PAGE 1 / 4 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Robertson For Congress PO Box 452123 ADDRESS (number and street) (Check if address is changed) Grove 74345 OK CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS info@robertson2014.com (Check if address is changed) Optional Second E-Mail Address |jfarris_grove@att.net COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2014 C00557686 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Mr. John Raymond Farris Type or Print Name of Treasurer Mr. John Raymond Farris [Electronically Filed] 04 13 2014 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Only

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

FEC Form 1 (Revised 02/2009)		Page 2
TYPE OF COMMITTEE		
Candidate Committee:		
(a) X This committee is a principal campa	ign committee. (Complete the candidate information below.)	1
(b) This committee is an authorized cor information below.)	nmittee, and is NOT a principal campaign committee. (Com	plete the candidate
Name of Candidate Mr. Darrel Marshall R	Robertson	<u> </u>
Candidate Rep Office Sought:	X House Senate President	State OK District 02
(c) This committee supports/opposes or	nly one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Committee:		
(d) This committee is a	(National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Political Action Committee (PAC):		
(e) This committee is a separate segreç	gated fund. (Identify connected organization on line 6.) Its cor	nnected organization is a:
Corporation	Corporation w/o Capital Stock	Labor Organization
Membership Organization	Trade Association	Cooperative
In addition, this comm	nittee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes m committee. (i.e., nonconnected comm	nore than one Federal candidate, and is NOT a separate se	egregated fund or party
In addition, this committee is	a Lobbvist/Registrant PAC.	
=	a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fundraising Representative:		
	pays fundraising expenses and disburses net proceeds for twee of which is an authorized committee of a federal candidate.	vo or more political
	pays fundraising expenses and disburses net proceeds for twich is an authorized committee of a federal candidate.	o or more political
Committees Participating in Joint Fund	draiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.	FEC ID number	

FEC Form 1 (Revised	02/2009)	Page 3
Write or Type Committee Nam	e e	
Robertson For	Congress	
	Organization, Affiliated Committee, Joint Fundraising Representative, or L	eadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connecte	ed Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponso
. Custodian of Records: Ide books and records.	ntify by name, address (phone number optional) and position of the person	n in possession of committee
Mr. John Full Name	Raymond Farris	
Mailing Address	PO Box 452123	
	Grove OK 7	74345
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number 620	_ 875 _ 0204
Treasurer: List the name are any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and assistant treasurer).	the name and address of
Full Name Mr. John of Treasurer	Raymond Farris	
Mailing Address	PO Box 452123	
	Grove OK 7	74345
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number 620	875 0204

FEC For	m 1 (Revised 02/2009)	Page 4
Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	-
safety deposit b	r Depositories: List all banks or other depositories in which the committee deposits funds oxes or maintains funds. Depository, etc. Grand Savings Bank	, holds accounts, rents
Banks or Other safety deposit b Name of Bank, Mailing Address	Depository, etc. Grand Savings Bank PO Box 451809	h, holds accounts, rents
safety deposit b Name of Bank,	Depository, etc. Grand Savings Bank PO Box 451809	
safety deposit b Name of Bank,	Depository, etc. Grand Savings Bank PO Box 451809 Grove CITY STATE	1345
safety deposit b Name of Bank, Mailing Address	Depository, etc. Grand Savings Bank PO Box 451809 Grove CITY STATE	1345
safety deposit b Name of Bank, Mailing Address	Depository, etc. Grand Savings Bank PO Box 451809 Grove CITY STATE Depository, etc.	1345
safety deposit b Name of Bank, Mailing Address Name of Bank,	Depository, etc. Grand Savings Bank PO Box 451809 Grove CITY STATE Depository, etc.	1345
safety deposit b Name of Bank, Mailing Address Name of Bank,	Depository, etc. Grand Savings Bank PO Box 451809 Grove CITY STATE Depository, etc.	1345