET BARRESI	Date of Receipt MM / DD / YYYY 10 / 26 / 2008
	Mailing Address 5600 GEORGETOWNE RD	Transaction ID: SA11AI.14139
	City State Zip Code EDMOND OK 73034	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	
Name of Employer SELF	Occupation DENTIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

B.	Full Name (Last, First, Middle Initial) SIDNEY BELKOV	Date of Receipt MM / DD / YYYY 11 / 14 / 2008
	Mailing Address 5005 E. ATLANTIC PLACE	Transaction ID: SA11AI.14191
	City State Zip Code DENVER CO 80222	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) FRANCIS J BOMHER	Date of Receipt MM / DD / YYYY 10 / 29 / 2008
	Mailing Address 828 S. GRANT STREET	Transaction ID: SA11AI.14166
	City State Zip Code HINSDALE IL 60521	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
Name of Employer GUARANTEE ASSOCIATED	Occupation ACCOUNTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	2550.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 7 / 68
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

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

Mailing Address 2400 ZION PARK

City State Zip Code
YUKON OK 73099

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIREED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 675.00

Date of Receipt MM / DD / YYYY
11 / 02 / 2008

Transaction ID: SA11AI.14388

Amount of Each Receipt this Period 25.00

B. Full Name (Last, First, Middle Initial)
MARSHALL S. BRACKIN

Mailing Address 2909 MCGEE DR

City State Zip Code
NORMAN OK 73072

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
ARROW SERVICES PETROLEUM ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt MM / DD / YYYY
10 / 26 / 2008

Transaction ID: SA11AI.14141

Amount of Each Receipt this Period 2000.00

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

Mailing Address 1776 K STREET NW

City State Zip Code
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
WILEY REIN ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt MM / DD / YYYY
10 / 28 / 2008

Transaction ID: SA11AI.14154

Amount of Each Receipt this Period 300.00

SUBTOTAL of Receipts This Page (optional) 2325.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 68
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A. Full Name (Last, First, Middle Initial)
BARRY BRYANT

Mailing Address 11200 OAK LEAF LANE

City State Zip Code
OKLAHOMA CITY OK 73131

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
MANGUM DRILLING OIL & GAS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt MM / DD / YYYY
10 / 21 / 2008

Transaction ID: SA11AI.14117

Amount of Each Receipt this Period 10000.00

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

Mailing Address 615 E. LOWRY ROAD

City State Zip Code
CLAREMORE OK 74017

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY
10 / 26 / 2008

Transaction ID: SA11AI.14142

Amount of Each Receipt this Period 1000.00

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

Mailing Address 3209 OVERLOOK RIDGE ROAD

City State Zip Code
PROSECT KY 40059

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
U.S. GOVERNMENT MANAGEMENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 6000.00

Date of Receipt MM / DD / YYYY
11 / 04 / 2008

Transaction ID: SA11AI.14184

Amount of Each Receipt this Period 6000.00

SUBTOTAL of Receipts This Page (optional) 17000.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 68
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.	Full Name (Last, First, Middle Initial) CHOCTAW NATION		Date of Receipt
	Mailing Address P.O. BOX 1210		<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	DURANT	OK	74702
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	Transaction ID: SA11AI.14112
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>	<input type="text" value="5000.00"/>

B.	Full Name (Last, First, Middle Initial) THOMAS S EVEREST		Date of Receipt
	Mailing Address 709 TOMAR ROAD		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	SIOUX FALLS	SD	57105
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer REQUESTED		Occupation REQUESTED	Transaction ID: SA11AI.14144
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="4000.00"/>	<input type="text" value="4000.00"/>

C.	Full Name (Last, First, Middle Initial) RANDY A. FOUTCH		Date of Receipt
	Mailing Address 8605 S. ELWOOD, B-124		<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	TULSA	OK	74132
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer SELF EMPLOYED		Occupation OIL & GAS	Transaction ID: SA11AI.14129
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>	<input type="text" value="1000.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="10000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A. Full Name (Last, First, Middle Initial)
TRACY FREENY

Mailing Address 3917 WILDMEADOW COURT

City EDMOND State OK Zip Code 73034

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

Name of Employer SELF Occupation INSURANCE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 22 / 2008

Transaction ID: SA11AI.14130

Amount of Each Receipt this Period 300.00

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

Mailing Address 351 KESTREL HOLLOW RD

City GUTHRY State OK Zip Code 73044

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

Name of Employer HAC, INC Occupation CONTROLLER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1760.00

Date of Receipt 10 / 24 / 2008

Transaction ID: SA11AI.14138

Amount of Each Receipt this Period 375.00

C. Full Name (Last, First, Middle Initial)
MR C. HUBERT GRAGG

Mailing Address 3333 NW 16TH STREET

City NEWCASTLE State OK Zip Code 73065

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

Name of Employer SELF Occupation OIL AND GAS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 21 / 2008

Transaction ID: SA11AI.14119

Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) ► 1675.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 68

(check only one)

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

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.

Full Name (Last, First, Middle Initial)
BROOKS HALL

Mailing Address 9225 LAKE HEFNER PARKWAY
SUITE 7

City State Zip Code
OKLAHOMA CITY OK 73120

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

Name of Employer Occupation
THE FRED JONES COMPANY VICE CHAIRMAN

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 8

Transaction ID: SA11AI.14186

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
FRED JONES HALL

Mailing Address 9225 LAKE HEFNER PARKWAY
SUITE 2

City State Zip Code
OKLAHOMA CITY OK 73120

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

Name of Employer Occupation
THE FRED JONES COMPANY CHAIRMAN

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 8

Transaction ID: SA11AI.14187

Amount of Each Receipt this Period
1000.00

C.

Full Name (Last, First, Middle Initial)
KIRKLAND HALL

Mailing Address 9225 LAKE HEFNER PARKWAY
SUITE 2

City State Zip Code
OKLAHOMA CITY OK 73120

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

Name of Employer Occupation
THE FRED JONES COMPANY VICE CHAIRMAN

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 8

Transaction ID: SA11AI.14188

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 12 / 68
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A. Full Name (Last, First, Middle Initial)
ERIC HARGAN

Mailing Address REQUESTED

City REQUESTED State OK Zip Code 73112

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 26 / 2008
Transaction ID: SA11AI.14146
 Amount of Each Receipt this Period: 500.00

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

Mailing Address 9500 CEADAR LAKE AVE

City OKLAHOMA CITY State OK Zip Code 73114

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 10 / 23 / 2008
Transaction ID: SA11AI.14134
 Amount of Each Receipt this Period: 2000.00

C. Full Name (Last, First, Middle Initial)
GWENN A HERTEL, Jr.

Mailing Address 20100 E. 32 PARKWAY #150

City AURORA State CO Zip Code 80011

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4600.00

Date of Receipt: 11 / 02 / 2008
Transaction ID: SA11AI.14182
 Amount of Each Receipt this Period: 4600.00

SUBTOTAL of Receipts This Page (optional) ► 7100.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 68

(check only one)

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

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.

Full Name (Last, First, Middle Initial)
JAMES H. HUTCHINSON

Mailing Address 5001 SUMMIT DRIVE

City State Zip Code
EDMOND OK 73034

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

Name of Employer Occupation
SELF OIL & GAS

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 2000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.14136

Amount of Each Receipt this Period

2000.00

B.

Full Name (Last, First, Middle Initial)
DAN L KIRBY

Mailing Address 2 RIVERVIEW HEIGHTS

City State Zip Code
SIOUX FALLS SD 57105

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

Name of Employer Occupation
KERBY FINANCIAL LLC INVESTOR

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 4000.00

Date of Receipt

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

Transaction ID: SA11AI.14156

Amount of Each Receipt this Period

4000.00

C.

Full Name (Last, First, Middle Initial)
BRUCE C LARSON

Mailing Address 555 W 58TH STREET

City State Zip Code
HINSDALE IL 60521

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

Name of Employer Occupation
LARSON EYE CENTER PHYSICIAN

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

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

Transaction ID: SA11AI.14170

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 68
(check only one)

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

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A. Full Name (Last, First, Middle Initial)
DAVID C MERCER

Mailing Address 11210 TWISTED OAK

City State Zip Code
OKLAHOMA CITY OK 73120

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

Name of Employer Occupation
MORGAN STANLEY FINANCIAL ADVISOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.14176

Amount of Each Receipt this Period
400.00

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

Mailing Address 3010 FLINTWOOD DRIVE

City State Zip Code
COLUMBUS IN 47203

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

Name of Employer Occupation
STUDENT STUDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 438.94

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.14120

Amount of Each Receipt this Period
438.94

C. Full Name (Last, First, Middle Initial)
NANCY R. PENNINGTON

Mailing Address 6711 N.W. GRAND BLVD

City State Zip Code
OKLAHOMA CITY OK 73116

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

Name of Employer Occupation
RADIOLOTY CONSULTANTS PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.14124

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1338.94**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.	Full Name (Last, First, Middle Initial) JAMES L PIERCE		Date of Receipt
	Mailing Address 4216 WHEELER AVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 6 / 2 0 0 8
	City	State	Zip Code
	ALEXANDRIA	VA	22304
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.14150
		Amount of Each Receipt this Period	<input type="text"/> 1500.00
Name of Employer REQUESTED		Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 1500.00

B.	Full Name (Last, First, Middle Initial) KENT PLASTER		Date of Receipt
	Mailing Address 1100 N. BITTERCREEK TERRACE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 1 / 2 0 0 8
	City	State	Zip Code
	MUSTANG	OK	73064
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.14125
		Amount of Each Receipt this Period	<input type="text"/> 2000.00
Name of Employer PLASTER & WALD		Occupation OILFIELD CONSULTING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 2000.00

C.	Full Name (Last, First, Middle Initial) RAY POTTS		Date of Receipt
	Mailing Address 100 N BROADWAY, #3200		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 2 / 2 0 0 8
	City	State	Zip Code
	OKLAHOMA CITY	OK	73102
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.14132
		Amount of Each Receipt this Period	<input type="text"/> 500.00
Name of Employer REQUESTED		Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 4000.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.	Full Name (Last, First, Middle Initial) JERRY RAY	Date of Receipt MM / DD / YYYY 10 / 21 / 2008
	Mailing Address 4750 HOBBY HORSE LANE	Transaction ID: SA11AI.14127
	City State Zip Code SKIATOOK OK 74070	Amount of Each Receipt this Period 30.42
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 243.36	

B.	Full Name (Last, First, Middle Initial) ARLENE ROUSE	Date of Receipt MM / DD / YYYY 10 / 21 / 2008
	Mailing Address 4655 E. 58TH STREET	Transaction ID: SA11AI.14128
	City State Zip Code TULSA OK 74135	Amount of Each Receipt this Period 31.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation DILLARDS SALES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 298.00	

C.	Full Name (Last, First, Middle Initial) ARLENE ROUSE	Date of Receipt MM / DD / YYYY 11 / 20 / 2008
	Mailing Address 4655 E. 58TH STREET	Transaction ID: SA11AI.14193
	City State Zip Code TULSA OK 74135	Amount of Each Receipt this Period 31.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation DILLARDS SALES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 329.00	

SUBTOTAL of Receipts This Page (optional)	▶	92.42
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A. Full Name (Last, First, Middle Initial)
RICHARD SIAS

Mailing Address 3900 S. BRYANT

City EDMOND State OK Zip Code 73013

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 10 / 31 / 2008
Transaction ID: SA11AI.14180
Amount of Each Receipt this Period: 2000.00

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

Mailing Address 1776 K STREET NW

City WASHINGTON State DC Zip Code 20006

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

Name of Employer WILEY REIN Occupation ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 28 / 2008
Transaction ID: SA11AI.14160
Amount of Each Receipt this Period: 300.00

C. Full Name (Last, First, Middle Initial)
ROY M TEEL, Jr.

Mailing Address 6967 S. 66TH AVE #B

City TULSA State OK Zip Code 74133

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 10 / 29 / 2008
Transaction ID: SA11AI.14172
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ► 3300.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 68
(check only one)

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

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.

Full Name (Last, First, Middle Initial)
DAVID TOPOL

Mailing Address 1776 K STREET NW

City State Zip Code
WASHINGTON DC 20006

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

Name of Employer Occupation
WILEY REIN ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.14162

Amount of Each Receipt this Period
750.00

B.

Full Name (Last, First, Middle Initial)
M. J. UPSHER

Mailing Address 9225 LAKE HEFNER PARKWAY #200

City State Zip Code
OKLAHOMA CITY OK 73120

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 6 / 2 0 0 8

Transaction ID: SA11AI.14189

Amount of Each Receipt this Period
1000.00

C.

Full Name (Last, First, Middle Initial)
MR LEW WARD

Mailing Address 900 BROOKSIDE

City State Zip Code
ENID OK 73703

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

Name of Employer Occupation
WARD PETROLEUM, INC PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.14133

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional) ▶ **6750.00**

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

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

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

FOR LINE NUMBER: PAGE 19 / 68
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A. Full Name (Last, First, Middle Initial)
DON A WHITTEN

Mailing Address 9229 LANSBROOK LANE

City State Zip Code
WARR ACRES OK 73132

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.14178

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
RICHARD E WILEY

Mailing Address 3818 N. WOODROW STREET

City State Zip Code
ARLINGTON VA 22207

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

Name of Employer Occupation
WILEY REIN ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.14164

Amount of Each Receipt this Period
1500.00

SUBTOTAL of Receipts This Page (optional) ► 2500.00

TOTAL This Period (last page this line number only) ► 68631.36

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 68
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

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

City State Zip Code
Oklahoma City OK 73172

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 22500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11C.14111

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
FUND FOR A CONSERVATIVE FUTURE
Mailing Address PO BOX 96

City State Zip Code
ALEXANDRIA VA 22313

FEC ID number of contributing federal political committee. **C** C00326082

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: SA11C.14109

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
KOCH INDUSTRIES PAC
Mailing Address 655 15TH STREET NW
SUITE 445

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00236489

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: SA11C.14105

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional) ► 11000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 21 / 68	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.	Full Name (Last, First, Middle Initial) NATIONAL ASSOCIATION OF CONVIENCE STORES PAC		Date of Receipt
	Mailing Address 1600 DUKE ST		<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	ALEXANDRIA	VA	22314
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
	Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	Transaction ID: SA11C.14110
			Amount of Each Receipt this Period <input type="text" value="5000.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="5000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="16000.00"/>

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

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

FOR LINE NUMBER: PAGE 22 / 68
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A. Full Name (Last, First, Middle Initial)
NORTHWEST OKLAHOMANS FOR HICKMAN 2008
 Mailing Address RR 1, BOX 7
 City State Zip Code
 DACINA OK 73731
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 0 / 2 0 0 8
Transaction ID: SA12.14103
 Amount of Each Receipt this Period
 1000.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

B. Full Name (Last, First, Middle Initial)
REPUBLICAN NATIONAL COMMITTEE
 Mailing Address 310 FIRST STREET S.E.
 City State Zip Code
 WASHINGTON DC 20003
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 3 / 2 0 0 8
Transaction ID: SA12.14107
 Amount of Each Receipt this Period
 25000.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 25000.00

SUBTOTAL of Receipts This Page (optional) ► **26000.00**
TOTAL This Period (last page this line number only) ► **26000.00**

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

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

FOR LINE NUMBER: PAGE 23 / 68
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

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

Mailing Address P.O. BOX 55500

City State Zip Code
OKLAHOMA CITY OK 73155

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
395.73

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 3 1 / 2 0 0 8

Transaction ID: SA17.14330

Amount of Each Receipt this Period
24.26

INTEREST INCOME ON ACCOUNT

B. Full Name (Last, First, Middle Initial)
CARTER COUNTY REPUBLICAN PARTY

Mailing Address 810 WOOD-N-CREEK

City State Zip Code
ARDMORE OK 73401

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
795.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 3 / 2 0 0 8

Transaction ID: SA17.14091

Amount of Each Receipt this Period
175.00

REIMBURSE FOR THEIR SHARE OF YARD SIGNS

C. Full Name (Last, First, Middle Initial)
CARTER COUNTY REPUBLICAN PARTY

Mailing Address 810 WOOD-N-CREEK

City State Zip Code
ARDMORE OK 73401

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
870.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 3 0 / 2 0 0 8

Transaction ID: SA17.14099

Amount of Each Receipt this Period
75.00

REIMBURSE FOR THEIR SHARE OF YARD SIGNS

SUBTOTAL of Receipts This Page (optional) ► **274.26**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 68
(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A. Full Name (Last, First, Middle Initial)
CHEROKEE COUNTY REPUBLICAN COMMITTEE

Mailing Address 2415 DIFFEE DRIVE

City State Zip Code
TAHLEQUAH OK 74179

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
MM / DD / YYYY
10 / 27 / 2008

Transaction ID: SA17.14095

Amount of Each Receipt this Period
750.00

REIMBURSE FOR THEIR SHARE OF YARD SIGNS

B. Full Name (Last, First, Middle Initial)
CHEROKEE COUNTY REPUBLICAN COMMITTEE

Mailing Address 2415 DIFFEE DRIVE

City State Zip Code
TAHLEQUAH OK 74179

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1689.00

Date of Receipt
MM / DD / YYYY
11 / 21 / 2008

Transaction ID: SA17.14100

Amount of Each Receipt this Period
939.00

REIMBURSE FOR THEIR SHARE OF YARD SIGNS

C. Full Name (Last, First, Middle Initial)
CLEVELAND COUNTY REPUBLICAN PARTY

Mailing Address 615 24TH AVE SW

City State Zip Code
NORMAN OK 73069

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2250.00

Date of Receipt
MM / DD / YYYY
10 / 20 / 2008

Transaction ID: SA17.14087

Amount of Each Receipt this Period
175.00

REIMBURSE FOR THEIR SHARE OF YARD SIGNS

SUBTOTAL of Receipts This Page (optional) ► **1864.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 68
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

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

City State Zip Code
NORMAN OK 73069

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2437.50

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 2 4 / 2 0 0 8
Transaction ID: SA17.14092
 Amount of Each Receipt this Period
 187.50
 REIMBURSE FOR THEIR SHARE OF YARD SIGNS

B. Full Name (Last, First, Middle Initial)
CRAIG COUNTY REPUBLICAN PARTY
Mailing Address P.O. BOX 243

City State Zip Code
VINITA OK 74301

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 1 7 / 2 0 0 8
Transaction ID: SA17.14097
 Amount of Each Receipt this Period
 250.00
 REIMBURSE FOR THEIR SHARE OF YARD SIGNS

C. Full Name (Last, First, Middle Initial)
EDMOND REPUBLICAN WOMEN
Mailing Address 4242 ST. CROIX DR

City State Zip Code
EDMOND OK 73003

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 2 2 / 2 0 0 8
Transaction ID: SA17.14089
 Amount of Each Receipt this Period
 500.00
 REIMBURSE FOR THEIR SHARE OF YARD SIGNS

SUBTOTAL of Receipts This Page (optional) ► 937.50

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

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

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

FOR LINE NUMBER: PAGE 26 / 68
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A. Full Name (Last, First, Middle Initial)
KAY COUNTY REPUBLICAN PARTY
Mailing Address P.O. BOX 2271

City State Zip Code
PONCA CITY OK 74602

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 1 7 / 2 0 0 8
Transaction ID: SA17.14086
 Amount of Each Receipt this Period
 225.00
 REIMBURSE FOR THEIR SHARE OF YARD SIGNS

B. Full Name (Last, First, Middle Initial)
POTTAWATOMIE COUNTY REPUBLICAN PARYT
Mailing Address 13 GILPIN

City State Zip Code
SHAWNEE OK 74801

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
311.50

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 1 6 / 2 0 0 8
Transaction ID: SA17.14085
 Amount of Each Receipt this Period
 159.00
 REIMBURSE FOR THEIR SHARE OF YARD SIGNS

C. Full Name (Last, First, Middle Initial)
POTTAWATOMIE COUNTY REPUBLICAN PARYT
Mailing Address 13 GILPIN

City State Zip Code
SHAWNEE OK 74801

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
395.25

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 3 1 / 2 0 0 8
Transaction ID: SA17.14093
 Amount of Each Receipt this Period
 83.75
 REIMBURSE FOR THEIR SHARE OF YARD SIGNS

SUBTOTAL of Receipts This Page (optional) ► **467.75**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 68
	(check only one)
<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.	Full Name (Last, First, Middle Initial) STEPHENS COUNTY REPUBLICAN PARTY		Date of Receipt
	Mailing Address P.O. BOX 382		<input type="text" value="10"/> / <input type="text" value="21"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	MARLOW	OK	73055
	FEC ID number of contributing federal political committee.		Transaction ID: SA17.14088
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For:		Aggregate Year-to-Date ▼	<input type="text" value="39.00"/>
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="289.00"/>	REIMBURSE FOR THEIR SHARE OF YARD SIGNS
<input type="checkbox"/> Other (specify) ▼			

B.	Full Name (Last, First, Middle Initial) STEPHENS COUNTY REPUBLICAN PARTY		Date of Receipt
	Mailing Address P.O. BOX 382		<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	MARLOW	OK	73055
	FEC ID number of contributing federal political committee.		Transaction ID: SA17.14090
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For:		Aggregate Year-to-Date ▼	<input type="text" value="39.00"/>
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="328.00"/>	REIMBURSE FOR THEIR SHARE OF YARD SIGNS
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="78.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="3621.51"/>

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

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

FOR LINE NUMBER:
(check only one)

PAGE 28 / 68

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

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.

Full Name (Last, First, Middle Initial)
OKLAHOMA CITY REPUBLICAN WOMENS CLUB

Transaction ID: SB28C.14323

Date of Disbursement

Mailing Address 7737 GREEN MEADOWS

^M 1	^M 0	/	^D 2	^D 1	/	^Y 2	^Y 0	^Y 0	^Y 8
----------------	----------------	---	----------------	----------------	---	----------------	----------------	----------------	----------------

City OKLAHOMA CITY State OK Zip Code 73132

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
REFUND OF 10-9-08 DEPOSIT

--

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

1000.00

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

1000.00

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

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.	Full Name (Last, First, Middle Initial) AARON COOPER, LLC	Transaction ID: SB30B.14294
	Mailing Address 10213 BUCCANEER DR	Date of Disbursement MM / DD / YYYY 11 / 05 / 2008
	City OKLAHOMA CITY State OK Zip Code 73159	Amount of Each Disbursement this Period 935.00
	Purpose of Disbursement PROFESSIONAL FEE - PRESS RELEASES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ARVEST BANK	Transaction ID: SB30B.14246
	Mailing Address P.O. BOX 55500	Date of Disbursement MM / DD / YYYY 10 / 17 / 2008
	City OKLAHOMA CITY State OK Zip Code 73155	Amount of Each Disbursement this Period 992.80
	Purpose of Disbursement FEDERAL PAYROLL TAX DEPOSIT	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) ARVEST BANK	Transaction ID: SB30B.14217
	Mailing Address P.O. BOX 55500	Date of Disbursement MM / DD / YYYY 10 / 30 / 2008
	City OKLAHOMA CITY State OK Zip Code 73155	Amount of Each Disbursement this Period 6588.20
	Purpose of Disbursement DEBIT CARDS FOR VOLUNTEERS FOOD IN CO.	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	8516.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 30 / 68

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

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.	Full Name (Last, First, Middle Initial) ARVEST BANK Mailing Address P.O. BOX 55500 City OKLAHOMA CITY State OK Zip Code 73155 Purpose of Disbursement BANK SERVICE CHARGE - WIRE TRANSFER FEE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.14243 Date of Disbursement 10 / 30 / 2008 Amount of Each Disbursement this Period 16.00
B.	Full Name (Last, First, Middle Initial) ARVEST BANK Mailing Address P.O. BOX 55500 City OKLAHOMA CITY State OK Zip Code 73155 Purpose of Disbursement FEDERAL PAYROLL TAX DEPOSIT Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.14267 Date of Disbursement 10 / 31 / 2008 Amount of Each Disbursement this Period 1104.98
C.	Full Name (Last, First, Middle Initial) ARVEST BANK Mailing Address P.O. BOX 55500 City OKLAHOMA CITY State OK Zip Code 73155 Purpose of Disbursement CASH FOR MEAL MONEY FOR VOLUNTEERS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.14321 Date of Disbursement 11 / 03 / 2008 Amount of Each Disbursement this Period 500.00

SUBTOTAL of Disbursements This Page (optional) ▶	1620.98
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.	Full Name (Last, First, Middle Initial) BAGS, INC	Transaction ID: SB30B.14209
	Mailing Address 1500 N. SOONER RD	Date of Disbursement 10 / 20 / 2008
	City OKLAHOMA CITY State OK Zip Code 73141	Amount of Each Disbursement this Period 6489.56
	Purpose of Disbursement YARD SIGNS	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) BAGS, INC	Transaction ID: SB30B.14254
	Mailing Address 1500 N. SOONER RD	Date of Disbursement 10 / 27 / 2008
	City OKLAHOMA CITY State OK Zip Code 73141	Amount of Each Disbursement this Period 70.07
	Purpose of Disbursement YARD SIGNS	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) BAGS, INC	Transaction ID: SB30B.14216
	Mailing Address 1500 N. SOONER RD	Date of Disbursement 10 / 30 / 2008
	City OKLAHOMA CITY State OK Zip Code 73141	Amount of Each Disbursement this Period 501.27
	Purpose of Disbursement YARD SIGNS	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	7060.90
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A. Full Name (Last, First, Middle Initial) BANKCARD OPERATIONS Mailing Address PO BXO 24990 City TULSA State OK Zip Code 73124 Purpose of Disbursement CREDIT CARD PAYMENT Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.14211 Date of Disbursement 10 / 22 / 2008
	Amount of Each Disbursement this Period 6269.01

B. Full Name (Last, First, Middle Initial) BANKCARD OPERATIONS Mailing Address PO BXO 24990 City TULSA State OK Zip Code 73124 Purpose of Disbursement CREDIT CARD PROCESSING FEE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.14391 Date of Disbursement 11 / 03 / 2008
	Amount of Each Disbursement this Period 422.40

C. Full Name (Last, First, Middle Initial) BANKCARD OPERATIONS Mailing Address PO BXO 24990 City TULSA State OK Zip Code 73124 Purpose of Disbursement CREDIT CARD PAYMENT - TRAVEL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.14235 Date of Disbursement 11 / 21 / 2008
	Amount of Each Disbursement this Period 3718.09

SUBTOTAL of Disbursements This Page (optional) ▶	10409.50
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.	Full Name (Last, First, Middle Initial) BANK OF AMERICA	Transaction ID: SB30B.14231
	Mailing Address P.O. BOX 15019	Date of Disbursement MM / DD / YYYY 11 / 06 / 2008
	City WILMINGTON State DE Zip Code 19986	Amount of Each Disbursement this Period 17357.47
	Purpose of Disbursement CREDIT CARD PAYMENT - AIRFARE TO CO.	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) BENNETT'S DECAL & LABEL	Transaction ID: SB30B.14210
	Mailing Address 18 NE 48TH STREET	Date of Disbursement MM / DD / YYYY 10 / 22 / 2008
	City OKLAHOMA CITY State OK Zip Code 73105	Amount of Each Disbursement this Period 855.95
	Purpose of Disbursement BUMPER STICKERS	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) RENDON CHAMBERS	Transaction ID: SB30B.14261
	Mailing Address 2332 ROCKWOOD LANE	Date of Disbursement MM / DD / YYYY 10 / 17 / 2008
	City NORMAN State OK Zip Code 73071	Amount of Each Disbursement this Period 598.59
	Purpose of Disbursement NET PAYROLL - STAFF WAGES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	18812.01
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.	Full Name (Last, First, Middle Initial) RENDON CHAMBERS	Transaction ID: SB30B.14286 Date of Disbursement
	Mailing Address 2332 ROCKWOOD LANE	<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City NORMAN State OK Zip Code 73071	Amount of Each Disbursement this Period
	Purpose of Disbursement REIMBURSE FOR STAFF TRAVEL	<input type="text" value="25.28"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) RENDON CHAMBERS	Transaction ID: SB30B.14297 Date of Disbursement
	Mailing Address 2332 ROCKWOOD LANE	<input type="text" value="11"/> / <input type="text" value="11"/> / <input type="text" value="2008"/>
	City NORMAN State OK Zip Code 73071	Amount of Each Disbursement this Period
	Purpose of Disbursement STAFF COMPENSATION	<input type="text" value="90.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) RENDON CHAMBERS	Transaction ID: SB30B.14269 Date of Disbursement
	Mailing Address 2332 ROCKWOOD LANE	<input type="text" value="11"/> / <input type="text" value="14"/> / <input type="text" value="2008"/>
	City NORMAN State OK Zip Code 73071	Amount of Each Disbursement this Period
	Purpose of Disbursement NET PAYROLL - STAFF WAGES	<input type="text" value="193.66"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="308.94"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

<p>A. Full Name (Last, First, Middle Initial) CARISSA DARLING</p> <p>Mailing Address 808 SW 15TH STREET #203</p> <p>City MOORE State OK Zip Code 73160</p> <p>Purpose of Disbursement REIMBURSE STAFF TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.14249</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="182.32"/></p>
<p>B. Full Name (Last, First, Middle Initial) CARISSA DARLING</p> <p>Mailing Address 808 SW 15TH STREET #203</p> <p>City MOORE State OK Zip Code 73160</p> <p>Purpose of Disbursement NET PAYROLL - STAFF WAGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.14255</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1334.13"/></p>
<p>C. Full Name (Last, First, Middle Initial) CARISSA DARLING</p> <p>Mailing Address 808 SW 15TH STREET #203</p> <p>City MOORE State OK Zip Code 73160</p> <p>Purpose of Disbursement REIMBURSE FOR STAFF TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.14279</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="184.54"/></p>

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

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

<p>A.</p> <p>Full Name (Last, First, Middle Initial) CARISSA DARLING</p> <p>Mailing Address 808 SW 15TH STREET #203</p> <p>City MOORE State OK Zip Code 73160</p> <p>Purpose of Disbursement NET PAYROLL - STAFF WAGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.14263</p> <p>Date of Disbursement 10 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 1334.14</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) CARISSA DARLING</p> <p>Mailing Address 808 SW 15TH STREET #203</p> <p>City MOORE State OK Zip Code 73160</p> <p>Purpose of Disbursement NET PAYROLL - STAFF WAGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.14287</p> <p>Date of Disbursement 11 / 03 / 2008</p> <p>Amount of Each Disbursement this Period 353.10</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) CARISSA DARLING</p> <p>Mailing Address 808 SW 15TH STREET #203</p> <p>City MOORE State OK Zip Code 73160</p> <p>Purpose of Disbursement NET PAYROLL - STAFF WAGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.14270</p> <p>Date of Disbursement 11 / 14 / 2008</p> <p>Amount of Each Disbursement this Period 1334.13</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3021.37

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.	Full Name (Last, First, Middle Initial) CARISSA DARLING	Transaction ID: SB30B.14303
	Mailing Address 808 SW 15TH STREET #203	Date of Disbursement MM / DD / YYYY 11 / 14 / 2008
	City MOORE State OK Zip Code 73160	Amount of Each Disbursement this Period 142.43
	Purpose of Disbursement REIMBURSE FOR STAFF TRAVEL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) DIALING SERVICES, INC	Transaction ID: SB30B.14253
	Mailing Address 5149 COTTON RD	Date of Disbursement MM / DD / YYYY 10 / 22 / 2008
	City ROSWELL State NM Zip Code 88201	Amount of Each Disbursement this Period 4178.49
	Purpose of Disbursement AUTO. CALLS - GET OUT THE VOTE PROGRAM	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) DIALING SERVICES, INC	Transaction ID: SB30B.14275
	Mailing Address 5149 COTTON RD	Date of Disbursement MM / DD / YYYY 10 / 27 / 2008
	City ROSWELL State NM Zip Code 88201	Amount of Each Disbursement this Period 272.60
	Purpose of Disbursement AUTO CALLS - GET OUT VOTE PROGRAM	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	4593.52
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 38 / 68

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

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.	Full Name (Last, First, Middle Initial) DIALING SERVICES, INC	Transaction ID: SB30B.14277
	Mailing Address 5149 COTTON RD	Date of Disbursement 10 / 28 / 2008
	City ROSWELL State NM Zip Code 88201	Amount of Each Disbursement this Period 4319.52
	Purpose of Disbursement AUTO CALLS - GET OUT VOTE PROGRAM	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) DIALING SERVICES, INC	Transaction ID: SB30B.14291
	Mailing Address 5149 COTTON RD	Date of Disbursement 11 / 03 / 2008
	City ROSWELL State NM Zip Code 88201	Amount of Each Disbursement this Period 4057.42
	Purpose of Disbursement AUTO CALLS - GET OUT THE VOTE	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) HILTON GARDEN INN	Transaction ID: SB30B.14222
	Mailing Address 7675 E. UNION AVE	Date of Disbursement 10 / 31 / 2008
	City DENVER State CO Zip Code 80237	Amount of Each Disbursement this Period 17000.00
	Purpose of Disbursement LODGING FOR VOLUNTEERS IN COLORADO	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	25376.94
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

<p>A. Full Name (Last, First, Middle Initial) GARY JONES</p> <p>Mailing Address 20237 SW TINNEY RD</p> <p>City CACHE State OK Zip Code 73527</p> <p>Purpose of Disbursement REIMBURSE STAFF TRAVEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.14234</p> <p>Date of Disbursement 11 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 2106.60</p>
<p>B. Full Name (Last, First, Middle Initial) MAJORITY STRATEGIES</p> <p>Mailing Address 135 PROFESSIONAL AVE, #104</p> <p>City POINTE VERA BEACH State FL Zip Code 32087</p> <p>Purpose of Disbursement POSTAGE & HANDLING OF GET OUT VOTE MAIL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.14252</p> <p>Date of Disbursement 10 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 76309.36</p>
<p>C. Full Name (Last, First, Middle Initial) PATRICK MOIR</p> <p>Mailing Address 2000 CANYON BREEZE DRIVE</p> <p>City LAS VEGAS State NV Zip Code 89134</p> <p>Purpose of Disbursement COMMUNICATION PLANNING & DIRECTION</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.14250</p> <p>Date of Disbursement 10 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 1250.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

79665.96

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.

Full Name (Last, First, Middle Initial)
PATRICK MOIR

Transaction ID: SB30B.14276
Date of Disbursement

Mailing Address 2000 CANYON BREEZE DRIVE

/ /

City LAS VEGAS State NV Zip Code 89134

Amount of Each Disbursement this Period

Purpose of Disbursement
COMMUNICATION PLANNING & DIRECTION

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

B.

Full Name (Last, First, Middle Initial)
PATRICK MOIR

Transaction ID: SB30B.14233
Date of Disbursement

Mailing Address 2000 CANYON BREEZE DRIVE

/ /

City LAS VEGAS State NV Zip Code 89134

Amount of Each Disbursement this Period

Purpose of Disbursement
REIMBURSE STAFF TRAVEL

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

C.

Full Name (Last, First, Middle Initial)
PATRICK MOIR

Transaction ID: SB30B.14296
Date of Disbursement

Mailing Address 2000 CANYON BREEZE DRIVE

/ /

City LAS VEGAS State NV Zip Code 89134

Amount of Each Disbursement this Period

Purpose of Disbursement
COMMUNICATION PLANNING & DIRECTION

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.	Full Name (Last, First, Middle Initial) OKLAHOMA CITY MARRIOTT HOTEL	Transaction ID: SB30B.14289
	Mailing Address 3233 NW EXPRESSWAY	Date of Disbursement MM / DD / YYYY 11 / 03 / 2008
	City OKLAHOMA CITY State OK Zip Code 73112	Amount of Each Disbursement this Period 7648.78
	Purpose of Disbursement MEETING ROOM RENTAL - WATCH PARTY	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) OKLAHOMA COUNTY REPUBLICAN PARTY	Transaction ID: SB30B.14215
	Mailing Address 4031 N. LINCOLN BLVD	Date of Disbursement MM / DD / YYYY 10 / 27 / 2008
	City OKLAHOMA CITY State OK Zip Code 73105	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement REIMBURSEMENT FOR PRINTING TEE-SHIRTS	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) OKLAHOMA TAX COMMISSION	Transaction ID: SB30B.14268
	Mailing Address P.O. BOX 26880	Date of Disbursement MM / DD / YYYY 11 / 14 / 2008
	City OKLAHOMA CITY State OK Zip Code 73147	Amount of Each Disbursement this Period 436.00
	Purpose of Disbursement STATE PAYROLL TAX DEPOSIT	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	10584.78
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.	Full Name (Last, First, Middle Initial) OKLAHOMA TAX COMMISSION	Transaction ID: SB30B.14274 Date of Disbursement 11 / 14 / 2008	
	Mailing Address P.O. BOX 26880		
	City OKLAHOMA CITY State OK Zip Code 73147	Amount of Each Disbursement this Period	742.28
	Purpose of Disbursement STATE PAYROLL TAX DEPOSIT		
	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.	Full Name (Last, First, Middle Initial) ONE TOUCH DIRECT, L.L.C.	Transaction ID: SB30B.14241 Date of Disbursement 10 / 30 / 2008	
	Mailing Address 4902 W. SLITH AVE		
	City TAMPA State FL Zip Code 33634	Amount of Each Disbursement this Period	15000.00
	Purpose of Disbursement GET OUT THE VOTE - TELEPHONE CALLS		
	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:		
C.	Full Name (Last, First, Middle Initial) JACOB A PARSONS	Transaction ID: SB30B.14256 Date of Disbursement 10 / 17 / 2008	
	Mailing Address 200 CLASSEN BLVD #3117		
	City NORMAN State OK Zip Code 73071	Amount of Each Disbursement this Period	500.22
	Purpose of Disbursement NET PAYROLL - STAFF WAGES		
	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:		

SUBTOTAL of Disbursements This Page (optional) ▶

16242.50

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.	Full Name (Last, First, Middle Initial) ANNE PATTERSON	Transaction ID: SB30B.14257 Date of Disbursement
	Mailing Address 6831 E 47TH STEET	<input type="text" value="10"/> <input type="text" value="17"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City TULSA State OK Zip Code 73160	Amount of Each Disbursement this Period
	Purpose of Disbursement NET PAYROLL - STAFF WAGES	<input type="text" value="957.75"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ANNE PATTERSON	Transaction ID: SB30B.14280 Date of Disbursement
	Mailing Address 6831 E 47TH STEET	<input type="text" value="10"/> <input type="text" value="29"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City TULSA State OK Zip Code 73160	Amount of Each Disbursement this Period
	Purpose of Disbursement REIMBURSE FOR STAFF TRAVEL	<input type="text" value="261.73"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) ANNE PATTERSON	Transaction ID: SB30B.14264 Date of Disbursement
	Mailing Address 6831 E 47TH STEET	<input type="text" value="10"/> <input type="text" value="31"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City TULSA State OK Zip Code 73160	Amount of Each Disbursement this Period
	Purpose of Disbursement NET PAYROLL - STAFF WAGES	<input type="text" value="957.75"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2177.23"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A. Full Name (Last, First, Middle Initial) ANNE PATTERSON <hr/> Mailing Address 6831 E 47TH STEET <hr/> City TULSA State OK Zip Code 73160 <hr/> Purpose of Disbursement REIMBURSE FOR STAFF TRAVEL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.14283 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 8
	Amount of Each Disbursement this Period 242.53
B. Full Name (Last, First, Middle Initial) ANNE PATTERSON <hr/> Mailing Address 6831 E 47TH STEET <hr/> City TULSA State OK Zip Code 73160 <hr/> Purpose of Disbursement NET PAYROLL - STAFF WAGES Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.14271 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 8
	Amount of Each Disbursement this Period 957.75
C. Full Name (Last, First, Middle Initial) ROBERT JOSH PELLOW <hr/> Mailing Address 1001 E. BROOKS AVE <hr/> City STILLWATER State OK Zip Code 74075 <hr/> Purpose of Disbursement NET PAYROLL - STAFF WAGES Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.14260 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 8
	Amount of Each Disbursement this Period 753.39

SUBTOTAL of Disbursements This Page (optional)	▶	1953.67
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A. Full Name (Last, First, Middle Initial) ROBERT JOSH PELLOW <hr/> Mailing Address 1001 E. BROOKS AVE <hr/> City STILLWATER State OK Zip Code 74075 <hr/> Purpose of Disbursement NET PAYROLL - STAFF WAGES Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.14266 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 8
	Amount of Each Disbursement this Period 753.38
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) ROBERT JOSH PELLOW <hr/> Mailing Address 1001 E. BROOKS AVE <hr/> City STILLWATER State OK Zip Code 74075 <hr/> Purpose of Disbursement NET PAYROLL - STAFF WAGES Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.14273 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 8
	Amount of Each Disbursement this Period 170.48
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) JEFFREY J PETERS <hr/> Mailing Address 404 HUNTERS GLEN COURT <hr/> City MOORE State OK Zip Code 73160 <hr/> Purpose of Disbursement NET PAYROLL - STAFF WAGES Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.14258 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 8
	Amount of Each Disbursement this Period 319.41
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1243.27
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.	Full Name (Last, First, Middle Initial) JEFFREY J PETERS	Transaction ID: SB30B.14265 Date of Disbursement
	Mailing Address 404 HUNTERS GLEN COURT	<input type="text" value="10"/> <input type="text" value="31"/> / <input type="text" value="2008"/>
	City MOORE State OK Zip Code 73160	Amount of Each Disbursement this Period
	Purpose of Disbursement NET PAYROLL - STAFF WAGES	<input type="text" value="375.05"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) JEFFREY J PETERS	Transaction ID: SB30B.14272 Date of Disbursement
	Mailing Address 404 HUNTERS GLEN COURT	<input type="text" value="11"/> <input type="text" value="14"/> / <input type="text" value="2008"/>
	City MOORE State OK Zip Code 73160	Amount of Each Disbursement this Period
	Purpose of Disbursement NET PAYROLL - STAFF WAGES	<input type="text" value="297.34"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) JEFFREY J PETERS	Transaction ID: SB30B.14302 Date of Disbursement
	Mailing Address 404 HUNTERS GLEN COURT	<input type="text" value="11"/> <input type="text" value="14"/> / <input type="text" value="2008"/>
	City MOORE State OK Zip Code 73160	Amount of Each Disbursement this Period
	Purpose of Disbursement REIMBURSE FOR STAFF TRAVEL	<input type="text" value="67.97"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="740.36"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.	Full Name (Last, First, Middle Initial) ROBERT J PILLOW	Transaction ID: SB30B.14285 Date of Disbursement 10 / 31 / 2008
	Mailing Address 1001 EAST BROOKS AVE	Amount of Each Disbursement this Period 128.88
	City STILLWATER State OK Zip Code 74075	
	Purpose of Disbursement REIMBURSE FOR STAFF TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PINPOINT CONSULTANTS	Transaction ID: SB30B.14247 Date of Disbursement 10 / 16 / 2008
	Mailing Address 8622 E. 98TH PLACE	Amount of Each Disbursement this Period 2500.00
	City TULSA State OK Zip Code 74133	
	Purpose of Disbursement WEBSITE MAINTENANCE & STRATEGIC PLANNING	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) PINPOINT CONSULTANTS	Transaction ID: SB30B.14248 Date of Disbursement 10 / 16 / 2008
	Mailing Address 8622 E. 98TH PLACE	Amount of Each Disbursement this Period 63.94
	City TULSA State OK Zip Code 74133	
	Purpose of Disbursement REIMBURSE OF STAFF TRAVEL	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2692.82
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.	Full Name (Last, First, Middle Initial) PINPOINT CONSULTANTS	Transaction ID: SB30B.14278 Date of Disbursement
	Mailing Address 8622 E. 98TH PLACE	<input type="text" value="10"/> <input type="text" value="29"/> / <input type="text" value="2008"/>
	City TULSA State OK Zip Code 74133	Amount of Each Disbursement this Period
	Purpose of Disbursement REIMBURSE STAFF TRAVEL	<input type="text" value="449.35"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PINPOINT CONSULTANTS	Transaction ID: SB30B.14288 Date of Disbursement
	Mailing Address 8622 E. 98TH PLACE	<input type="text" value="11"/> <input type="text" value="03"/> / <input type="text" value="2008"/>
	City TULSA State OK Zip Code 74133	Amount of Each Disbursement this Period
	Purpose of Disbursement WEBSITE MAINTENANCE & STRATEGIC PLANNING	<input type="text" value="2500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) PINPOINT CONSULTANTS	Transaction ID: SB30B.14298 Date of Disbursement
	Mailing Address 8622 E. 98TH PLACE	<input type="text" value="11"/> <input type="text" value="14"/> / <input type="text" value="2008"/>
	City TULSA State OK Zip Code 74133	Amount of Each Disbursement this Period
	Purpose of Disbursement WEBSITE MAINTENANCE & STRATEGIC PLANNING	<input type="text" value="2500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="5449.35"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.	Full Name (Last, First, Middle Initial) PAULA PORTER	Transaction ID: SB30B.14244 Date of Disbursement 11 / 04 / 2008
	Mailing Address REQUESTED	Amount of Each Disbursement this Period 226.42
	City OKLAHOMA CITY State OK Zip Code 73104	
	Purpose of Disbursement REIMBURSE OF STAFF TRAVEL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) PRECISION PUNCH	Transaction ID: SB30B.14218 Date of Disbursement 10 / 31 / 2008
	Mailing Address 2116 CASTLE ROCK	Amount of Each Disbursement this Period 288.00
	City EDMOND State OK Zip Code 73034	
	Purpose of Disbursement PRINTING TEE-SHIRTS FOR STAFF Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) REX PUBLIC RELATIONS LLC	Transaction ID: SB30B.14214 Date of Disbursement 10 / 24 / 2008
	Mailing Address 401 S. BOSTON AVENUE SUITE 105	Amount of Each Disbursement this Period 1000.00
	City TULSA State OK Zip Code 74103	
	Purpose of Disbursement PROFESSIONAL SERVICES - PUBLIC RELATIONS Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

1514.42

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.	Full Name (Last, First, Middle Initial) BOB REYNOLDS Mailing Address 12601 WAGONWHEEL RD City EDMOND OK State OK Zip Code 73083 Purpose of Disbursement REIMBURSEMENT FOR STAFF TRAVEL 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:	Transaction ID: SB30B.14228 Date of Disbursement 11 / 05 / 2008 Amount of Each Disbursement this Period 229.73
B.	Full Name (Last, First, Middle Initial) SIGNS INC Mailing Address 200 SE 3RD STREET City OKLAHOMA CITY State OK Zip Code 73129 Purpose of Disbursement YARD SIGNS 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:	Transaction ID: SB30B.14230 Date of Disbursement 11 / 06 / 2008 Amount of Each Disbursement this Period 875.65
C.	Full Name (Last, First, Middle Initial) STEPHENS COUNTY REPUBLICAN PARTY Mailing Address P.O. BOX 382 City MARLOW State OK Zip Code 73055 Purpose of Disbursement REIMBURSE FOR STAFF COMPENSATION 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:	Transaction ID: SB30B.14295 Date of Disbursement 11 / 05 / 2008 Amount of Each Disbursement this Period 1750.00

SUBTOTAL of Disbursements This Page (optional) ▶	2855.38
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A.	Full Name (Last, First, Middle Initial) TOM PRINCE	Transaction ID: SB30B.14224 Date of Disbursement 11 / 03 / 2008
	Mailing Address PO BOX 2911	Amount of Each Disbursement this Period 5000.00
	City EDMOND State OK Zip Code 73083	
	Purpose of Disbursement PROFESSIONAL SERVICES - LEGAL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) TOM PRINCE	Transaction ID: SB30B.14304 Date of Disbursement 11 / 17 / 2008
	Mailing Address PO BOX 2911	Amount of Each Disbursement this Period 2137.96
	City EDMOND State OK Zip Code 73083	
	Purpose of Disbursement PROFESSIONAL FEES - LEGAL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) U.S. CELLULAR	Transaction ID: SB30B.14251 Date of Disbursement 10 / 22 / 2008
	Mailing Address P.O. 650684	Amount of Each Disbursement this Period 1203.90
	City DALLAS State TX Zip Code 75265	
	Purpose of Disbursement TELEPHONE SERVICE	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	8341.86
TOTAL This Period (last page this line number only)	

**SCHEDULE H2 (FEC Form 3X)
ALLOCATION RATIOS**

NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

**RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT
ACTIVITIES APPEARING ON THIS REPORT.**

Methods of allocation :

- I. FUNDRAISING activities are allocated using the 'funds received method' where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.
For PACs Only : Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

<p>ACTIVITY OR EVENT IDENTIFIER DIRECT MAIL (01/01/2001)</p> <hr/> <p>ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS: <input type="checkbox"/> New <input checked="" type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported</p>	<p>FEDERAL %</p> <p style="text-align: center; border: 1px solid black; padding: 2px;">75.00%</p>	<p>NONFEDERAL %</p> <p style="text-align: center; border: 1px solid black; padding: 2px;">25.00%</p> <p>Transaction ID: H2.14239</p>
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**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A. Full Name (Last, First, Middle Initial) ARVEST BANK			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. BOX 55500			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: center;">68972.75</div>	
City OKLAHOMA CITY	State OK	Zip Code 73155	Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; text-align: center;">10 / 30 / 2008</div>	
Purpose of Disbursement: BANK SERVICE CHARGE				
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.88		14.01		21.89

B. Full Name (Last, First, Middle Initial) DEWEY BARTLETT FOUNDATION			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 3545 NW 58TH #820			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: center;">69972.75</div>	
City OKLAHOMA CITY	State OK	Zip Code 73112	Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; text-align: center;">11 / 11 / 2008</div>	
Purpose of Disbursement: OFFICE RENT				
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
360.00		640.00		1000.00

C. Full Name (Last, First, Middle Initial) EUREKA WATER			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. BOX 26730			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: center;">70021.25</div>	
City OKLAHOMA CITY	State OK	Zip Code 73126	Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; text-align: center;">11 / 14 / 2008</div>	
Purpose of Disbursement: OFFICE SUPPLIES				
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.46		31.04		48.50

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
385.34		685.05		1070.39

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A. Full Name (Last, First, Middle Initial) ALLIED WASTE SERVICES			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. BOX 78829			Allocated Activity or Event Year-To-Date 70086.00		
City PHOENIZ	State AZ	Zip Code 85062	Date <input type="text" value="11"/> / <input type="text" value="14"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: TRASH SERVICE			Transaction ID: H4.14197		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="23.31"/>		<input type="text" value="41.44"/>		<input type="text" value="64.75"/>

B. Full Name (Last, First, Middle Initial) CITY OF OKC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 200 NORTH WALKER			Allocated Activity or Event Year-To-Date 70110.79		
City OKLAHOMA CITY	State OK	Zip Code 73102	Date <input type="text" value="11"/> / <input type="text" value="14"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: UTILITIES - WATER & SEWER			Transaction ID: H4.14198		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="8.92"/>		<input type="text" value="15.87"/>		<input type="text" value="24.79"/>

C. Full Name (Last, First, Middle Initial) OKLAHOMA NATURAL GAS CO			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. BOX 268826			Allocated Activity or Event Year-To-Date 70226.89		
City OKLAHOMA CITY	State OK	Zip Code 73126	Date <input type="text" value="11"/> / <input type="text" value="14"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: UTILITIES - NATURAL GAS			Transaction ID: H4.14199		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="41.80"/>		<input type="text" value="74.30"/>		<input type="text" value="116.10"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="74.03"/>		<input type="text" value="131.61"/>		<input type="text" value="205.64"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A. Full Name (Last, First, Middle Initial) BRUCE A PARKER			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 745 EAST STEED DRIVE			Allocated Activity or Event Year-To-Date 70574.39		
City MIDWEST CITY	State OK	Zip Code 73110	Date MM / DD / YYYY 11 / 18 / 2008		
Purpose of Disbursement: BUILDING ELECTRICAL REPAIRS			Transaction ID: H4.14200		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
125.10		222.40		347.50

B. Full Name (Last, First, Middle Initial) KIMBERLY NGUYEN			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 8300 S. INDEPENDENCE AVE			Allocated Activity or Event Year-To-Date 70624.39		
City OKLAHOMA CITY	State OK	Zip Code 73159	Date MM / DD / YYYY 11 / 19 / 2008		
Purpose of Disbursement: JANITORIAL SERVICE			Transaction ID: H4.14202		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.00		32.00		50.00

C. Full Name (Last, First, Middle Initial) O.G.&E			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. BOX 26040			Allocated Activity or Event Year-To-Date 71123.23		
City OKLAHOMA CITY	State OK	Zip Code 73126	Date MM / DD / YYYY 11 / 21 / 2008		
Purpose of Disbursement: UTILITIES - ELECTRIC			Transaction ID: H4.14203		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
179.58		319.26		498.84

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
322.68		573.66		896.34

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A. Full Name (Last, First, Middle Initial)
OKLAHOMA OFFICE SYSTEMS, INC

Mailing Address
33 N. MERIDIAN AVE

City	State	Zip Code
OKLAHOMA CITY	OK	73107

Purpose of Disbursement:
OFFICE EQUIPMENT RENT AND REPAIRS

Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
72019.22

Date / /

Transaction ID: H4.14204

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
322.56		573.43		895.99

B. Full Name (Last, First, Middle Initial)
CPI OFFICE PRODUCTS

Mailing Address
P.O. BOX 59109

City	State	Zip Code
DALLAS	TX	75229

Purpose of Disbursement:
OFFICE SUPPLIES

Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
72127.57

Date / /

Transaction ID: H4.14205

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
39.01		69.34		108.35

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

Mailing Address
210 PARK AVE

City	State	Zip Code
OKLAHOMA CITY	OK	73102

Purpose of Disbursement:
TELEPHONE & INTERNET SERVICE

Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
72738.63

Date / /

Transaction ID: H4.14206

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
219.98		391.08		611.06

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
581.55		1033.85		1615.40

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A. Full Name (Last, First, Middle Initial)
DIRECT MAIL SYSTEMS, INC

Mailing Address
12450 AUTOMOBILE BLVE

City	State	Zip Code
CLEARWATER	FL	34622

Purpose of Disbursement:
DIRECT MAIL

Activity or Event Identifier:
DIRECT MAIL(01/01/2001)

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4418.89

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	7	/	2	0	0	8

Transaction ID: H4.14240

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3314.17		1104.72		4418.89

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3314.17		1104.72		4418.89

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
4677.77	3528.89	8206.66

SCHEDULE L (FEC Form 3X)

AGGREGATION PAGE: LEVIN FUNDS

Transaction ID: SL.14324

NAME OF COMMITTEE (In Full) Oklahoma Leadership Council
NAME OF ACCOUNT OKLAHOMA LEADERSHIP LEVIN ACCOUNT

	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
a. Itemized..... (Use Schedule L-A)	0.00	11591.95
b. Unitemized.....	0.00	200.00
c. Total.....	0.00	11791.95
2. OTHER RECEIPTS.....	2.27	29.08
3. TOTAL RECEIPTS..... (Add Lines 1c and 2)	2.27	11821.03
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
a. Voter Registration.....	0.00	0.00
b. Voter ID.....	0.00	0.00
c. GOTV.....	0.00	0.00
d. Generic Campaign.....	0.00	0.00
e. Total.....	0.00	0.00
5. OTHER DISBURSEMENTS.....	0.00	18444.69
6. TOTAL DISBURSEMENTS..... (Add Lines 4e and 5)	0.00	18444.69
7. BEGINNING CASH ON HAND..... (for Column B, use cash as of January 1st)	18910.98	7097.68
8. RECEIPTS..... (from Line 3)	2.27	11821.03
9. SUBTOTAL..... (Add Lines 7 and 8)	18913.25	18918.71
10. DISBURSEMENTS..... (From Line 6)	0.00	18444.69
11. ENDING CASH ON HAND..... (Subtract Line 10 From Line 9)	18913.25	474.02

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

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

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

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

Full Name (Last, First, Middle Initial) A. ARVEST BANK			Transaction ID: SASL2.14325	
Mailing Address P.O. BOX 55500			Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 8	
City OKLAHOMA CITY	State OK	Zip Code 73155	Amount of Each Receipt this Period 2.27	
Name of Employer or Principal Place of Business			Aggregate Year-to-Date 26.81	
Occupation			Account: 12678	
Full Name (Last, First, Middle Initial) B. ARVEST BANK			Transaction ID: SASL2.14329	
Mailing Address P.O. BOX 55500			Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 8	
City OKLAHOMA CITY	State OK	Zip Code 73155	Amount of Each Receipt this Period 2.27	
Name of Employer or Principal Place of Business			Aggregate Year-to-Date 29.08	
Occupation			Account: 12678	

SUBTOTAL of Receipts This Page (optional)	4.54
TOTAL This Period (last page this line number only)	4.54

**SCHEDULE L-B (FEC Form 3X)
ITEMIZED DISBURSEMENTS
OF LEVIN FUNDS**

Use separate schedule(s) for each category of the Aggregation Page	FOR LINE NUMBER: (check only one)		PAGE 61 / 68
	<input type="checkbox"/> 4a	<input type="checkbox"/> 4c	<input checked="" type="checkbox"/> 5
	<input type="checkbox"/> 4b	<input type="checkbox"/> 4d	

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NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A. Full Name (Last, First, Middle Initial) / Full Organization Name ALLEGIANT MARKETING GROUP	Transaction ID: SBSL5.14327																			
	Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	0		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y											
1	0		3	0		2	0	0	8											
Mailing Address 13916 N. HARVEY AVE	Amount of Each Disbursement this Period <table border="1"> <tr> <td>18441.50</td> </tr> </table>	18441.50																		
18441.50																				
City State Zip Code OKLAHOMA CITY OK 73013	Account:																			
Purpose of Disbursement INDEPENDENT MAILING EXPENDITURE																				

SUBTOTAL of Disbursements This Page (optional)	▶	18441.50
TOTAL This Period (last page this line number only)	▶	18441.50

SCHEDULE L (FEC Form 3X)**AGGREGATION PAGE: LEVIN FUNDS**

Transaction ID: SL.14326

NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

NAME OF ACCOUNT
OKLAHOMA LEADERSHIP LEVIN ACCOUNT

	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
a. Itemized..... (Use Schedule L-A)	0.00	11591.95
b. Unitemized.....	0.00	200.00
c. Total.....	0.00	11791.95
2. OTHER RECEIPTS.....	2.27	29.08
3. TOTAL RECEIPTS..... (Add Lines 1c and 2)	2.27	11821.03
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
a. Voter Registration.....	0.00	0.00
b. Voter ID.....	0.00	0.00
c. GOTV.....	0.00	0.00
d. Generic Campaign.....	0.00	0.00
e. Total.....	0.00	0.00
5. OTHER DISBURSEMENTS.....	18441.50	18444.69
6. TOTAL DISBURSEMENTS..... (Add Lines 4e and 5)	18441.50	18444.69
7. BEGINNING CASH ON HAND..... (for Column B, use cash as of January 1st)	18910.98	7097.68
8. RECEIPTS..... (from Line 3)	2.27	11821.03
9. SUBTOTAL..... (Add Lines 7 and 8)	18913.25	18918.71
10. DISBURSEMENTS..... (From Line 6)	18441.50	18444.69
11. ENDING CASH ON HAND..... (Subtract Line 10 From Line 9)	471.75	474.02

Image# 29932135645

Form/Schedule: **F3XA**

Transaction ID:

THIS AMENDED REPORT IS SUBMITTED TO REPORT AN UNREPORTED CONTRIBUTION, AND TO REPORT TS.

Form/Schedule: **SA11AI**

Transaction ID: **SA11AI.14388**

ADDED PER AMENDED REPORT.

Image# 29932135646

Form/Schedule: **SA12**

Transaction ID: **SA12.14103**

FUNDS WERE DEPOSITED IN ERROR INTO FEDERAL ACCOUNT. UPON DISCOVERY ON 12-2-08, THE FUNDS WERE TRANSFERRED TO THE PROPER STATE ACCOUNT. WHILE IN THE FEDERAL ACCOUNT, NONE OF THE FUNDS WERE USED FOR THE FEDERAL CANDIDATE. AT ALL TIMES THE COMMITTEE HAD SUFFICIENT FEDERAL ACCEPTABLE FUNDS TO COVER THE

Form/Schedule: **SB30B**

Transaction ID: **SB30B.14211**

CREDIT CARD PAYMENT AS FOLLOWS - FOUR POINTS HOTEL MINNEAPOLIS MN - HOTEL AT CONVENTION MINNEAPOLIS MN - HOTEL AT COMVENTION \$677.01; DAY TOURS AND CREATIVE BUS SHORELINE MN \$400.00; TRANSPORTATION AT CONVENTION

Image# 29932135647

Form/Schedule: **SB30B**
Transaction ID: **SB30B.14391**

ON THE ORIGINAL REPORT, THE BANKCARD OPERATIONS CREDIT CARD PROCESSING FEE WAS OMITTED FROM THE REPORT

Form/Schedule: **SB30B**
Transaction ID: **SB30B.14235**

CREDIT CARD PAYMENT AS FOLLOWS - FRONTIER AIRLINES -- STAFF TRAVEL TO CONVENTION \$3841.44
MINNEAPOLIS MN CREDIT \$200.00; TRAVEL GUARD GROUP STEVENS POINT WI, GROUND TRANSPORTATION

Image# 29932135648

Form/Schedule: **SB30B**
Transaction ID: **SB30B.14231**

CREDIT CARD PAYMENT - VOLUNTEER AIRFAIR TO COLORADO -- SOUTHWEST AIRLINES 17357.47

Form/Schedule: **SB30B**
Transaction ID: **SB30B.14250**

PATRICK MOIR SERVED ON THE PARTY'S STAFF ASSISTING THE CHAIRMAN MAINTAINING AND UPDATING THE PARTY'S WEBSITE. IN ADDITION HE PREPARED PRESS RELEASES FOR THE CHAIRMAN. THE PRESS RELEASES WERE PARAGRAPHS OF SUPPORT OR ATTACK ANY FEDERAL CANDIDATE. THIS MEMO TEXT ADDED WITH THE AMENDED REPORT.

Image# 29932135649

Form/Schedule: **SB30B**

Transaction ID: **SB30B.14276**

PATRICK MOIR SERVED ON THE PARTY'S STAFF ASSISTING THE CHAIRMAN IN MAINTAINING AND UPDA
IN ADDITION HE PREPARED PRESS RELEASES FOR THE CHAIRMAN. THE PRESS RELEASES WERE PAR
SUPPORT OR ATTACK ANY FEDERAL CANDIDATE. THIS MEMO TEXT WAS ADDED WITH THE AMENDED

Form/Schedule: **SB30B**

Transaction ID: **SB30B.14296**

PATRICK MOIR WERVED ON THE PARTY'S STAFF ASSISTING THE CHAIRMAN IN MAINTAINING AND UPDA
TE. IN ADDITION HE PREPARED PRESS RELEASES FOR THE CHAIRMAN. THE PRESS RELEASES WERE I
NOT SUPPORT OR ATTACK ANY FEDERAL CANDIDATE. THIS MEMO TEXT WAS ADDED WITH THE AMEN

Image# 29932135650

Form/Schedule: **SB30B**
Transaction ID: **SB30B.14218**

ADDRESS ADDED. ALSO THE DISCRIPTION WAS CHANGED FROM BINDING HANDOUT MATERIALS TO P
STAFF. THIS MEMO TEXT WAS ADDED ON THE AMENDED REPORT.

Form/Schedule: **SB30B**
Transaction ID: **SB30B.14295**

REIMBURSE FOR STAFF WAGES AS FOLLOWS: KIM CHAPMAN 9413 NE SPENCER RD ELGIN OK \$100; TA
ENCER RD ELGIN OK \$100; ASHLEY CHAPMAN 9413 NE SPENCER RD, ELGIN OK \$100; MATTHEW CHAPM
ELGIN OK \$50; ANDREW KNOTTEK 1911 N. 5TH STREET DUNCAN OK \$150; BARBARA BLACK RR 3 BOX 18
EL BLACK RR 3 BOX 181 MARLOW OK \$400; HOPE SUTTERFIELD RR 4 BOX 235B DUNCAN OK \$100; TALIT
BOX 235B DUNCAN OK \$100; BETHANY SUTTERFIELD RR4 BOX 235B DUNCAN OK \$100; NATHANIAL SUTT
DUNCAN OK \$100; JOSIAH HARWELL RR 3 BOX 164-1 COMANCHE OK \$50; BRANDON TRUEBLOOD RR3 B
ANDREW SMITH RR1 BOX 27 DUNCAN OK \$100; ABBY SMITH RR1 BOX 27 DUNCAN \$100; AMOS SMITH RR
