

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

RECEIVED
2011 OCT 11 AM 8:48
FEC MAIL CENTER

1. (a) Name of Individual, Organization or Corporation GUY MCLENDON		3. FEC Identification Number C
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 8011 DUFFIELD LN		
(c) City, State and ZIP Code HOUSTON, TX 77071		
2. Corporate filers only Is the filer a qualified nonprofit corporation? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Individual filers only Name of Employer CITGO PETROLEUM		Occupation ENGINEER

4. TYPE OF REPORT (check appropriate boxes):
- (a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☒ October 15 Quarterly Report
☐ January 31 Year-End Report
- ☐ 24-Hour Report
☐ 48-Hour Report

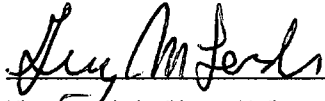
b) Is this Report an amendment? Yes ☐ No ☒

5. COVERING PERIOD: FROM
09' 01' 2011
THROUGH
09' 30' 2011

6. TOTAL CONTRIBUTIONS **219.00**

7. TOTAL INDEPENDENT EXPENDITURES **51893**

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent. In addition, (if the independent expenditures reported herein were made by a corporation) I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM	SIGNATURE	DATE
GUY MCLENDON		10/11/2011

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

For further information, contact:
Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

SCHEDULE 5-A
ITEMIZED RECEIPTS

PAGE 1 OF 1

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 FILER (In Full)

GUY C. MCLENDON

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

KOBS, DARCEY

Date of Receipt

Mailing Address

4122 1/2 DRAKE ST

09 / 10 / 2011

City

HOUSTON

State

TX

Zip Code

77005

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee.

C

45.00

Name of Employer

HOUSE CALL DOCTORS

Occupation

PHYSICIAN

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

MOULTON, CHARLES

Date of Receipt

Mailing Address

4220 HUNT CLUB CIRCLE APT 811

09 / 08 / 2011

City

FAIRFAX

State

VA

Zip Code

22033

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee.

C

96.80

Name of Employer

GEORGE MASON UNIVERSITY

Occupation

GRADUATE LECTURER

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

ROLLINS RONALD

Date of Receipt

Mailing Address

09 / 15 / 2011

City

PEMBROKE PINES

State

Zip Code

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee.

C

48.25

Name of Employer

MILLER LEGG

Occupation

D. Full Name (Last, First, Middle Initial)

HOUSE, LYNN

Date of Receipt

Mailing Address

09 / 30 / 2011

City

WINTER HAVEN

State

FL

Zip Code

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee.

C

28.95

Name of Employer

LIBERTARIAN PARTY OF FLORIDA

Occupation

SECRETARY

SUBTOTAL of Receipts This Page (optional)

219.00

TOTAL This Period (last page carry total to Line 6)

219.00

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 1 OF 1
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full) <div style="font-size: 1.2em; font-family: cursive;">GUY MCLENDON</div>					
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Full Name (Last, First, Middle Initial) of Payee <div style="font-size: 1.2em; font-family: cursive;">USPS</div>			Date <div style="font-size: 1.2em; font-family: cursive;">09' 02' 2011</div>		
Mailing Address <div style="font-size: 1.2em; font-family: cursive;">SOUTH GESSNER</div>			Amount <div style="font-size: 1.2em; font-family: cursive;">, 352.00</div>		
City <div style="font-size: 1.2em; font-family: cursive;">HOUSTON</div>	State <div style="font-size: 1.2em; font-family: cursive;">TX</div>	Zip Code <div style="font-size: 1.2em; font-family: cursive;">77271</div>			
Purpose of Expenditure <div style="font-size: 1.2em; font-family: cursive;">POSTAGE</div>		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____		
Name of Federal Candidate Supported or Opposed by Expenditure: <div style="font-size: 1.2em; font-family: cursive;">GARY JOHNSON</div>			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <div style="font-size: 1.2em; font-family: cursive;">, 352.00</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____		

Full Name (Last, First, Middle Initial) of Payee <div style="font-size: 1.2em; font-family: cursive;">OFFICE DEPOT #159</div>			Date <div style="font-size: 1.2em; font-family: cursive;">09' 02' 2011</div>		
Mailing Address			Amount <div style="font-size: 1.2em; font-family: cursive;">, 64.93</div>		
City	State	Zip Code			
Purpose of Expenditure <div style="font-size: 1.2em; font-family: cursive;">ENVELOPES</div>		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____		
Name of Federal Candidate Supported or Opposed by Expenditure: <div style="font-size: 1.2em; font-family: cursive;">GARY JOHNSON</div>			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <div style="font-size: 1.2em; font-family: cursive;">, 64.93</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____		

Full Name (Last, First, Middle Initial) of Payee <div style="font-size: 1.2em; font-family: cursive;">HARDY MACIA</div>			Date <div style="font-size: 1.2em; font-family: cursive;">09' 06' 2011</div>		
Mailing Address <div style="font-size: 1.2em; font-family: cursive;">PO Box 343</div>			Amount <div style="font-size: 1.2em; font-family: cursive;">, 102.00</div>		
City <div style="font-size: 1.2em; font-family: cursive;">TILTON</div>	State <div style="font-size: 1.2em; font-family: cursive;">NH</div>	Zip Code <div style="font-size: 1.2em; font-family: cursive;">03275</div>			
Purpose of Expenditure <div style="font-size: 1.2em; font-family: cursive;">PHOTOCOPIES</div>		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____		
Name of Federal Candidate Supported or Opposed by Expenditure: <div style="font-size: 1.2em; font-family: cursive;">GARY JOHNSON</div>			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <div style="font-size: 1.2em; font-family: cursive;">, 102</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____		

(a) SUBTOTAL of Itemized Independent Expenditures.....	, 518.93
(b) SUBTOTAL of Unitemized Independent Expenditures.....	, ,
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	, 518.93

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked <i>10/03/11</i>
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

PREPARER

SN

(3/2005)

10/11/11
DATE PREPARED