

SECRETARY OF THE SENATE
14 JUN -9 PM 2:44

**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

Evelyn L. Rogers for US Senate

ADDRESS (number and street)

PO BOX 701105

Check if different than previously reported. (ACC)

TULSA OK 74170-1105

2. FEC IDENTIFICATION NUMBER ▼

00055730

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

OK

1

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 06 / 24 / 2014

in the State of OK

(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

04 / 01 / 2014

through

06 / 04 / 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 Evelyn L. Rogers

Signature of Treasurer Evelyn L. Rogers

Date 06 / 06 / 2014

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

Office Use Only							
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FEC FORM 3
(Revised 02/2003)

14020411673

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Evelyn L. Rogers for US Senate

C00555730

Report Covering the Period: From:

MM ' DD ' YYYY 04 ' 01 ' 2014

To:

MM ' DD ' YYYY 06 ' 04 ' 2014

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)) ..

174136

190214

(b) Total Contribution Refunds (from Line 20(d)) ..

(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) ...

7. Net Operating Expenditures

(a) Total Operating Expenditures (from Line 17) ..

(b) Total Offsets to Operating Expenditures (from Line 14) ...

(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) ...

8. Cash on Hand at Close of Reporting Period (from Line 27)...

9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)...

10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)...

For further information contact:

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

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

14020411674

DETAILED SUMMARY PAGE C00555730
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES...	1,691.36	1,802.14
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...		
(b) Of All Other Loans		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees ...		
(b) Political Party Committees...		
(c) Other Political Committees (such as PACs) ...		
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))...		
21. OTHER DISBURSEMENTS ...	1,185.8	1,185.8
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	1,809.94	1,920.72

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	50.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	1,859.94
25. SUBTOTAL (add Line 23 and Line 24)...	1,909.94
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	1,809.94
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	100.00

14020411676

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 1 OF 10
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" 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) **Evelyn L. Rogers for US Senate** **C00555730**

A. Full Name (Last, First, Middle Initial) **Rogers, Evelyn L.**

Mailing Address **PO Box 701105**

City **Tulsa** State **OK** Zip Code **74170**

FEC ID number of contributing federal political committee. **C00555730**

Name of Employer **TCC** Occupation **Librarian**

Receipt For: Primary General Other (specify) **6/24/2014**

Election Cycle-to-Date **167.58**

Date of Receipt **04 / 04 / 2014**

Amount of Each Receipt this Period **6.80**

Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(i)/441a-1)

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

Mailing Address **PO Box 701105**

City **Tulsa** State **OK** Zip Code **74170**

FEC ID number of contributing federal political committee. **C00555730**

Name of Employer **TCC** Occupation **Librarian**

Receipt For: Primary General Other (specify) **6/24/2014**

Election Cycle-to-Date **187.83**

Date of Receipt **04 / 05 / 2014**

Amount of Each Receipt this Period **20.25**

Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(i)/441a-1)

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

Mailing Address **PO Box 701105**

City **Tulsa** State **OK** Zip Code **74170**

FEC ID number of contributing federal political committee. **C00555730**

Name of Employer **TCC** Occupation **Librarian**

Receipt For: Primary General Other (specify) **6/24/2014**

Election Cycle-to-Date **1187.83**

Date of Receipt **04 / 09 / 2014**

Amount of Each Receipt this Period **1,000.00**

Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) **1,027.05**

TOTAL This Period (last page this line number only)

14020411677

**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 <u>2</u> OF <u>10</u>
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full) Evelyn L. Rogers for US Senate C00555730

Full Name (Last, First, Middle Initial) <u>Rogers, Evelyn L.</u>		Date of Receipt M M / D D / Y Y Y Y <u>04 / 10 / 2014</u>
Mailing Address <u>PO Box 701105</u>		Amount of Each Receipt this Period <u>8.50</u>
City <u>Tulsa</u>	State <u>OK</u> Zip Code <u>74170</u>	
FEC ID number of contributing federal political committee. <u>C00555730</u>		Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(f)/441a-1)
Name of Employer <u>TCC</u>	Occupation <u>Librarian</u>	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <u>6/24/2014</u> <u>1,314.91</u>	

Full Name (Last, First, Middle Initial) <u>B.</u>		Date of Receipt M M / Y Y
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. <u>C</u>		Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(f)/441a-1)
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼	

Full Name (Last, First, Middle Initial) <u>C.</u>		Date of Receipt M M / D D / Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. <u>C</u>		Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(f)/441a-1)
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼	

SUBTOTAL of Receipts This Page (optional).....▶	<u>8.50</u>
TOTAL This Period (last page this line number only).....▶	

14020411678

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 3 OF 10

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

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NAME OF COMMITTEE (In Full)

Evelyn L. Rogers for US Senate

A. Full Name (Last, First, Middle Initial) Rogers, Evelyn L.		Date of Receipt 04 17 2014
Mailing Address PO Box 701105		Amount of Each Receipt this Period <u>0.88</u>
City Tulsa	State OK	
FEC ID number of contributing federal political committee. C00555730		Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(f)/441a-1)
Name of Employer TCC	Occupation Librarian	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 6/24/2014	

B. Full Name (Last, First, Middle Initial) Rogers, Evelyn L.		Date of Receipt 04 19 2014
Mailing Address PO Box 701105		Amount of Each Receipt this Period <u>18.90</u>
City Tulsa	State OK	
FEC ID number of contributing federal political committee. C00555730		Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(f)/441a-1)
Name of Employer TCC	Occupation Librarian	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 6/24/2014	

C. Full Name (Last, First, Middle Initial) Rogers, Evelyn L.		Date of Receipt 04 21 2014
Mailing Address PO Box 701105		Amount of Each Receipt this Period <u>64.63</u>
City Tulsa	State OK	
FEC ID number of contributing federal political committee. C00555730		Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(f)/441a-1)
Name of Employer TCC	Occupation Librarian	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 6/24/2014	

SUBTOTAL of Receipts This Page (optional).....	84.41
TOTAL This Period (last page this line number only).....	

14020411679

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

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

FOR LINE NUMBER: PAGE 4 OF 10
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Evelyn L. Rogers for U.S. Senate

A. Full Name (Last, First, Middle Initial)
Rogers, Evelyn L.

Mailing Address
PO Box 701105

City Tulsa State OK Zip Code 74170

FEC ID number of contributing federal political committee. C00555730

Name of Employer TCC Occupation Librarian

Receipt For:
 Primary General
 Other (specify) 6/24/2014

Election Cycle-to-Date 1,399.98

Date of Receipt 04 / 23 / 2014

Amount of Each Receipt this Period 0.66

Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Rogers, Evelyn L.

Mailing Address
PO Box 701105

City Tulsa State OK Zip Code 74170

FEC ID number of contributing federal political committee. C00555730

Name of Employer TCC Occupation Librarian

Receipt For:
 Primary General
 Other (specify) 6/24/2014

Election Cycle-to-Date 1,420.23

Date of Receipt 04 / 24 / 2014

Amount of Each Receipt this Period 20.25

Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Rogers, Evelyn L.

Mailing Address
PO Box 701105

City Tulsa State OK Zip Code 74170

FEC ID number of contributing federal political committee. C00555730

Name of Employer TCC Occupation Librarian

Receipt For:
 Primary General
 Other (specify) 6/24/2014

Election Cycle-to-Date 1,431.62

Date of Receipt 04 / 26 / 2014

Amount of Each Receipt this Period 11.39

Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 32.30

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

14020411680

**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 10	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Evelyn L. Rogers for US Senate

Full Name (Last, First, Middle Initial) A. <u>Rogers, Evelyn L.</u>		Date of Receipt M M ' D D Y Y <u>06 28 2014</u>
Mailing Address <u>PO Box 701105</u>		Amount of Each Receipt this Period <u>18.00</u>
City <u>Tulsa</u>	State <u>OK</u>	
Zip Code <u>74170</u>		Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(f)/441a-1)
FEC ID number of contributing federal political committee. <u>C00555730</u>		
Name of Employer <u>TCC</u>	Occupation <u>Librarian</u>	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <u>6/24/2014</u>	Election Cycle-to-Date <u>1,449.62</u>	

Full Name (Last, First, Middle Initial) B. <u>Rogers, Evelyn L.</u>		Date of Receipt M M ' D D Y Y <u>05 01 2014</u>
Mailing Address <u>PO Box 701105</u>		Amount of Each Receipt this Period <u>51.15</u>
City <u>Tulsa</u>	State <u>OK</u>	
Zip Code <u>74170</u>		Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(f)/441a-1)
FEC ID number of contributing federal political committee. <u>C00555730</u>		
Name of Employer <u>TCC</u>	Occupation <u>Librarian</u>	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <u>6/24/2014</u>	Election Cycle-to-Date <u>1,500.77</u>	

Full Name (Last, First, Middle Initial) C. <u>Rogers, Evelyn L.</u>		Date of Receipt M M ' D D Y Y <u>05 02 2014</u>
Mailing Address <u>PO Box 701105</u>		Amount of Each Receipt this Period <u>57.40</u>
City <u>Tulsa</u>	State <u>OK</u>	
Zip Code <u>74170</u>		Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(f)/441a-1)
FEC ID number of contributing federal political committee. <u>C00555730</u>		
Name of Employer <u>TCC</u>	Occupation <u>Librarian</u>	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <u>6/24/2014</u>	Election Cycle-to-Date <u>1,558.17</u>	

SUBTOTAL of Receipts This Page (optional).....	<u>126.55</u>
TOTAL This Period (last page this line number only).....	

14020411681

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)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Evelyn L. Rogers for US Senate

A. Full Name (Last, First, Middle Initial)
Rogers, Evelyn L.

Mailing Address
PO Box 701105

City **Tulsa,** State **OK** Zip Code **74170**

FEC ID number of contributing federal political committee. **C00555730**

Name of Employer **TCC** Occupation **Librarian**

Receipt For:
 Primary General
 Other (specify) **6/24/2014**

Election Cycle-to-Date **1,588.39**

Date of Receipt **05' 03' 2014**

Amount of Each Receipt this Period **30.22**

Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Rogers, Evelyn L.

Mailing Address
PO Box 701105

City **Tulsa,** State **OK** Zip Code **74170**

FEC ID number of contributing federal political committee. **C00555730**

Name of Employer **TCC** Occupation **Librarian**

Receipt For:
 Primary General
 Other (specify) **6/24/2014**

Election Cycle-to-Date **1,589.86**

Date of Receipt **05' 05' 2014**

Amount of Each Receipt this Period **1.47**

Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Rogers, Evelyn L.

Mailing Address
PO Box 701105

City **Tulsa,** State **OK** Zip Code **74170**

FEC ID number of contributing federal political committee. **C00555730**

Name of Employer **TCC** Occupation **Librarian**

Receipt For:
 Primary General
 Other (specify) **6/24/2014**

Election Cycle-to-Date **1,597.85**

Date of Receipt **05' 07' 2014**

Amount of Each Receipt this Period **4.99**

Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) **36.68**

TOTAL This Period (last page this line number only)

14020411682

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 10
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Evelyn L. Rogers for US Senate

Full Name (Last, First, Middle Initial) A. <u>Rogers, Evelyn L.</u>			Date of Receipt M M / D D / Y Y Y Y <u>05 / 09 / 2014</u>	
Mailing Address <u>PO Box 701105</u>				
City <u>Tulsa</u>	State <u>OK</u>	Zip Code <u>74170</u>		
FEC ID number of contributing federal political committee. <u>C00555730</u>			Amount of Each Receipt this Period <u>75.09</u>	
Name of Employer <u>TCC</u>		Occupation <u>Librarian</u>		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <u>6/24/2014</u>		Election Cycle-to-Date <u>1,669.94</u>	Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(f)/441a-1)	

Full Name (Last, First, Middle Initial) B. <u>Rogers, Evelyn L.</u>			Date of Receipt M M / D D / Y Y Y Y <u>05 / 11 / 2014</u>	
Mailing Address <u>PO Box 701105</u>				
City <u>Tulsa</u>	State <u>OK</u>	Zip Code <u>74170</u>		
FEC ID number of contributing federal political committee. <u>C00555730</u>			Amount of Each Receipt this Period <u>0.43</u>	
Name of Employer <u>TCC</u>		Occupation <u>Librarian</u>		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <u>6/24/2014</u>		Election Cycle-to-Date <u>1,670.37</u>	Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(f)/441a-1)	

Full Name (Last, First, Middle Initial) C. <u>Rogers, Evelyn L.</u>			Date of Receipt M M / D D / Y Y Y Y <u>05 / 12 / 2014</u>	
Mailing Address <u>PO Box 701105</u>				
City <u>Tulsa</u>	State <u>OK</u>	Zip Code <u>74170</u>		
FEC ID number of contributing federal political committee. <u>C00555730</u>			Amount of Each Receipt this Period <u>5.60</u>	
Name of Employer <u>TCC</u>		Occupation <u>Librarian</u>		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <u>6/24/2014</u>		Election Cycle-to-Date <u>1,675.97</u>	Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(f)/441a-1)	

SUBTOTAL of Receipts This Page (optional)	<u>81.12</u>
TOTAL This Period (last page this line number only)	

14020411683

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 <u>8</u> OF <u>10</u>
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b

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NAME OF COMMITTEE (In Full)
Evelyn L. Rogers for US Senate

Full Name (Last, First, Middle Initial) <u>Rogers, Evelyn L.</u>		Date of Receipt M M / D D / Y Y Y Y <u>05 / 16 / 2014</u>
Mailing Address <u>PO Box 701105</u>		Amount of Each Receipt this Period <u>8.82</u>
City <u>Tulsa</u>	State <u>OK</u>	
Zip Code <u>74170</u>		Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(f)/441a-1)
FEC ID number of contributing federal political committee. <u>C00555730</u>		
Name of Employer <u>TCC</u>	Occupation <u>Librarian</u>	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <u>6/24/2014</u>	Election Cycle-to-Date ▼ <u>1,684.19</u>	

Full Name (Last, First, Middle Initial) <u>Rogers, Evelyn L.</u>		Date of Receipt M M / D D / Y Y Y Y <u>05 / 19 / 2014</u>
Mailing Address <u>PO Box 701105</u>		Amount of Each Receipt this Period <u>42.90</u>
City <u>Tulsa</u>	State <u>OK</u>	
Zip Code <u>74170</u>		Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(f)/441a-1)
FEC ID number of contributing federal political committee. <u>C00555730</u>		
Name of Employer <u>TCC</u>	Occupation <u>Librarian</u>	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <u>6/24/2014</u>	Election Cycle-to-Date ▼ <u>1,727.69</u>	

Full Name (Last, First, Middle Initial) <u>Rogers, Evelyn L.</u>		Date of Receipt M M / D D / Y Y Y Y <u>05 / 21 / 2014</u>
Mailing Address <u>PO Box 701105</u>		Amount of Each Receipt this Period <u>36.25</u>
City <u>Tulsa</u>	State <u>OK</u>	
Zip Code <u>74170</u>		Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(f)/441a-1)
FEC ID number of contributing federal political committee. <u>C00555730</u>		
Name of Employer <u>TCC</u>	Occupation <u>Librarian</u>	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <u>6/24/2014</u>	Election Cycle-to-Date ▼ <u>1,753.94</u>	

SUBTOTAL of Receipts This Page (optional).....	<u>87.97</u>
TOTAL This Period (last page this line number only).....	

14020411684

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 10
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Evelyn L. Rogers for US Senate

Full Name (Last, First, Middle Initial) A. <i>Rogers, Evelyn L.</i>		Date of Receipt M M ' D D ' Y Y Y Y <i>05 ' 23 ' 2014</i>
Mailing Address <i>PO Box 701105</i>		Amount of Each Receipt this Period <i>176.34</i>
City <i>Tulsa</i>	State Zip Code <i>OK 74170</i>	
FEC ID number of contributing federal political committee. <i>C00555730</i>		Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(f)/441a-1)
Name of Employer <i>TCC</i>	Occupation <i>Librarian</i>	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <i>6/24/2014</i>	Election Cycle-to-Date <i>1,940.28</i>	

Full Name (Last, First, Middle Initial) B. <i>Rogers, Evelyn L.</i>		Date of Receipt M M ' D D ' Y Y Y Y <i>05 ' 24 ' 2014</i>
Mailing Address <i>PO Box 701105</i>		Amount of Each Receipt this Period <i>21.60</i>
City <i>Tulsa</i>	State Zip Code <i>OK 74170</i>	
FEC ID number of contributing federal political committee. <i>C00555730</i>		Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(f)/441a-1)
Name of Employer <i>TCC</i>	Occupation <i>Librarian</i>	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <i>6/24/2014</i>	Election Cycle-to-Date <i>1,961.88</i>	

Full Name (Last, First, Middle Initial) C. <i>Rogers, Evelyn L.</i>		Date of Receipt M M ' D D ' Y Y Y Y <i>05 ' 25 ' 2014</i>
Mailing Address <i>PO Box 701105</i>		Amount of Each Receipt this Period <i>4.99</i>
City <i>Tulsa</i>	State Zip Code <i>OK 74170</i>	
FEC ID number of contributing federal political committee. <i>C00555730</i>		Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(f)/441a-1)
Name of Employer <i>TCC</i>	Occupation <i>Librarian</i>	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <i>6/24/2014</i>	Election Cycle-to-Date <i>1,958.87</i>	

SUBTOTAL of Receipts This Page (optional).....	<i>202.93</i>
TOTAL This Period (last page this line number only).....	

14020411685

**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 10	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Evelyn L. Rogers for US Senate

Full Name (Last, First, Middle Initial) A. Rogers, Evelyn L.			Date of Receipt 05 27 2014	
Mailing Address PO Box 70105				
City Tulsa	State OK	Zip Code 74170		
FEC ID number of contributing federal political committee. C00555730			Amount of Each Receipt this Period 8.74	
Name of Employer TCC		Occupation Librarian		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 6/24/2014		Election Cycle-to-Date 1975, 61	Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(f)/441a-1)	

Full Name (Last, First, Middle Initial) B. Rogers, Evelyn L.			Date of Receipt 05 30 2014	
Mailing Address PO Box 70105				
City Tulsa	State OK	Zip Code 74170		
FEC ID number of contributing federal political committee. C00555730			Amount of Each Receipt this Period 30.01	
Name of Employer TCC		Occupation Librarian		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 6/24/2014		Election Cycle-to-Date 2,005, 62	Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(f)/441a-1)	

Full Name (Last, First, Middle Initial) C. Rogers, Evelyn L.			Date of Receipt 06 04 2014	
Mailing Address PO Box 70105				
City Tulsa	State OK	Zip Code 74170		
FEC ID number of contributing federal political committee. C00555730			Amount of Each Receipt this Period 15.10	
Name of Employer TCC		Occupation Librarian		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 6/24/2014		Election Cycle-to-Date 2,020, 72	Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(f)/441a-1)	

SUBTOTAL of Receipts This Page (optional).....▶	53.85
TOTAL This Period (last page this line number only).....▶	1,741.36

14020411686

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

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NAME OF COMMITTEE (In Full)
Evelyn L. Rogers for US Senate C00555730

Full Name (Last, First, Middle Initial) Rogers, Evelyn L.		Date of Receipt M M / D D Y Y Y Y 04 / 10 / 2014
Mailing Address PO Box 701103		Amount of Each Receipt this Period 118.58
City Tulsa	State Zip Code OK 74170	
FEC ID number of contributing federal political committee. C00450502		Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(f)/441a-1)
Name of Employer Occupation TCC Librarian		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 6/24/2014	Election Cycle-to-Date 1,306.41	

Full Name (Last, First, Middle Initial) B.		Date of Receipt M M / Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. C		Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(f)/441a-1)
Name of Employer Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) C.		Date of Receipt M M / Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. C		Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(f)/441a-1)
Name of Employer Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date	

SUBTOTAL of Receipts This Page (optional).....▶	118.58
TOTAL This Period (last page this line number only).....▶	118.58

14020411687

**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 / OF 21

17
20a 18
20b 19a
20c 19b
21

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NAME OF COMMITTEE (In Full)
Evelyn L. Rogers for US Senate C 00555730

A. Oklahoma State Election Board
 Full Name (Last, First, Middle Initial)
 Mailing Address: P.O. Box 53156, State Capitol - Room B6
 City: Oklahoma City, State: OK, Zip Code: 73152
 Purpose of Disbursement: ballot access fees
 Candidate Name: Evelyn L. Rogers
 Office Sought: Senate
 Disbursement For: Primary
 Date of Disbursement: 04 / 10 / 2014
 Amount of Each Disbursement this Period: 1,000.00
 Category/Type: 001
 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53:

B. USPS - Robert Wayne Jenkins Station
 Full Name (Last, First, Middle Initial)
 Mailing Address: 6910 S. Yorktown
 City: Tulsa, State: OK, Zip Code: 74136
 Purpose of Disbursement: postage - mail paperwork
 Candidate Name: Evelyn L. Rogers
 Office Sought: Senate
 Disbursement For: Primary
 Date of Disbursement: 04 / 04 / 2014
 Amount of Each Disbursement this Period: 5.60
 Category/Type: 001
 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53:

C. Register.com
 Full Name (Last, First, Middle Initial)
 Mailing Address: 12808 Gran Bay Parkway West
 City: Jacksonville, State: FL, Zip Code: 32258
 Purpose of Disbursement: operating expense - monthly renewal of website function
 Candidate Name: Evelyn L. Rogers
 Office Sought: Senate
 Disbursement For: Primary
 Date of Disbursement: 04 / 19 / 2014
 Amount of Each Disbursement this Period: 18.90
 Category/Type: 001
 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53:

SUBTOTAL of Disbursements This Page (optional) ▶ 1,024.50
TOTAL This Period (last page this line number only) ▶

14020411688

**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 2 OF 22			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full) Evelyn L. Rogers for US Senate C00555730

A. <u>USPS - Robert Wayne Jenkins Station</u>		Date of Disbursement
Mailing Address <u>6910 S. Yorktown</u>		<u>05 05 2014</u>
City <u>Tulsa</u>	State <u>OK</u>	Amount of Each Disbursement this Period <u>1.47</u>
Zip Code <u>74136</u>		
Purpose of Disbursement <u>Postage - mail paperwork</u>		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name <u>Evelyn L. Rogers</u>		
Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <u>6/24/2014</u>	
State: <u>OK</u>	District: <u>—</u>	

B. <u>USPS - Robert Wayne Jenkins Station</u>		Date of Disbursement
Mailing Address <u>6910 S. Yorktown</u>		<u>05 12 2014</u>
City <u>Tulsa</u>	State <u>OK</u>	Amount of Each Disbursement this Period <u>5.60</u>
Zip Code <u>74136-9998</u>		
Purpose of Disbursement <u>postage - mail paperwork</u>		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name <u>Evelyn L. Rogers</u>		
Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <u>6/24/2014</u>	
State: <u>OK</u>	District: <u>—</u>	

C. <u>USPS - Robert Wayne Jenkins Station</u>		Date of Disbursement
Mailing Address <u>6910 S. Yorktown</u>		<u>05 16 2014</u>
City <u>Tulsa</u>	State <u>OK</u>	Amount of Each Disbursement this Period <u>8.82</u>
Zip Code <u>74136</u>		
Purpose of Disbursement <u>Postage - mail Paperwork</u>		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name <u>Evelyn L. Rogers</u>		
Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <u>6/24/2014</u>	
State: <u>OK</u>	District: <u>—</u>	

SUBTOTAL of Disbursements This Page (optional).....	<u>15.89</u>
TOTAL This Period (last page this line number only).....	

14020411689

**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 3 OF 22			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full) **Evelyn L. Rogers for US Senate** **C00555730**

Full Name (Last, First, Middle Initial) A. Register, Com		Date of Disbursement M M ' P D Y Y Y Y 05 19 2014	
Mailing Address 12808 Gran Bay Parkway West		Amount of Each Disbursement this Period 18.90	
City State Zip Code Jacksonville FL 32258			
Purpose of Disbursement monthly renewal of operating expense - website functions		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Evelyn L. Rogers			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/Type 001	
State: OK District:	6/24/2014		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M ' P D Y Y Y Y	
Mailing Address		Amount of Each Disbursement this Period , ,	
City State Zip Code			
Purpose of Disbursement		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
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)	Category/Type	
State: District:	▼		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M ' P D Y Y Y Y	
Mailing Address		Amount of Each Disbursement this Period , ,	
City State Zip Code			
Purpose of Disbursement		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
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)	Category/Type	
State: District:	▼		

SUBTOTAL of Disbursements This Page (optional) ▶	, , 18.90
TOTAL This Period (last page this line number only) ▶	, ,

14020411690

**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)
 17
 18
 19a
 19b
 20a
 20b
 20c
 21

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NAME OF COMMITTEE (In Full)
 Evelyn L. Rogers for US Senate C 00555730

A. Quik Trip #00107

Full Name (Last, First, Middle Initial)
 Evelyn L. Rogers

Mailing Address
 807 W. 71 Street

City: Tulsa State: OK Zip Code: [blank]

Purpose of Disbursement
 Travel - Gasoline for car

Candidate Name
 Evelyn L. Rogers

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) [blank]

State: OK District: -

Date of Disbursement
 04 / 05 / 2014

Amount of Each Disbursement this Period
 20.25

Category/Type
 002

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Oklahoma Turnpike Authority
 Pike Pass - Turnpike Authority

Full Name (Last, First, Middle Initial)
 Oklahoma Turnpike Authority

Mailing Address
 Tulsa - OKC - Tulsa
 6212 S. 57th West Ave.

City: Tulsa State: OK Zip Code: 74131-2453

Purpose of Disbursement
 Travel - pike pass Turnpike fees

Candidate Name
 Evelyn L. Rogers

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) [blank]

State: OK District: -

Date of Disbursement
 04 / 10 / 2014

Amount of Each Disbursement this Period
 8.50

Category/Type
 002

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Oklahoma Turnpike Authority
 Pike Pass - Chickasaw - Roff ML - Chickasaw

Full Name (Last, First, Middle Initial)
 Oklahoma Turnpike Authority

Mailing Address
 Tulsa - Stroud SH 99 - Tulsa (Turnpike)
 Chickasaw - Roff ML - Chickasaw
 6212 S. 57th West Ave.

City: Tulsa State: OK Zip Code: 74131-2453

Purpose of Disbursement
 Travel - pike pass Turnpike fees

Candidate Name
 Evelyn L. Rogers

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) [blank]

State: OK District: -

Date of Disbursement
 04 / 21 / 2014

Amount of Each Disbursement this Period
 4.50

Category/Type
 002

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional).....▶ 33.25

TOTAL This Period (last page this line number only).....▶ [blank]

14020411691

**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 5 OF 22	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Evelyn L. Rogers for US Senate C00555730

A. EZ Mart - Shell #112

Full Name (Last, First, Middle Initial)
 Mailing Address: **1000 E. Main Street**
 City: **Davis** State: **OK** Zip Code: **73030**

Date of Disbursement: **04 / 21 / 2014**

Purpose of Disbursement: **Travel expense - beverage** Amount of Each Disbursement this Period: **1.08**

Candidate Name: **Evelyn L. Rogers** Category/Type: **002**

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

State: **OK** District: **—** **06/24/2014**

B. Kum + Go #881

Full Name (Last, First, Middle Initial)
 Mailing Address: **2502 N. Harvard Ave.**
 City: **Tulsa** State: **OK** Zip Code: **74115**

Date of Disbursement: **04 / 21 / 2014**

Purpose of Disbursement: **Travel - gasoline for car** Amount of Each Disbursement this Period: **25.00**

Candidate Name: **Evelyn L. Rogers** Category/Type: **002**

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

State: **OK** District: **—** **06/24/2014**

C. SNT Rivermist

Full Name (Last, First, Middle Initial)
 Mailing Address: **Hwy. 99 + 56**
 City: **Konawa** State: **OK** Zip Code: **74849**

Date of Disbursement: **04 / 21 / 2014**

Purpose of Disbursement: **Travel - gasoline for car** Amount of Each Disbursement this Period: **17.51**

Candidate Name: **Evelyn L. Rogers** Category/Type: **002**

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

State: **OK** District: **—** **6/24/2014**

SUBTOTAL of Disbursements This Page (optional) **43.59**

TOTAL This Period (last page this line number only)

14020411692

**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 6 OF 22

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)

Evelyn L. Rogers for US Senate

Full Name (Last, First, Middle Initial) A. Love's #266		Date of Disbursement MM/DD/YYYY 04/21/2014
Mailing Address 3201 12th N.W.		Amount of Each Disbursement this Period 7.80
City Ardmore	State OK	
Purpose of Disbursement Travel-gasoline for car	Zip Code 73401	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name Evelyn L. Rogers	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OK	District: —	
Full Name (Last, First, Middle Initial)		

Full Name (Last, First, Middle Initial) B. Quik Trip #00045		Date of Disbursement MM/DD/YYYY 04/24/2014
Mailing Address 1415 E. 71 Street		Amount of Each Disbursement this Period 20.03
City Tulsa	State OK	
Purpose of Disbursement Travel-gasoline for car	Zip Code 74136	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name Evelyn L. Rogers	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OK	District: —	
Full Name (Last, First, Middle Initial)		

Full Name (Last, First, Middle Initial) C. Quik Trip # 00107		Date of Disbursement MM/DD/YYYY 04/28/2014
Mailing Address 807 W. 71 Street		Amount of Each Disbursement this Period 18.00
City Tulsa	State OK	
Purpose of Disbursement Travel-gasoline for car	Zip Code	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name Evelyn L. Rogers	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OK	District: —	
Full Name (Last, First, Middle Initial)		

SUBTOTAL of Disbursements This Page (optional).....▶	45.83
TOTAL This Period (last page this line number only).....▶	

14020411693

**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 <u>7</u> OF <u>22</u>			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full) Evelyn L. Rogers for US Senate CO0555730

A. Full Name (Last, First, Middle Initial) Oklahoma Turnpike Authority
Pike Pass - Muskogee + Creek Turnpikes
 Mailing Address 6212 S. 57th West Ave.
 City Tulsa State OK Zip Code 74131-2453
 Purpose of Disbursement Travel - pikepass Turnpike fees 002
 Candidate Name Evelyn L. Rogers Category/Type
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) 6/24/2014
 State: OK District: —

Date of Disbursement: 05 / 01 / 2014
 Amount of Each Disbursement this Period: 3.90
 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial) EZ Go #40
 Mailing Address 25 mile marker Muskogee
 City Muskogee State OK Zip Code 74401
 Purpose of Disbursement Travel - gasoline for car 002
 Candidate Name Evelyn L. Rogers Category/Type
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) 6/24/2014
 State: OK District: —

Date of Disbursement: 05 / 01 / 2014
 Amount of Each Disbursement this Period: 15.00
 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial) Quick Trip #00037
 Mailing Address 1835 SE Washington Blvd.
 City Bartlesville State OK Zip Code 74601
 Purpose of Disbursement Travel - gasoline for car 002
 Candidate Name Evelyn L. Rogers Category/Type
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) 6/24/2014
 State: OK District: —

Date of Disbursement: 05 / 02 / 2014
 Amount of Each Disbursement this Period: 2.00
 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 20.90

TOTAL This Period (last page this line number only)

14020411694

**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)
 17
 18
 19a
 19b
 20a
 20b
 20c
 21

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NAME OF COMMITTEE (In Full)
 Evelyn L. Rogers for US Senate CO0555730

A. Quik Trip #00107

Full Name (Last, First, Middle Initial) _____

Date of Disbursement: 05 02 2014

Mailing Address: 807 W. 71 street

City: Tulsa State: OK Zip Code: _____

Purpose of Disbursement: Travel - gasoline for car

Candidate Name: Evelyn L. Rogers

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: OK District: _____

Category/Type: 002

Amount of Each Disbursement this Period: , , 19.85

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. EZ GO #53

Full Name (Last, First, Middle Initial) _____

Date of Disbursement: 05 03 2014

Mailing Address: Midway Turner Turnpike

City: Stroud State: OK Zip Code: 74079

Purpose of Disbursement: Travel - gasoline for car

Candidate Name: Evelyn L. Rogers

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: OK District: _____

Category/Type: 002

Amount of Each Disbursement this Period: , , 15.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Lincoln County GOP - Lincoln Expo Center

Full Name (Last, First, Middle Initial) _____

Date of Disbursement: 05 03 2014

Mailing Address: _____

City: Chandler State: OK Zip Code: _____

Purpose of Disbursement: Dinner expense @ GOP event

Candidate Name: Evelyn L. Rogers

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: OK District: _____

Category/Type: 002

Amount of Each Disbursement this Period: , , 15.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) > , , 49.85

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

14020411695

**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 <u>9</u> OF <u>22</u>			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full) Evelyn L. Rogers for US Senate C00555730

A. Full Name (Last, First, Middle Initial) <u>Oklahoma Turnpike Authority</u>		Date of Disbursement
Mailing Address <u>Pike pass - Creek and Turner Turnpikes</u> <u>Tulsa - Chandler - Tulsa</u>		<u>05</u> / <u>03</u> / <u>2014</u>
City <u>Tulsa</u> State <u>OK</u> Zip Code <u>74131-2453</u>		Amount of Each Disbursement this Period
Purpose of Disbursement <u>Travel - pike pass Turnpike fees</u>		<u>, , 5.05</u>
Candidate Name <u>Evelyn L. Rogers</u>		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <u>6/24/2014</u>	
State: <u>OK</u> District: <u>-</u>		

B. Full Name (Last, First, Middle Initial) <u>Quik Trip #00107</u>		Date of Disbursement
Mailing Address <u>807 W. 71 Street</u>		<u>05</u> / <u>09</u> / <u>2014</u>
City <u>Tulsa</u> State <u>OK</u> Zip Code		Amount of Each Disbursement this Period
Purpose of Disbursement <u>Travel - Gasoline for car</u>		<u>, , 24.99</u>
Candidate Name <u>Evelyn L. Rogers</u>		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <u>6/24/2014</u>	
State: <u>OK</u> District: <u>-</u>		

C. Full Name (Last, First, Middle Initial) <u>Quik Trip # 00045</u>		Date of Disbursement
Mailing Address <u>1415 E. 71 street</u>		<u>05</u> / <u>19</u> / <u>2014</u>
City <u>Tulsa</u> State <u>OK</u> Zip Code <u>74136</u>		Amount of Each Disbursement this Period
Purpose of Disbursement <u>Travel - Gasoline for car</u>		<u>, , 24.00</u>
Candidate Name <u>Evelyn L. Rogers</u>		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <u>6/24/2014</u>	
State: <u>OK</u> District: <u>-</u>		

SUBTOTAL of Disbursements This Page (optional).....▶	<u>, , 57.04</u>
TOTAL This Period (last page this line number only).....▶	<u>, , .</u>

14020411696

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 OF 22	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full) **Evelyn L. Rogers for US Senate** C00555730

A. EZ GO		Date of Disbursement 05 21 2014
Mailing Address 25 mile marker Muskogee		Amount of Each Disbursement this Period 14.95 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Muskogee	State OK Zip Code 74401	
Purpose of Disbursement Travel - gasoline for car	Category/ Type 002	
Candidate Name Evelyn L. Rogers	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 6/24/2014 State: OK District: -	

B. Kwik Kountry 1		Date of Disbursement 05 21 2014
Mailing Address 1015 W. Highway 59		Amount of Each Disbursement this Period 8.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Westville	State OK Zip Code 74965	
Purpose of Disbursement Travel - gasoline for car	Category/ Type 002	
Candidate Name Evelyn L. Rogers	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 6/24/2014 State: OK District: -	

C. Mc Donald's		Date of Disbursement 05 21 2014
Mailing Address 201 W. Locust Street		Amount of Each Disbursement this Period 4.56 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Stilwell	State OK Zip Code 74960	
Purpose of Disbursement Food expense	Category/ Type 002	
Candidate Name Evelyn L. Rogers	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 6/24/2014 State: OK District: -	

SUBTOTAL of Disbursements This Page (optional).....	27.51
TOTAL This Period (last page this line number only).....	

14020411697

**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 <u>11</u> OF <u>22</u>
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Evelyn L. Rogers for US Senate CO0555 730

A. Full Name (Last, First, Middle Initial) <u>Oklahoma Turnpike Authority</u>		Date of Disbursement
Mailing Address <u>Pike Pass - Muskogee - Cherokee - Creek Turnpikes</u>		M M D D Y Y Y Y <u>05 21 2014</u>
City <u>Tulsa</u> State <u>OK</u> Zip Code <u>74131-2453</u>		Amount of Each Disbursement this Period
Purpose of Disbursement <u>Travel - pike pass Turnpike fees</u>	Category/ Type <u>002</u>	, , <u>4.60</u>
Candidate Name <u>Evelyn L. Rogers</u>		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <u>6/24/2014</u>	
State: <u>OK</u> District: <u>—</u>		

B. Full Name (Last, First, Middle Initial) <u>Oklahoma Turnpike Authority</u>		Date of Disbursement
Mailing Address <u>Pike Pass - Turner and JKT Turnpikes</u>		M M D D Y Y Y Y <u>05 23 2014</u>
City <u>Tulsa</u> State <u>OK</u> Zip Code <u>74131-2453</u>		Amount of Each Disbursement this Period
Purpose of Disbursement <u>Travel - pike pass Turnpike fees</u>	Category/ Type <u>002</u>	, , <u>6.10</u>
Candidate Name <u>Evelyn L. Rogers</u>		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <u>6/24/2014</u>	
State: <u>OK</u> District: <u>—</u>		

C. Full Name (Last, First, Middle Initial) <u>Love's #114</u>		Date of Disbursement
Mailing Address <u>1645 E. Hwy 66</u>		M M D D Y Y Y Y <u>05 23 2014</u>
City <u>EL Reno</u> State <u>OK</u> Zip Code <u>73036</u>		Amount of Each Disbursement this Period
Purpose of Disbursement <u>Food expense</u>	Category/ Type <u>002</u>	, , <u>4.90</u>
Candidate Name <u>Evelyn L. Rogers</u>		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <u>6/24/2014</u>	
State: <u>OK</u> District: <u>—</u>		

SUBTOTAL of Disbursements This Page (optional).....	, , <u>15.60</u>
TOTAL This Period (last page this line number only).....	, , .

14020411698

**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 <u>2</u> OF <u>22</u>
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Evelyn L. Rogers for US Senate C 00555 730

A. <u>Johnny Mc's Shell</u>		Date of Disbursement
Mailing Address <u>353 S. LL Males Ave.</u>		<u>05</u> <u>23</u> <u>2014</u>
City <u>Cheyenne</u>	State <u>OK</u>	Amount of Each Disbursement this Period <u>1.80</u>
Zip Code <u>73628</u>		
Purpose of Disbursement <u>Beverage expense</u>		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name <u>Evelyn L. Rogers</u>		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <u>6/24/2014</u>	
State: <u>OK</u>	District: <u>—</u>	

B. <u>Johnny Mc's Shell</u>		Date of Disbursement
Mailing Address <u>353 S. LL Males Ave.</u>		<u>05</u> <u>23</u> <u>2014</u>
City <u>Cheyenne</u>	State <u>OK</u>	Amount of Each Disbursement this Period <u>17.65</u>
Zip Code <u>73628</u>		
Purpose of Disbursement <u>Food expense - Travel - for car</u>		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name <u>Evelyn L. Rogers</u>		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <u>6/24/2014</u>	
State: <u>OK</u>	District: <u>—</u>	

C. <u>R + R Grocery</u>		Date of Disbursement
Mailing Address <u>120 S. Main</u>		<u>05</u> <u>23</u> <u>2014</u>
City <u>Arnett</u>	State <u>OK</u>	Amount of Each Disbursement this Period <u>4.82</u>
Zip Code		
Purpose of Disbursement <u>Food expense</u>		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name <u>Evelyn L. Rogers</u>		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <u>6/24/2014</u>	
State: <u>OK</u>	District: <u>—</u>	

SUBTOTAL of Disbursements This Page (optional)	<u>24.27</u>
TOTAL This Period (last page this line number only)	<u>24.27</u>

14020411699

**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 22
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Evelyn L. Rogers for US Senate C00555730

Full Name (Last, First, Middle Initial) A. QuikTrip #00107		Date of Disbursement 05 23 2014
Mailing Address 807 W. 71 Street		Amount of Each Disbursement this Period , , 19.50
City Tulsa	State OK	
Purpose of Disbursement Travel - gasoline expense	Category/Type 002	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name Evelyn L. Rogers	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 6/24/2014	State: OK District: -	

Full Name (Last, First, Middle Initial) B. Love's #114		Date of Disbursement 05 23 2014
Mailing Address 1645 E. Hwy 66		Amount of Each Disbursement this Period , , 10.00
City EL Reno	State OK	
Purpose of Disbursement Travel - gasoline for car expense	Category/Type 002	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name Evelyn L. Rogers	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 6/24/2014	State: OK District: -	

Full Name (Last, First, Middle Initial) C. Reydon Short Stop		Date of Disbursement 05 23 2014
Mailing Address 9394 Hwy 30		Amount of Each Disbursement this Period , , 10.00
City Reydon	State OK	
Purpose of Disbursement Travel - gasoline expense	Category/Type 002	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name Evelyn L. Rogers	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 6/24/2014	State: OK District: -	

SUBTOTAL of Disbursements This Page (optional).....	, , 39.50
TOTAL This Period (last page this line number only).....	, , .

14020411700

**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 <u>14</u> OF <u>22</u>			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full) Evelyn L. Rogers for US Senate CO0555730

A. Stafford Air and Space Museum
 Full Name (Last, First, Middle Initial)
 Mailing Address 522 W. Rainey Ave.
 City Weatherford State OK Zip Code 73086
 Purpose of Disbursement Travel - book 002
 Candidate Name Evelyn L. Rogers Category/Type
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)
 State: OK District: 6/24/2014
 Date of Disbursement 05 23 2014
 Amount of Each Disbursement this Period 19.95
 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Baymont Inn
 Full Name (Last, First, Middle Initial)
 Mailing Address 1707 S.W. 27th Street
 City EL Reno State OK Zip Code 73036
 Purpose of Disbursement Travel - Lodging expense 002
 Candidate Name Evelyn L. Rogers Category/Type
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)
 State: OK District: 6/24/2014
 Date of Disbursement 05 23 2014
 Amount of Each Disbursement this Period 87.72
 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Oklahoma Turnpike Authority
 Full Name (Last, First, Middle Initial)
 Mailing Address Pike Pass - Turner and Creek Turnpikes
6212 S. 57th West Ave.
 City Tulsa State OK Zip Code 74131-2453
 Purpose of Disbursement Travel - pike pass Turnpike fees 002
 Candidate Name Evelyn L. Rogers Category/Type
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)
 State: OK District: 6/24/2014
 Date of Disbursement 05 24 2014
 Amount of Each Disbursement this Period 4.60
 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 112.27
 TOTAL This Period (last page this line number only)

14020411701

**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 22
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Evelyn L. Rogers for US Senate C00555730

A. Valero Full Name (Last, First, Middle Initial)		Date of Disbursement 05 24 2014
Mailing Address 601 N.W. 5th		Amount of Each Disbursement this Period 17.01
City Moore	State OK	
Zip Code 73160		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Travel - gasoline for car expense 002		
Candidate Name Evelyn L. Rogers		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OK	District: -	

B. McDonald's Full Name (Last, First, Middle Initial)		Date of Disbursement 05 24 2014
Mailing Address Turner Turnpike - Midway		Amount of Each Disbursement this Period 4.59
City Stroud	State OK	
Zip Code 74079		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Food expense 002		
Candidate Name Evelyn L. Rogers		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OK	District: -	

C. QuikTrip #00107 Full Name (Last, First, Middle Initial)		Date of Disbursement 05 30 2014
Mailing Address 807 W. 71 Street		Amount of Each Disbursement this Period 30.01
City Tulsa	State OK	
Zip Code 74106		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Travel - gasoline expense 002		
Candidate Name Evelyn L. Rogers		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OK	District: -	

SUBTOTAL of Disbursements This Page (optional).....▶	51.61
TOTAL This Period (last page this line number only).....▶	51.61

14020411702

**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 22

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full) Evelyn L. Rogers for US Senate C00555730

A. Full Name (Last, First, Middle Initial) Oklahoma Turnpike Authority
Pike Pass - Turner and JKT Turnpikes
Mailing Address 6212 S. 57th West Ave.
City Tulsa State OK Zip Code 74131-2453
Purpose of Disbursement Travel - pikepass Turnpike fees 002
Candidate Name Evelyn L. Rogers Category/Type
Office Sought: House Senate President
Disbursement For: Primary General Other (specify) 6/24/2014
State: OK District: —

Date of Disbursement 06 02 2014
Amount of Each Disbursement this Period 11.90
Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial) Quik Trip #00107
Mailing Address 807 W. 71 Street
City Tulsa State OK Zip Code
Purpose of Disbursement Travel - gasoline expense
Candidate Name Evelyn L. Rogers Category/Type 002
Office Sought: House Senate President
Disbursement For: Primary General Other (specify) 6/24/2014
State: OK District: —

Date of Disbursement 06 04 2014
Amount of Each Disbursement this Period , , 15.00
Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
Purpose of Disbursement
Candidate Name
Office Sought: House Senate President
Disbursement For: Primary General Other (specify)
State: District:

Date of Disbursement
Amount of Each Disbursement this Period
Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) 26.90
TOTAL This Period (last page this line number only)

14020411703

**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 <u>17</u> OF <u>22</u>
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full) Evelyn L. Rogers for US Senate C00555730

A. Fed Ex Office

Full Name (Last, First, Middle Initial) _____

Date of Disbursement 04 / 04 / 2014

Mailing Address 1324 E. 71 Street

City Tulsa State OK Zip Code 74136

Purpose of Disbursement photocopies - paperwork 0.03

Candidate Name Evelyn L. Rogers Category/Type _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: OK District: _____ 6/24/2014

Amount of Each Disbursement this Period 1.30

B. Fed Ex Office

Full Name (Last, First, Middle Initial) _____

Date of Disbursement 04 / 17 / 2014

Mailing Address 1324 E. 71 Street

City Tulsa State OK Zip Code 74136

Purpose of Disbursement photocopies - paperwork 0.03

Candidate Name Evelyn L. Rogers Category/Type _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: OK District: _____ 6/24/2014

Amount of Each Disbursement this Period 0.88

C. Vista Print

Full Name (Last, First, Middle Initial) _____

Date of Disbursement 04 / 21 / 2014

Mailing Address 8877 Inkster Rd.

City Taylor State MI Zip Code 48180

Purpose of Disbursement printing - cards 0.03

Candidate Name Evelyn L. Rogers Category/Type _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: OK District: _____ 6/24/2014

Amount of Each Disbursement this Period 8.74

SUBTOTAL of Disbursements This Page (optional)..... 10.92

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

14020411704

**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 <u>18</u> OF <u>22</u>			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 20				

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NAME OF COMMITTEE (In Full)
Evelyn L. Rogers for US Senate C00555730

Full Name (Last, First, Middle Initial) A. Fed Ex Office		Date of Disbursement MM/DD/YYYY 04/23/2014
Mailing Address 1324 E. 71 Street		Amount of Each Disbursement this Period 0.66
City Tulsa	State OK	
Zip Code 74136		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement photocopies - paperwork		
Candidate Name Evelyn L. Rogers		Category/Type 003
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK	District: —	
Full Name (Last, First, Middle Initial) 6/24/2014		

Full Name (Last, First, Middle Initial) B. Fed Ex Office		Date of Disbursement MM/DD/YYYY 04/24/2014
Mailing Address 1324 E. 71 Street		Amount of Each Disbursement this Period 0.22
City Tulsa	State OK	
Zip Code 74136		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement photocopies - paperwork		
Candidate Name Evelyn L. Rogers		Category/Type 003
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK	District: —	
Full Name (Last, First, Middle Initial) 6/24/2014		

Full Name (Last, First, Middle Initial) C. Vista Print		Date of Disbursement MM/DD/YYYY 04/26/2014
Mailing Address 8877 Inkster Rd.		Amount of Each Disbursement this Period 11.39
City Taylor	State MI	
Zip Code 48180		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Print - small business magnets		
Candidate Name Evelyn L. Rogers		Category/Type 003
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK	District: —	
Full Name (Last, First, Middle Initial) 6/24/2014		

SUBTOTAL of Disbursements This Page (optional).....	122.7
TOTAL This Period (last page this line number only).....	

14020411705

**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 <u>9</u> OF <u>22</u>
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full) Evelyn L. Rogers for US Senate C 00555730

Full Name (Last, First, Middle Initial) A. Fed Ex Office		Date of Disbursement MM DD 'YY <u>05 03 '2014</u>
Mailing Address <u>1324 E. 71 street</u>		Amount of Each Disbursement this Period <u>, , 0.22</u>
City <u>Tulsa</u>	State Zip Code <u>OK 74136</u>	
Purpose of Disbursement <u>photocopies - paperwork</u>	Category/Type <u>003</u>	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name <u>Evelyn L. Rogers</u>		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <u>OK</u> District: <u>—</u>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <u>6/24/2014</u>	

Full Name (Last, First, Middle Initial) B. Vista Print		Date of Disbursement MM DD 'YY <u>05 07 2014</u>
Mailing Address <u>8877 Inkster Rd.</u>		Amount of Each Disbursement this Period <u>, , 4.99</u>
City <u>Taylor</u>	State Zip Code <u>MI 48180</u>	
Purpose of Disbursement <u>printing - cards</u>	Category/Type <u>003</u>	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name <u>Evelyn L. Rogers</u>		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <u>OK</u> District: <u>—</u>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <u>6/24/2014</u>	

Full Name (Last, First, Middle Initial) c. Fed Ex Office		Date of Disbursement MM DD 'YY <u>05 09 2014</u>
Mailing Address <u>1324 E. 71 street</u>		Amount of Each Disbursement this Period <u>, , 0.10</u>
City <u>Tulsa</u>	State Zip Code <u>OK 74136</u>	
Purpose of Disbursement <u>photocopy - paperwork</u>	Category/Type <u>003</u>	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name <u>Evelyn L. Rogers</u>		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <u>OK</u> District: <u>—</u>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <u>6/24/2014</u>	

SUBTOTAL of Disbursements This Page (optional)	<u>, , 5.31</u>
TOTAL This Period (last page this line number only)	<u>, , .</u>

14020411706

**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 <u>20</u> OF <u>22</u>			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full) Evelyn L. Rogers for US Senate C 00555730

A. Fed Ex office

Full Name (Last, First, Middle Initial) _____

Date of Disbursement: 05 11 2014

Mailing Address: 1324 E. 21 street

City: Tulsa State: OK Zip Code: 74136-5034

Purpose of Disbursement: Photocopies of paperwork Category/Type: 003

Candidate Name: Evelyn L. Rogers

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: OK District: - 6/24/2014

Amount of Each Disbursement this Period: , , 0.43

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Vista Print

Full Name (Last, First, Middle Initial) _____

Date of Disbursement: 05 21 2014

Mailing Address: 8877 Inkster Rd.

City: Taylor State: MI Zip Code: 48180

Purpose of Disbursement: printing-cards Category/Type: 003

Candidate Name: Evelyn L. Rogers

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: OK District: - 6/24/2014

Amount of Each Disbursement this Period: , , 8.74

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

c. Vista Print

Full Name (Last, First, Middle Initial) _____

Date of Disbursement: 05 25 2014

Mailing Address: 8877 Inkster Rd.

City: Taylor State: MI Zip Code: 48180

Purpose of Disbursement: Printing-cards Category/Type: 003

Candidate Name: Evelyn L. Rogers

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: OK District: - 6/24/2014

Amount of Each Disbursement this Period: , , 4.99

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) , , 14.16

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

14020411707

**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 <u>2</u> OF <u>22</u>
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b
	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full) Evelyn L. Rogers for US Senate C00555730

Full Name (Last, First, Middle Initial) A. Vista Print		Date of Disbursement <u>05</u> ^M <u>27</u> ^D <u>2014</u> ^Y
Mailing Address <u>8877 Inkster Rd.</u>		Amount of Each Disbursement this Period <u>8.74</u>
City <u>Taylor</u> State <u>MI</u> Zip Code <u>48180</u>		
Purpose of Disbursement <u>Printing - cards</u>	Category/Type <u>003</u>	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name <u>Evelyn L. Rogers</u>		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <u>6/24/2014</u>		
State: <u>OK</u> District: <u>-</u>		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement . . .
Mailing Address		Amount of Each Disbursement this Period , ,
City	State Zip Code	
Purpose of Disbursement	Category/Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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) C.		Date of Disbursement . . .
Mailing Address		Amount of Each Disbursement this Period , ,
City	State Zip Code	
Purpose of Disbursement	Category/Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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).....▶	, , <u>8.74</u>
TOTAL This Period (last page this line number only).....▶	, , .

14020411708

**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)			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Evelyn L. Rogers for US Senate C00555730

Full Name (Last, First, Middle Initial) <u>KWON 1400</u>		Date of Disbursement
A. <u>1200 SE Frank Phillips Blvd.</u>		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y Y
Mailing Address <u>P.O. Box 1100</u>		Amount of Each Disbursement this Period
City <u>Bartlesville</u>	State <u>OK</u>	<input type="text"/>
	Zip Code <u>74005</u>	<u>35.55</u>
Purpose of Disbursement <u>Advertising - radio</u>		Category/ Type
Candidate Name <u>Evelyn L. Rogers</u>		
Office Sought: <input type="checkbox"/> House	Disbursement For:	
<input checked="" type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: <u>OK</u>	District: <u>—</u>	
	<u>6/24/2014</u>	

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

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

SUBTOTAL of Disbursements This Page (optional).....	<u>35.55</u>
TOTAL This Period (last page this line number only).....	<u>1691.36</u>

14020411709

**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 { OF }	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Evelyn L. Rogers for US Senate C00555730

Full Name (Last, First, Middle Initial) A. Rogers, Evelyn L.		Date of Disbursement 04 / 10 / 2014
Mailing Address PO Box 701103		Amount of Each Disbursement this Period 118.58
City Tulsa	State OK	
Purpose of Disbursement CONTRIBUTION IN-KIND poster, sign, cards, pen		Category/ Type 006
Candidate Name FROM: C00450502 Evelyn L. Rogers		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK	District: —	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y 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) C.		Date of Disbursement M M / D D / Y Y 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:	

SUBTOTAL of Disbursements This Page (optional).....	118.58
TOTAL This Period (last page this line number only).....	118.58

14020411710

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United States Senate

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AIRBORNE EXPRESS	_____	<input type="checkbox"/>

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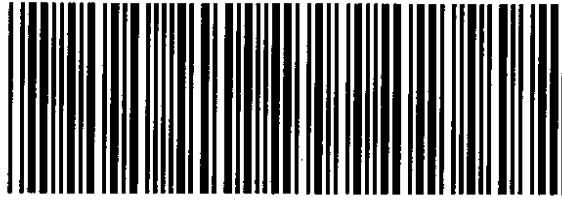
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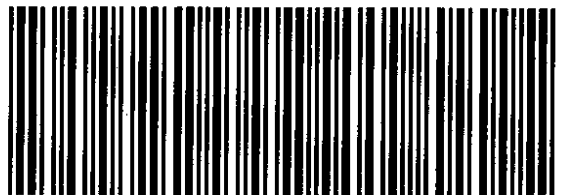
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