130310627

FE6AN026

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

2013 APR 24 AM 11:21

1. NAME OF COMMITTEE (in full)	E OR PRINT V	example: If typing, type over the lines.	12FE4M5	
D,R,I,V,E, Political F	und Chapter 886	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
ADDRESS (number and street)	528 W. Reno I I I	<u> </u>	1.1.1.1.1.1	
Check if different		<u>i </u>		
Check if different than previously reported. (ACC)	klahoma City	<u> </u>	OK	73107
2. FEC IDENTIFICATION NUMB	ER ▼ CITY,	A	STATE A	ZIP CODE A
C 00000489,	3. IS T		OR (A)	IENDED
4. TYPE OF REPORT (Choose One)	(b) Monthly Feb 20 Report Feb 20	(M2) May 20	(M5) Aug	20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reparts:	Mar 20	(M3) Jun 20 (M6) Sep	20 (M9) Dec 20 (M12) (Non-Election Year Only)
April 15	Apr 20	(M4) Jul 20 (M	/17) Oct :	20 (M10) Jan 31 (YE)
Quarterly Report (Q1)	(c) 12-Day	Primary (12P)	General	(12G) Runoff (12R)
July 15 Quarterly Report (Q2)	PRE-Election Report for the:	Convention (12C)	Special (
October 15 Quarterly Report (Q3)			1 	
January 31 Year-End Report (YE)	Election	on / O v o		in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the:	General (30G)	Runoff (3	OOR) Special (30S)
Termination Report (TER)	Election	on/	/ / / / / / / / / / / / / / / / / / / /	in the State of
5. Covering Period	01/2013	through C	3 '311'	2013
I certify that I have examined this R	-	-	is true, correct and	d complete.
Type or Print Name of Treasurer	Tom Rit	ter		
Signature of Treasurer			Date 04	1/11/2013
NOTE: Submission of false, erroneous	, or incomplete information r	nay subject the person sign	ing this Report to the	ne penalties of 2 U.S.C. §437g.
Office Use Only		Santa Sa		FEC FORM 3X Rev. 12/2004

2 30310627

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

D.R.I.V.E. Political Fund Chapter 886

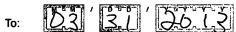
Benort Covering the Period:











	eport Covering the Period: From:	21 QU QQLSI T	
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2013		7.5.35
	(b) Cash on Hand at Beginning of Reporting Period	75.35	
	(c) Total Receipts (from Line 19)	671250	6.7.1250
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	67.87.85	6.7.87.85
7.	Total Disbursements (from Line 31)	3,260,00	3,200,00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	358785	3,5.8.28.5
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	6	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		

For further information contact:

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

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

Toll Free 809-424-9530 Local 202-694-1100

FE6AN026

3031062727

DETAILED SUMMARY PAGE

of Receipts

Page 3

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

D.R.I.V.E. Political Fund Chapter 886

	port Covering the Period: From: O		b: Q3 3/ 36/3
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From:		
	(a) Individuals/Persons Other		
	Than Political Committees	A Company of the Comp	
	(i) Itemized (use Schedule A)		
		1 V V V V V V V V V V V V V V V V V V V	<u> </u>
	(ii) Unitemized		
	(iii) TOTAL (add		
	Lines 11(a)(i) and (ii)▶		
	(b) Political Party Committees		
	(c) Other Political Committees		
	(such as PACs)		
	(d) Total Contributions (add Lines		
	11(a)(iii), (b), and (c)) (Carry		<u> </u>
	Totals to Line 33, page 5)▶		E C (% C., C (# 7 7 7 6% B
12.	Transfers From Affiliated/Other		
	Party Committees	671250	671250
40	All Loans Received		
13.	All Loans Received		
11	Loan Repayments Received		
	Offsets To Operating Expenditures		
10.	(Refunds, Rebates, etc.)		
	(Carry Totals to Line 37, page 5)		
16.	Refunds of Contributions Made	[
	to Federal Candidates and Other		
	Political Committees		
17.	Other Federal Receipts		
	(Dividends, Interest, etc.)		
18.	Transfers from Non-Federal and Levin Funds		
	(a) Non-Federal Account		[
	(from Schedule H3)		
	(b) Levin Funds (from Schedule H5)		
	(b) Loviii i dilab (iloiii bolloddio ilo)		7 0 1 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	(c) Total Transfers (add 18(a) and 18(b))		
	(2, 1012, 112,010)0 (222, 1012, 1012),		
19	Total Receipts (add Lines 11(d),		
	12, 13, 14, 15, 16, 17, and 18(c))▶	67115	171780
	-,,,,,,,,	La respectation of the second	La rando India
20.	Total Federal Receipts	4	
	(subtract Line 18(c) from Line 19)▶		2 2 # · B · D · D · V · D · D
			1

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A	COLUMN B
21.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	Total This Period	Calendar Year-to-Date
	(i) Federal Share		
	(ii) Non-Federal Share		
	(b) Other Federal Operating		
	Expenditures		
	(c) Total Operating Expenditures		
	(add 21(a)(i), (a)(ii), and (b))▶		
22.	Transfers to Affiliated/Other Party		
	Committees		<u></u>
23.	Contributions to Federal Candidates/Committees and Other Political Committees		
24.	Independent Expenditures		
25.	(use Schedule E)		
	(use Schedule F)		777777777777777777777777777777777777777
26.	Loan Repayments Made		
27. 28	Loans MadeRefunds of Contributions To:		
_5.	(a) Individuats/Persons Other Than Political Committees		
	Than I Omea Committees		
	(b) Political Party Committees	n n m a n m n n n	0 0 4% 0 0 4% 0
	(c) Other Political Committees		
	(such as PACs)		
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))▶		
29.	Other Disbursements	3,200,00	1.320000
30.	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity		
	(from Schedule H6)		
	(i) Federal Share		
	(ii) "Levin" Share	7. 7. 63. 7. 63. 1. 63. 1. 63. 1. 63. 1. 63. 1. 63. 1. 63. 1. 63. 1. 63. 1. 63. 1. 63. 1. 63. 1. 63. 1. 63. 1.	
	(b) Federal Election Activity Paid Entirely		
	With Federal Funds		
	(c) Total Faderal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))		
	Lines 30(a)(i), 30(a)(ii) and 30(b))		
31.	Total Disbursements (add Lines 21(c), 22,		provide product product of the second control of the second contro
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	320000	3,200,90
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)		
			The state of the s

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans)		· · · · · · · · · · · · · · · · · · ·
(from Line 11(d), page 3)		
34. Total Contribution Refunds.		
(from Line 28(d))		
35. Net Contributions (other than loans)		
(subtract Line 34 from Line 33)		
36. Total Federal Operating Expenditures		
(add Line 21(a)(i) and Line 21(b))		
37. Offsets to Operating Expenditurgs		
(from Line 15, page 3)		
38. Nat Operating Expenditures		
(subtract Line 37 from Line 36)		

See separate schedule(s) for each category of each cate	TEMIZED RECEIPTS tor each category of the 116 110 12 15 17 17	SC	HEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE OF		
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) Full Name (Last, First, Middle Initial) A. DRIVE COMMITTEE (In Full) Purpose of soliciting contributions from such committee. Name of Employer Aggregate Year-to-Date V State Zip Code Amount of Each Receipt this Period FEC ID number of committee. Name of Employer Cocupation FEG ID number of committee. Name of Employer Cocupation FEG ID number of committee. Name of Employer Cocupation FEG ID number of committee. Name of Employer Cocupation FEG ID number of committee. Name of Employer Cocupation FEG ID number of committee. Name of Employer Cocupation FEG ID number of committee. Name of Employer Cocupation FEG ID number of committee. Name of Employer Cocupation FEG ID number of committee. Cocupation FEG ID number of	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 committee. Authority	•						
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A. DRIVE COMPLETEE Mailing Address 25 Low's iona Ave NW City Washing ton N. C. 3000 FEC ID number of contributing tederal political committee. Name of Employer Receipt For: Primary General Other (specify) City Compatible Coupation Aggregate Year-to-Date ▼ Primary General Other (specify) City State Zip Code Amount of Each Receipt this Period Date of Receipt Date of Receipt Amount of Each Receipt this Period Amount of Each Receipt this Period Amount of Each Receipt this Period Aggregate Year-to-Date ▼ City State Zip Code City General Other (specify) Aggregate Year-to-Date ▼ City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing tederal political committee. City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing tederal political committee. City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing tederal political committee. City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing tederal political committee. Name of Employer Occupation Aggregate Year-to-Date ▼	A. DRIVE COMMING Address State Zip Code State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer Fell Name (Last, First, Middle Initial) FELD Number of committee. Name of Employer Fec ID number of committee. Name of Employer Fec ID number of contributing federal political committee. Name of Employer Fell Name (Last, First, Middle Initial) Fell Name (Last, First, Middle Initial) FELL Name of Employer Cocupation Aggregate Year-to-Date Aggregate Year-to-Date Fec ID number of contributing federal political committee. Name of Employer Cocupation Aggregate Year-to-Date Aggregate Year-to-Date Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer Cocupation Aggregate Year-to-Date Aggre		NAME OF COMMITTEE (In Full)					
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FEC ID number of contributing federal political committee. Name of Employer Receipt For:	FEC ID number of contributing federal political committee. Name of Employer Receipt For:	i		State	Zip Code			
FEC ID number of contributing federal political committee. Name of Employer Primary General Aggregate Year-to-Date ▼	Receipt For:	_	Washington B.	<u>C.</u>	70001	<u> </u>		
Receipt For: Primary General Aggregate Year-to-Date ▼	Receipt For:			C (0,(598420	352775		
Primary General Other (specify) Primary Characteristics	Primary General	1	Name of Employer	Occupation	, , , , , , , , , , , , , , , , , , ,			
Dil Name (Last, First, Middle Initial)	Citer (specify)					7		
B. DRIVE Committee Mailing Address 25 Louisiana Ave. No. City Distance of Explosure FEC ID number of contributing federal political committee. Name of Employer Coccupation Receipt For: Primary General Other (specify) ▼ City State Zip Code Amount of Each Receipt this Period Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political coormittee. Name of Employer Occupation Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼	B. DRIVE Committee Mailing Address 25 Louisiana Ave. NW City Primary General Other (specify) City State Zip Code Aggregate Year-to-Date City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Date of Receipt Amount of Each Receipt this Period Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Occupation Aggregate Year-to-Date Occupation							
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FEC ID number of contributing federal political committee. Name of Employer C	FEC ID number of contributing federal political committee. Name of Employer Cocupation			State	Zip Code			
Receipt For: Aggregate Year-to-Date ▼	FeC ID number of committee. Name of Employer Coccupation			20001	1			
Receipt For: Primary General Other (specify) ▼	Receipt For: Primary General Other (specify) ▼			C		31.75.25		
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Receipt For: Aggregate Year-to-Date ▼	Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼		•					
Aggregate Teal-to-Date ¥	Primary General Other (specify) Other (specif		Name of Employer	Occupation	1			
Primary General	Other (specify)					7		
Other (specify)								
		_						

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

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one) 21b 22 23 27 28a 28b	PAGE 7 OF 8
Any information copied from such Reports and State or for commercial purposes, other than using the national commercial purposes.	ments may not be sold or used me and address of any political	d by any person for the purpose of	soliciting contributions om such committee.
NAME OF COMMITTEE (In Full) D.R.I.V.E. Political Fund (Chapter 886		

V	D.K.I.V.E. Political Fund Chapter 886	
Α.	Full Name (Last, First, Middle Initial) OKla. County Democrats Mailing Address 4100 N. Lincoln Blvd. State State Zin Code	Date of Disbursement
	City State Zip Code 73/05 Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General	Amount of Each Disbursement this Period
_	State: District: Other (specify) ▼ Full Name (Last, First, Middle Initial)	
В.	Marrissette Richard Mailing Address 6609 S. Harvey Ave.	Date of Disbursement
	City OKla. City State Zip Code 73139 Purpose of Disbursement Donation Candidate Name Category/ Type Office Sought: House Disbursement For:	Amount of Each Disbursement this Period
	Senate Primary General President Other (specify) ▼ State: District:	
С	Full Name (Last, First, Middle Initial) Monson, Angela Mailing Address 720 NE 42nd St.	Date of Disbursement
	City OK/a. City OK 73/05 Purpose of Disbursement Contribution Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) State: District:	Amount of Each Disbursement this Period
-	SUBTOTAL of Disbursements This Page (optional)	200000
	TOTAL This Period (last page this line number only)	7

26

30b

SCHEDULE B	(FEC	Form	3X)
ITEMIZED DISE	BURSE	MENT	S

SCHEDULE B (FEC Form 3X)		FOR LINE N	NUMBER: PAGE & OF &
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
	Detailed Summary Page	21b	22 23 24 25 26
		. 27	28a 28b 28c 29 30b
Any information copied from such Reports and State or for commercial purposes, other than using the na-	ments may not be sold or used me and address of any political	by any perso committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
Full Name (Last, First, Middle Initial)			
A. L.L. James Co.)	Date of Disbursement
Mailing Address 7156 Meltose Ln			02/13/2013
City City	State Zip Code		
OKla. City	OK 73127		
Purpose of Disbursement			Amount of Each Disbursement this Period
advertisement in	program		Amount of Each Disbursement this Period
		Category/ Type	20.0.00
Office Sought: House Disburse	ment For:		
Senate	Primary General		
President State: District:	Other (specify) ▼	1	
Full Name (Last, First, Middle Initial)			
B. ~	_		Date of Disbursement
<u>Pettis</u> for hlard	7		MANY / PORDE / [AAAAAAAAAA
Mailing Address PO Box 36374			10.31 11.51 12013
City	State Zip Code K 73152		
Purpose of Disbursement			
Contribution		8	Amount of Each Disbursement this Period
Candidate Name		Category/	10000
John Pettis	1.	Туре	1,0,00,00
Office Sought: Honse Disburse Senate	ement For: Primary General	ŀ	
President	Other (specify)		
State: District:	j		
Full Name (Last, First, Middle Initial)			
C.			Date of Disbursement
Mailing Address			MAM / D D / ATA CA
Mailing Address	State Zip Code		
City			
Purpose of Disbursement			Amount of Each Disharana and Tark
Candidate Name	Candidate Name		Amount of Each Disbursement this Period
		Category/ Type	
<u> </u>	ement For:		
Senate President	Primary General		
State: District:	Other (specify) ▼		
SUBTOTAL of Disbursements This Page (optional)			120000
TOTAL This Period (last page this line number only	y)	>	3,1,000

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(3/2005)