

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

ADDRESS (number and street) PO Box 452123  
 Check if different than previously reported. (ACC) Grove OK 74345

2. **FEC IDENTIFICATION NUMBER** C C00557686 CITY STATE ZIP CODE STATE DISTRICT  
3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A) OK 02

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on M M / D D / Y Y Y Y in the State of    
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on M M / D D / Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y 01 / 01 / 2014 through M M / D D / Y Y Y Y 03 / 31 / 2014

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

Type or Print Name of Treasurer Mr. John Raymond Farris

Signature of Treasurer Mr. John Raymond Farris [Electronically Filed] Date M M / D D / Y Y Y Y 05 / 08 / 2014

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Robertson For Congress**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	17865.00	17865.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	17865.00	17865.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	10469.36	10469.36
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	10469.36	10469.36
8. Cash on Hand at Close of Reporting Period (from Line 27).....	11095.64	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	5000.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Robertson For Congress**

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2014 To: M M / D D / Y Y Y Y 03 / 31 / 2014

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	16400.00	16400.00
(ii) Unitemized.....	1465.00	1465.00
(iii) TOTAL of contributions from individuals ▶	17865.00	17865.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	17865.00	17865.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	5000.00	5000.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	5000.00	5000.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	22865.00	22865.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	10469.36	10469.36
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	1300.00	1300.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	11769.36	11769.36

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	22865.00
25. SUBTOTAL (add Line 23 and Line 24).....	22865.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	11769.36
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	11095.64

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 20
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Robertson For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ms Nancy Brown**

Mailing Address P.O. Box 145

City Southwest City State OK Zip Code 64863

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

Name of Employer Self Employed Occupation Farmer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 17 / 2014

**Transaction ID : SA11AI.4127**

Amount of Each Receipt this Period  
 1000.00

Check

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Stan Crawford**

Mailing Address 2603 1/2 Thompson Rd

City Grove State OK Zip Code 74344

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

Name of Employer Self Occupation Dentist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 25 / 2014

**Transaction ID : SA11AI.4119**

Amount of Each Receipt this Period  
 500.00

Check

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Justin Dodson**

Mailing Address 446445 E 90 Road

City Welch State OK Zip Code 74369

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

Name of Employer Self Employed Occupation Farmer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 24 / 2014

**Transaction ID : SA11AI.4133**

Amount of Each Receipt this Period  
 1000.00

Check

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 20
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Robertson For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Jesse Drain**

Mailing Address 248 SE 23 Street

City Moore State OK Zip Code 73160

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

Name of Employer Self Employed Occupation Oil Field Supply

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 21 / 2014

**Transaction ID : SA11AI.4141**

Amount of Each Receipt this Period  
 2600.00

Check

**B.** Full Name (Last, First, Middle Initial)  
**Michael Drain**

Mailing Address 22428 Bryant Ave.

City Purcell State OK Zip Code 73080

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

Name of Employer Self Employed Occupation Oil Field Supply

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 28 / 2014

**Transaction ID : SA11AI.4143**

Amount of Each Receipt this Period  
 2600.00

Check

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Misty Drain**

Mailing Address 22428 Bryant Ave.

City Purcell State OK Zip Code 73080

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

Name of Employer Self Employed Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 28 / 2014

**Transaction ID : SA11AI.4145**

Amount of Each Receipt this Period  
 2600.00

Check

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

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

7800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 20
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Robertson For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Craig Harper**

Mailing Address 7117 Lighthouse Ln

City State Zip Code  
Grove OK 74344

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

Name of Employer Occupation  
Self Contractor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 25 2014

**Transaction ID : SA11AI.4105**

Amount of Each Receipt this Period  
250.00

Check

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Allan Head**

Mailing Address 105 Emerald Rd.

City State Zip Code  
Pryor OK 74361

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

Name of Employer Occupation  
Self Employed Business Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 25 2014

**Transaction ID : SA11AI.4151**

Amount of Each Receipt this Period  
1000.00

Check

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Stephen Holly**

Mailing Address P.O. Box 234

City State Zip Code  
Southwest City MO 64863

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

Name of Employer Occupation  
Self Employed Farmer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 25 2014

**Transaction ID : SA11AI.4153**

Amount of Each Receipt this Period  
1000.00

Check

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 20
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Robertson For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. David Jones**

Mailing Address 305 S Cherokee Dr.

City State Zip Code  
Bernice OK 74331

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

Name of Employer Occupation  
Logan & Lowery Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 06 / 2014

**Transaction ID : SA11AI.4139**

Amount of Each Receipt this Period  
500.00

Check

**B.** Full Name (Last, First, Middle Initial)  
**Ronald Lay**

Mailing Address 2900 E Hwy 10

City State Zip Code  
Grove OK 74344

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

Name of Employer Occupation  
Pride Plating, Inc President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 31 / 2014

**Transaction ID : SA11AI.4201**

Amount of Each Receipt this Period  
1000.00

Credit Card

**C.** Full Name (Last, First, Middle Initial)  
**Ronald Lay**

Mailing Address 2900 E Hwy 10

City State Zip Code  
Grove OK 74344

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

Name of Employer Occupation  
Pride Plating, Inc President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 31 / 2014

**Transaction ID : SA11AI.4203**

Amount of Each Receipt this Period  
1000.00

Credit Card

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

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

2500.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 20
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Robertson For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**James Mansour**

Mailing Address P.O. Box 8009

City: Newport Beach State: CA Zip Code: 92658

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

Name of Employer: UIG Occupation: Businessman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 03 / 30 / 2014

**Transaction ID : SA11AI.4199**

Amount of Each Receipt this Period: 500.00

Credit Card

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Darrell Spillers**

Mailing Address PO Box 646

City: Southwest City State: MO Zip Code: 64863

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

Name of Employer: Self Occupation: Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 300.00

Date of Receipt: 02 / 25 / 2014

**Transaction ID : SA11AI.4117**

Amount of Each Receipt this Period: 300.00

Check

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Curtiss Tate**

Mailing Address 2104 Hwy. 59 N

City: Grove State: OK Zip Code: 74344

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

Name of Employer: Self Employed Occupation: Business Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 300.00

Date of Receipt: 03 / 14 / 2014

**Transaction ID : SA11AI.4135**

Amount of Each Receipt this Period: 300.00

Check

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

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

1100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 20
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Robertson For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Larry Vancuren**

Mailing Address P.O. Box 156

City Southwest City State MO Zip Code 64863

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

Name of Employer Conerstone Bank Occupation Officer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 21 / 2014**

**Transaction ID : SA11Al.4131**

Amount of Each Receipt this Period  
**250.00**

Money Order

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

**250.00**

**16400.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 20
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Robertson For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Grand Savings Bank**

Mailing Address PO Box 451809

City State Zip Code  
Grove OK 74345

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 21 / 2014

**Transaction ID : SA13B.4214**

Amount of Each Receipt this Period  
5000.00

LOC

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

5000.00

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 20			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)  
**Robertson For Congress**

Full Name (Last, First, Middle Initial) <b>A. Apperson, Hoguen</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2014
Mailing Address 33000 S 690 Rd		Amount of Each Disbursement this Period 450.00 <b>Transaction ID : SB17.4168</b>
City Jay State OK Zip Code 74346	Purpose of Disbursement Payroll Category/Type 001	
Candidate Name <b>Robertson For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK District: 02		

Full Name (Last, First, Middle Initial) <b>B. Apperson, Hoguen</b>		Date of Disbursement MM / DD / YYYY 03 / 05 / 2014
Mailing Address 33000 S 690 Rd		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.4178</b>
City Jay State OK Zip Code 74346	Purpose of Disbursement Expense Reimbursement Category/Type 002	
Candidate Name <b>Robertson For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK District: 02		

Full Name (Last, First, Middle Initial) <b>c. Apperson, Hoguen</b>		Date of Disbursement MM / DD / YYYY 03 / 06 / 2014
Mailing Address 33000 S 690 Rd		Amount of Each Disbursement this Period 385.97 <b>Transaction ID : SB17.4187</b>
City Jay State OK Zip Code 74346	Purpose of Disbursement Payroll Category/Type 001	
Candidate Name <b>Robertson For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK District: 02		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1335.97
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 20			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)  
**Robertson For Congress**

Full Name (Last, First, Middle Initial) <b>A. Apperson, Hoguen</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address 33000 S 690 Rd		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.4172</b>
City Jay State OK Zip Code 74346	Purpose of Disbursement Expense Reimbursements Category/Type 002	
Candidate Name <b>Robertson For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK District: 02		

Full Name (Last, First, Middle Initial) <b>B. Apperson, Hoguen</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2014
Mailing Address 33000 S 690 Rd		Amount of Each Disbursement this Period 150.00 <b>Transaction ID : SB17.4175</b>
City Jay State OK Zip Code 74346	Purpose of Disbursement Expense Reimbursements Category/Type 002	
Candidate Name <b>Robertson For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK District: 02		

Full Name (Last, First, Middle Initial) <b>c. Apperson, Hoguen</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 33000 S 690 Rd		Amount of Each Disbursement this Period 385.97 <b>Transaction ID : SB17.4179</b>
City Jay State OK Zip Code 74346	Purpose of Disbursement Payroll Category/Type	
Candidate Name <b>Robertson For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK District: 02		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1035.97
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 20			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)  
**Robertson For Congress**

Full Name (Last, First, Middle Initial) <b>A. Apperson, Hoguen</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 33000 S 690 Rd		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.4181</b>
City Jay State OK Zip Code 74346	Purpose of Disbursement Expense Reimbursement Category/Type 002	
Candidate Name <b>Robertson For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK District: 02		

Full Name (Last, First, Middle Initial) <b>B. Dashelle D'Ann Real Estate</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address 414 E 3rd Street		Amount of Each Disbursement this Period 700.00 <b>Transaction ID : SB17.4170</b>
City Grove State OK Zip Code 74344	Purpose of Disbursement Rent Category/Type 001	
Candidate Name <b>Robertson For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK District: 02		

Full Name (Last, First, Middle Initial) <b>c. Heather Fink Photography</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2014
Mailing Address 414 E 3rd Street		Amount of Each Disbursement this Period 268.56 <b>Transaction ID : SB17.4166</b>
City Grove State OK Zip Code 74344	Purpose of Disbursement Photos for the Web Category/Type 006	
Candidate Name <b>Robertson For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK District: 02		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1468.56
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 20			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)  
**Robertson For Congress**

Full Name (Last, First, Middle Initial) <b>A. Cameron J Price</b>		Date of Disbursement MM / DD / YYYY 03 / 06 / 2014
Mailing Address 224 S Jefferson		Amount of Each Disbursement this Period 541.45 <b>Transaction ID : SB17.4193</b>
City Stillwater	State OK	
Purpose of Disbursement Payroll	Category/ Type 001	
Candidate Name <b>Robertson For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: OK	District: 02	

Full Name (Last, First, Middle Initial) <b>B. Cameron J Price</b>		Date of Disbursement MM / DD / YYYY 03 / 06 / 2014
Mailing Address 224 S Jefferson		Amount of Each Disbursement this Period 541.45 <b>Transaction ID : SB17.4195</b>
City Stillwater	State OK	
Purpose of Disbursement Payroll	Category/ Type 001	
Candidate Name <b>Robertson For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: OK	District: 02	

Full Name (Last, First, Middle Initial) <b>c. Cameron J Price</b>		Date of Disbursement MM / DD / YYYY 03 / 13 / 2014
Mailing Address 224 S Jefferson		Amount of Each Disbursement this Period 541.45 <b>Transaction ID : SB17.4194</b>
City Stillwater	State OK	
Purpose of Disbursement Payroll	Category/ Type 001	
Candidate Name <b>Robertson For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: OK	District: 02	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1624.35
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 20			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)  
**Robertson For Congress**

Full Name (Last, First, Middle Initial) <b>A. Cameron J Price</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 224 S Jefferson		Amount of Each Disbursement this Period 543.06 <b>Transaction ID : SB17.4188</b>
City Stillwater	State OK	
Purpose of Disbursement Payroll	Category/ Type 001	
Candidate Name <b>Robertson For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: OK	District: 02	

Full Name (Last, First, Middle Initial) <b>B. Cameron J Price</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 224 S Jefferson		Amount of Each Disbursement this Period 543.06 <b>Transaction ID : SB17.4192</b>
City Stillwater	State OK	
Purpose of Disbursement Payroll	Category/ Type	
Candidate Name <b>Robertson For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: OK	District: 02	

Full Name (Last, First, Middle Initial) <b>c. The Parrot Steakhouse</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2014
Mailing Address 2530 S Main Street		Amount of Each Disbursement this Period 921.02 <b>Transaction ID : SB17.4164</b>
City Grove	State OK	
Purpose of Disbursement Event Dinner	Category/ Type 007	
Candidate Name <b>Robertson For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: OK	District: 02	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2007.14
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 20			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)  
**Robertson For Congress**

Full Name (Last, First, Middle Initial) <b>A. The Print Shop</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address 910 N J M Davis Blvd		Amount of Each Disbursement this Period 376.10 <b>Transaction ID : SB17.4176</b>
City Claremore	State OK	
Zip Code 74017	Purpose of Disbursement Campaign Buttons & Stickers	Category/ Type 006
Candidate Name <b>Robertson For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: OK District: 02	

Full Name (Last, First, Middle Initial) <b>B. Trench Brothers</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2014
Mailing Address 1911 E. Hwy 10		Amount of Each Disbursement this Period 406.62 <b>Transaction ID : SB17.4160</b>
City Grove	State OK	
Zip Code 74344	Purpose of Disbursement Campaign Signs	Category/ Type 006
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Trench Brothers</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 1911 E. Hwy 10		Amount of Each Disbursement this Period 1600.00 <b>Transaction ID : SB17.4180</b>
City Grove	State OK	
Zip Code 74344	Purpose of Disbursement Signs	Category/ Type 006
Candidate Name <b>Robertson For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: OK District: 02	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2382.72
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 20			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)  
**Robertson For Congress**

Full Name (Last, First, Middle Initial) <b>A. Van's Printing Service</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2014
Mailing Address 423 S Hazel St.		Amount of Each Disbursement this Period 296.73 <b>Transaction ID : SB17.4162</b>
City Grove State OK Zip Code 74344	Purpose of Disbursement Print Letterhead 001 Category/Type	
Candidate Name <b>Robertson For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK District: 02		

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	296.73
<b>TOTAL</b> This Period (last page this line number only).....	10151.44

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 20
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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)  
**Robertson For Congress**

Full Name (Last, First, Middle Initial) <b>A. Apperson, Hoguen</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2014
Mailing Address 33000 S 690 Rd		Amount of Each Disbursement this Period 1300.00 <b>Transaction ID : SB21.4213</b>
City Jay State OK Zip Code 74346	Purpose of Disbursement Transfer 001 Category/Type	
Candidate Name <b>Robertson For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK District: 02		

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1300.00
<b>TOTAL</b> This Period (last page this line number only).....	1300.00

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

NAME OF COMMITTEE (In Full) **Robertson For Congress** Transaction ID : **SC/10.4214**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Grand Savings Bank</b>	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO Box 451809	

City	State	ZIP Code
Grove	OK	74345

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5000.00	0.00	5000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
02 / 21 / 2014	/ / 2/21/15	6.00 % (apr)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial) Mr. Darrel Marshall Robertson	Name of Employer Self
Mailing Address 68251 E 340 Rd	Occupation Cattleman
City State ZIP Code Jay OK 74346	Amount Guaranteed Outstanding: 60000.00 <b>Transaction ID : SC/10.4214.0.SC2</b>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

<b>SUBTOTALS</b> This Period This Page (optional).....	5000.00
<b>TOTALS</b> This Period (last page in this line only).....	5000.00

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