

# 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

Mike Turner for Congress

ADDRESS (number and street)

615 N. Hudson Ave.

Ste. 320

Check if different than previously reported. (ACC)

Oklahoma City

OK

73102

2. FEC IDENTIFICATION NUMBER ▼

C C00561738

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

OK

05

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 / / 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 Kyle Walton Denham

Signature of Treasurer Kyle Walton Denham

[Electronically Filed]

Date

06 / 12 / 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

FEC FORM 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Mike Turner for Congress**

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2014 To: M M / D D / Y Y Y Y 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))....	139995.00	393395.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	139995.00	393395.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	391640.67	577028.67
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	391640.67	577028.67
8. Cash on Hand at Close of Reporting Period (from Line 27).....	66366.33	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	250000.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Mike Turner for Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	13400.00	16800.00
(ii) Unitemized .....	1595.00	1595.00
(iii) TOTAL of contributions from individuals .....	14995.00	18395.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate .....	125000.00	375000.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	139995.00	393395.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	250000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	250000.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....</b>	139995.00	643395.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	391640.67	577028.67
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	391640.67	577028.67

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	318012.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	139995.00
25. SUBTOTAL (add Line 23 and Line 24).....	458007.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	391640.67
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	66366.33

**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 30
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Mike Turner for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. & Mrs. Mehdi and Behnaz Adham**

Mailing Address 14217 Gailardia Pl.

City	State	Zip Code
Oklahoma City	OK	73142

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

Name of Employer	Occupation
Southwest Orthopaedic	Surgeon

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 12 / 2014

**Transaction ID : SA11AI.4144**

Amount of Each Receipt this Period  
 250.00  
 Contribution

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

Mailing Address 1700 Drury Ln.

City	State	Zip Code
Oklahoma City	OK	73116

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

Name of Employer	Occupation
Red Stone Energies, Ltd.	Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : SA11AI.4146**

Amount of Each Receipt this Period  
 1000.00  
 Contribution

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

Mailing Address 200 E. Federal

City	State	Zip Code
Shawnee	OK	74804

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

Name of Employer	Occupation
self-employed	Businessman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 26 / 2014

**Transaction ID : SA11AI.4151**

Amount of Each Receipt this Period  
 300.00  
 Online Contribution

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

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

1550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 30
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Mike Turner for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Charles E. Dyer Jr.**

Mailing Address 3612 E. 47th Pl.

City State Zip Code  
Tulsa OK 74135

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

Name of Employer Occupation  
Tulsa Community College Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
550.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 21 / 2014

**Transaction ID : SA11AI.4157**

Amount of Each Receipt this Period  
150.00

Contribution

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

Mailing Address 5808 Mistletoe Ct.

City State Zip Code  
Oklahoma City OK 73142

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

Name of Employer Occupation  
Linda Haneborg & Associates Principal

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 08 / 2014

**Transaction ID : SA11AI.4162**

Amount of Each Receipt this Period  
500.00

Donation

**C.** Full Name (Last, First, Middle Initial)  
**Dr. Norman K. Imes**

Mailing Address PO Box 57006

City State Zip Code  
Oklahoma City OK 73157

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

Name of Employer Occupation  
Imes Sleep Services Doctor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 18 / 2014

**Transaction ID : SA11AI.4168**

Amount of Each Receipt this Period  
1000.00

Contribution

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

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

1650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 30
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Mike Turner for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Bob Khajehouri**

Mailing Address 14712 Dalea Dr.

City	State	Zip Code
Oklahoma City	OK	73142

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

Name of Employer self-employed	Occupation Businessman
-----------------------------------	---------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 21 / 2014

**Transaction ID : SA11AI.4172**

Amount of Each Receipt this Period  
2600.00

Online Contribution

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

Mailing Address 2222 W. Hefner Rd.

City	State	Zip Code
Oklahoma City	OK	73120

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

Name of Employer Audio Dimensions	Occupation Owner
--------------------------------------	---------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 28 / 2014

**Transaction ID : SA11AI.4174**

Amount of Each Receipt this Period  
500.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
**Cathy and Kurt Leichter**

Mailing Address 18716 Woody Creel Dr.

City	State	Zip Code
Edmond	OK	73012

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

Name of Employer OCU	Occupation Trustee
-------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 18 / 2014

**Transaction ID : SA11AI.4178**

Amount of Each Receipt this Period  
2000.00

Contribution

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

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

5100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 30
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Mike Turner for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. & Mrs. Hossein and Morvared Namdar**

Mailing Address 4437 Early Morn Dr.

City Plano	State TX	Zip Code 75093
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FEC ID number of contributing federal political committee. **C**

Name of Employer KBS Realty Advisors	Occupation Assistant Vice President, Accounting M
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Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 08 / 2014

**Transaction ID : SA11AI.4184**

Amount of Each Receipt this Period  
 1500.00

Contribution

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

Mailing Address 6 Norlund Way

City The Woodlands	State TX	Zip Code 77382
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FEC ID number of contributing federal political committee. **C**

Name of Employer Turner and Sons Construction	Occupation Owner
--	---------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5100.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 18 / 2014

**Transaction ID : SA11AI.4192**

Amount of Each Receipt this Period  
 2600.00

Contribution

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

Mailing Address 2805 Still Meadow Rd.

City Edmond	State OK	Zip Code 73013
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FEC ID number of contributing federal political committee. **C**

Name of Employer unknown	Occupation unknown
-----------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 08 / 2014

**Transaction ID : SA11AI.4204**

Amount of Each Receipt this Period  
 1000.00

Contribution

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

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

5100.00

13400.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 30
	<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)  
**Mike Turner for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Michael Jeffrey Turner**

Mailing Address 18608 Saddle River Dr.

City Oklahoma City      State OK      Zip Code 73012

FEC ID number of contributing federal political committee. **C H4OK05140**

Name of Employer Oklahoma House of Representati      Occupation State Representative

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 550000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 09 / 2014

**Transaction ID : SA11D.4196**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 50000.00

Candidate Contribution

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

Mailing Address 18608 Saddle River Dr.

City Oklahoma City      State OK      Zip Code 73012

FEC ID number of contributing federal political committee. **C H4OK05140**

Name of Employer Oklahoma House of Representati      Occupation State Representative

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 625000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 23 / 2014

**Transaction ID : SA11D.4197**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 75000.00

Candidate Contribution

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

Mailing Address

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_

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

Amount of Each Receipt this Period  
 \_\_\_\_\_

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

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

\_\_\_\_\_ 125000.00

\_\_\_\_\_ 125000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 30			
	<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)  
**Mike Turner for Congress**

Full Name (Last, First, Middle Initial) <b>A. Aaron, Thomas &amp; Associates, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 9260 Owensmouth Ave.		Amount of Each Disbursement this Period 28761.66 <b>Transaction ID : SB17.4206</b>
City Chatsworth State CA Zip Code 91311	Purpose of Disbursement Advertising 004 Category/Type	
Candidate Name <b>Mike Turner for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK District: 05		

Full Name (Last, First, Middle Initial) <b>B. Affordable Buttons</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 3269 19th St. NW # 6		Amount of Each Disbursement this Period 274.00 <b>Transaction ID : SB17.4208</b>
City Rochester State MN Zip Code 55901	Purpose of Disbursement Buttons 006 Category/Type	
Candidate Name <b>Mike Turner for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK District: 05		

Full Name (Last, First, Middle Initial) <b>c. Aloft Hotel</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2014
Mailing Address 209 N. Walnut Ave.		Amount of Each Disbursement this Period 1724.41 <b>Transaction ID : SB17.4210</b>
City Oklahoma City State OK Zip Code 73104	Purpose of Disbursement Facility/Room Rental 007 Category/Type	
Candidate Name <b>Mike Turner for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK District: 05		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	30760.07
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 30			
	<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)  
**Mike Turner for Congress**

Full Name (Last, First, Middle Initial)  
**A. Arena Online**

Mailing Address 1780 W. Sequoia Vista Circle

City Salt Lake City State UT Zip Code 84104

Purpose of Disbursement Advertising - internet

Candidate Name **Mike Turner for Congress**

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: OK District: 05

Date of Disbursement: 04 / 01 / 2014

Amount of Each Disbursement this Period: 3000.00

Transaction ID : SB17.4213

Category/Type: 004

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

Mailing Address 1780 W. Sequoia Vista Circle

City Salt Lake City State UT Zip Code 84104

Purpose of Disbursement Advertising - internet

Candidate Name **Mike Turner for Congress**

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: OK District: 05

Date of Disbursement: 04 / 25 / 2014

Amount of Each Disbursement this Period: 1925.00

Transaction ID : SB17.4215

Category/Type: 004

Full Name (Last, First, Middle Initial)  
**c. Arena Online**

Mailing Address 1780 W. Sequoia Vista Circle

City Salt Lake City State UT Zip Code 84104

Purpose of Disbursement Advertising - internet

Candidate Name **Mike Turner for Congress**

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: OK District: 05

Date of Disbursement: 04 / 28 / 2014

Amount of Each Disbursement this Period: 300.00

Transaction ID : SB17.4216

Category/Type: 004

**SUBTOTAL** of Disbursements This Page (optional)..... 5225.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 30	
	<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)  
**Mike Turner for Congress**

**A. Arena Online**

Full Name (Last, First, Middle Initial)  
Mailing Address 1780 W. Sequoia Vista Circle

City Salt Lake City State UT Zip Code 84104

Purpose of Disbursement Advertising - internet

Candidate Name Mike Turner for Congress

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: OK District: 05

Date of Disbursement: 04 / 28 / 2014

Amount of Each Disbursement this Period: 600.00

Transaction ID : SB17.4217

Category/Type: 004

**B. Axiom Strategies LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1215 NW Briarcliff Pkwy. Ste. 85

City Kansas City State MO Zip Code 64116

Purpose of Disbursement General Campaign Consulting / Media Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 04 / 01 / 2014

Amount of Each Disbursement this Period: 2000.00

Transaction ID : SB17.4218

Category/Type: 001

**c. Axiom Strategies LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1215 NW Briarcliff Pkwy. Ste. 85

City Kansas City State MO Zip Code 64116

Purpose of Disbursement General Campaign Consulting / Media Consulting

Candidate Name Mike Turner for Congress

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: OK District: 05

Date of Disbursement: 05 / 05 / 2014

Amount of Each Disbursement this Period: 2000.00

Transaction ID : SB17.4220

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional) ..... 4600.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 30			
	<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)  
**Mike Turner for Congress**

Full Name (Last, First, Middle Initial) <b>A. Austin Bridges</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 312 E. Lindsey		Amount of Each Disbursement this Period 535.00 <b>Transaction ID : SB17.4223</b>
City Norman	State OK	
Zip Code 73069	Purpose of Disbursement Campaign Assistant	Category/ Type 001
Candidate Name <b>Mike Turner for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: OK District: 05	

Full Name (Last, First, Middle Initial) <b>B. Debbie Brown</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 2136 Brighton Ave.		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : SB17.4226</b>
City Oklahoma City	State OK	
Zip Code 73120	Purpose of Disbursement Office Cleaning	Category/ Type 001
Candidate Name <b>Mike Turner for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: OK District: 05	

Full Name (Last, First, Middle Initial) <b>c. Candidate Command, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 1420 NW Vivion Ste. 113		Amount of Each Disbursement this Period 19200.00 <b>Transaction ID : SB17.4228</b>
City Kansas City	State MO	
Zip Code 64118	Purpose of Disbursement Palmcards and Mailers	Category/ Type 006
Candidate Name <b>Mike Turner for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: OK District: 05	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	19985.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 30			
	<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)  
**Mike Turner for Congress**

Full Name (Last, First, Middle Initial) <b>A. Candidate Command, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 1420 NW Vivion Ste. 113		Amount of Each Disbursement this Period 14367.00 <b>Transaction ID : SB17.4232</b>
City Kansas City State MO Zip Code 64118	Purpose of Disbursement Mailers 006 Category/Type	
Candidate Name <b>Mike Turner for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 05	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>B. Candidate Command, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address 1420 NW Vivion Ste. 113		Amount of Each Disbursement this Period 14367.00 <b>Transaction ID : SB17.4233</b>
City Kansas City State MO Zip Code 64118	Purpose of Disbursement Mailers 006 Category/Type	
Candidate Name <b>Mike Turner for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 05	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>c. Candidate Command, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address 1420 NW Vivion Ste. 113		Amount of Each Disbursement this Period 12624.00 <b>Transaction ID : SB17.4234</b>
City Kansas City State MO Zip Code 64118	Purpose of Disbursement Mailers 006 Category/Type	
Candidate Name <b>Mike Turner for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 05	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	41358.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 30			
	<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)  
**Mike Turner for Congress**

Full Name (Last, First, Middle Initial) <b>A. Cavin Consulting</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 619 S. McDonald St.		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : SB17.4235</b>
City Stillwater	State OK	
Zip Code 74084	Purpose of Disbursement Website services	Category/ Type 001
Candidate Name <b>Mike Turner for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: OK District: 05	

Full Name (Last, First, Middle Initial) <b>B. CIS</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 615 N. Hudson Ave. Ste. 320		Amount of Each Disbursement this Period 3246.25 <b>Transaction ID : SB17.4249</b>
City Oklahoma City	State OK	
Zip Code 73102	Purpose of Disbursement Legal/Administrative Consulting	Category/ Type 001
Candidate Name <b>Mike Turner for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: OK District: 05	

Full Name (Last, First, Middle Initial) <b>c. DeLullo &amp; Associates, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 815 King St. Ste. 308		Amount of Each Disbursement this Period 3500.00 <b>Transaction ID : SB17.4242</b>
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Fundraising Consulting	Category/ Type 003
Candidate Name <b>Mike Turner for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: OK District: 05	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8246.25
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 30			
	<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)  
**Mike Turner for Congress**

Full Name (Last, First, Middle Initial) <b>A. DeLullo &amp; Associates, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 815 King St. Ste. 308		Amount of Each Disbursement this Period 3500.00 <b>Transaction ID : SB17.4244</b>
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Fundraising Consulting 003 Category/Type	
Candidate Name <b>Mike Turner for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 05	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. DeLullo &amp; Associates, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 815 King St. Ste. 308		Amount of Each Disbursement this Period 214.76 <b>Transaction ID : SB17.4245</b>
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Fundraising Consulting 003 Category/Type	
Candidate Name <b>Mike Turner for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 05	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. DeLullo &amp; Associates, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 815 King St. Ste. 308		Amount of Each Disbursement this Period 3555.17 <b>Transaction ID : SB17.4246</b>
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Fundraising Consulting 003 Category/Type	
Candidate Name <b>Mike Turner for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 05	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7269.93
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 17 OF 30	
	<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)  
**Mike Turner for Congress**

Full Name (Last, First, Middle Initial) <b>A. Galleria Furniture</b>		Date of Disbursement MM / DD / YYYY 05 / 05 / 2014
Mailing Address 3700 W. I-40 Service Rd.		Amount of Each Disbursement this Period 812.76 <b>Transaction ID : SB17.4251</b>
City Oklahoma City	State OK	
Zip Code 73108	Purpose of Disbursement Office Furniture	Category/ Type 001
Candidate Name <b>Mike Turner for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK	District: 05	

Full Name (Last, First, Middle Initial) <b>B. Grassroots Targeting</b>		Date of Disbursement MM / DD / YYYY 05 / 01 / 2014
Mailing Address 707 Prince St.		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : SB17.4253</b>
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Advertising	Category/ Type 004
Candidate Name <b>Mike Turner for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK	District: 05	

Full Name (Last, First, Middle Initial) <b>c. Linda C. Haneborg</b>		Date of Disbursement MM / DD / YYYY 05 / 01 / 2014
Mailing Address 5808 Mistletoe Ct.		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : SB17.4255</b>
City Oklahoma City	State OK	
Zip Code 73142	Purpose of Disbursement Fundraising Consulting	Category/ Type 003
Candidate Name <b>Mike Turner for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK	District: 05	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5812.76
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 30		
	<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)  
**Mike Turner for Congress**

Full Name (Last, First, Middle Initial) <b>A. Linda C. Haneborg</b>		Date of Disbursement MM / DD / YYYY 05 / 14 / 2014
Mailing Address 5808 Mistletoe Ct.		Amount of Each Disbursement this Period 281.76 <b>Transaction ID : SB17.4256</b>
City Oklahoma City	State OK	
Zip Code 73142	Purpose of Disbursement Fundraising Consulting	Category/ Type 003
Candidate Name <b>Mike Turner for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: OK District: 05	

Full Name (Last, First, Middle Initial) <b>B. Home Outlet Furniture</b>		Date of Disbursement MM / DD / YYYY 05 / 05 / 2014
Mailing Address 3801 W. Reno Ave.		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : SB17.4257</b>
City Oklahoma City	State OK	
Zip Code 73107	Purpose of Disbursement Office Furniture	Category/ Type 001
Candidate Name <b>Mike Turner for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: OK District: 05	

Full Name (Last, First, Middle Initial) <b>C. HPPC</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2014
Mailing Address 615 N. Hudson Ave. Ste. 320		Amount of Each Disbursement this Period 14333.33 <b>Transaction ID : SB17.4259</b>
City Oklahoma City	State OK	
Zip Code 73102	Purpose of Disbursement General Campaign Consulting	Category/ Type 001
Candidate Name <b>Mike Turner for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: OK District: 05	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	15015.09
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 30			
	<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)  
**Mike Turner for Congress**

Full Name (Last, First, Middle Initial) <b>A. HPPC</b>		Date of Disbursement MM / DD / YYYY 05 / 01 / 2014
Mailing Address 615 N. Hudson Ave. Ste. 320		Amount of Each Disbursement this Period 14333.00 <b>Transaction ID : SB17.4260</b>
City Oklahoma City	State OK Zip Code 73102	
Purpose of Disbursement General Campaign Consulting	Category/Type 001	
Candidate Name <b>Mike Turner for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK District: 05		

Full Name (Last, First, Middle Initial) <b>B. i360 LLC</b>		Date of Disbursement MM / DD / YYYY 04 / 11 / 2014
Mailing Address PO Box 37046		Amount of Each Disbursement this Period 350.00 <b>Transaction ID : SB17.4262</b>
City Baltimore	State MD Zip Code 21297-3046	
Purpose of Disbursement Canvassing Consulting	Category/Type 007	
Candidate Name <b>Mike Turner for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK District: 05		

Full Name (Last, First, Middle Initial) <b>C. i360 LLC</b>		Date of Disbursement MM / DD / YYYY 04 / 14 / 2014
Mailing Address PO Box 37046		Amount of Each Disbursement this Period 1199.68 <b>Transaction ID : SB17.4264</b>
City Baltimore	State MD Zip Code 21297-3046	
Purpose of Disbursement Data Subscription	Category/Type 007	
Candidate Name <b>Mike Turner for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK District: 05		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	15882.68
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 30			
	<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)  
**Mike Turner for Congress**

Full Name (Last, First, Middle Initial) <b>A. i360 LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address PO Box 37046		Amount of Each Disbursement this Period 350.00 <b>Transaction ID : SB17.4265</b>
City Baltimore	State MD	
Zip Code 21297-3046	Purpose of Disbursement Canvassing Subscription	Category/ Type 007
Candidate Name <b>Mike Turner for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: OK District: 05	

Full Name (Last, First, Middle Initial) <b>B. Imagine Agency</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 11445 E. Via Linda Ste. 2141		Amount of Each Disbursement this Period 25000.00 <b>Transaction ID : SB17.4271</b>
City Scottsdale	State AZ	
Zip Code 85259	Purpose of Disbursement Advertising - Radio/TV	Category/ Type 004
Candidate Name <b>Mike Turner for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: OK District: 05	

Full Name (Last, First, Middle Initial) <b>c. Imagine Agency</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 11445 E. Via Linda Ste. 2141		Amount of Each Disbursement this Period 75000.00 <b>Transaction ID : SB17.4270</b>
City Scottsdale	State AZ	
Zip Code 85259	Purpose of Disbursement Advertising - Radio/TV	Category/ Type 004
Candidate Name <b>Mike Turner for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: OK District: 05	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	100350.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 30		
	<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)  
**Mike Turner for Congress**

Full Name (Last, First, Middle Initial) <b>A. Imagine Agency</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 11445 E. Via Linda Ste. 2141		Amount of Each Disbursement this Period 51500.00 <b>Transaction ID : SB17.4268</b>
City Scottsdale State AZ Zip Code 85259	Purpose of Disbursement Advertising - Radio/TV 004 Category/Type	
Candidate Name <b>Mike Turner for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 05	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Imagine Agency</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 11445 E. Via Linda Ste. 2141		Amount of Each Disbursement this Period 25000.00 <b>Transaction ID : SB17.4267</b>
City Scottsdale State AZ Zip Code 85259	Purpose of Disbursement Advertising - Radio/TV 004 Category/Type	
Candidate Name <b>Mike Turner for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 05	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Imagine Agency</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2014
Mailing Address 11445 E. Via Linda Ste. 2141		Amount of Each Disbursement this Period 6000.00 <b>Transaction ID : SB17.4266</b>
City Scottsdale State AZ Zip Code 85259	Purpose of Disbursement Advertising - Radio/TV 004 Category/Type	
Candidate Name <b>Mike Turner for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 05	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	82500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 30		
	<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)  
**Mike Turner for Congress**

Full Name (Last, First, Middle Initial) <b>A. Joshua Promotions</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address 14759 Benson St.		Amount of Each Disbursement this Period 6228.10 <b>Transaction ID : SB17.4272</b>
City Overland Park State KS Zip Code 66221	Purpose of Disbursement Bumper Stickers, Bag Signs 006 Category/Type	
Candidate Name <b>Mike Turner for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 05	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Linda Haneborg &amp; Associates</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 5805 Mistletoe Ct. Ste. 100		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : SB17.4274</b>
City Oklahoma City State OK Zip Code 73142	Purpose of Disbursement Fundraising Consulting 003 Category/Type	
Candidate Name <b>Mike Turner for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 05	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>C. Elizabeth A. Norrie</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 26-5 Robin Rdg.		Amount of Each Disbursement this Period 550.00 <b>Transaction ID : SB17.4283</b>
City Enid State OK Zip Code 73703-6424	Purpose of Disbursement Campaign Assistant 001 Category/Type	
Candidate Name <b>Mike Turner for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 05	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9778.10
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 30	
	<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)  
**Mike Turner for Congress**

Full Name (Last, First, Middle Initial) <b>A. Elizabeth A. Norrie</b>		Date of Disbursement MM / DD / YYYY 06 / 04 / 2014
Mailing Address 26-5 Robin Rdg.		Amount of Each Disbursement this Period 550.00 <b>Transaction ID : SB17.4285</b>
City Enid	State OK	
Purpose of Disbursement Campaign Assistant	Category/ Type 001	
Candidate Name <b>Mike Turner for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: OK	District: 05	

Full Name (Last, First, Middle Initial) <b>B. Stephen Paulsen</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2014
Mailing Address 2133 Brighton Ave.		Amount of Each Disbursement this Period 2300.00 <b>Transaction ID : SB17.4288</b>
City The Village	State OK	
Purpose of Disbursement Administrative Consulting	Category/ Type 001	
Candidate Name <b>Mike Turner for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: OK	District: 05	

Full Name (Last, First, Middle Initial) <b>c. Stephen Paulsen</b>		Date of Disbursement MM / DD / YYYY 05 / 01 / 2014
Mailing Address 2133 Brighton Ave.		Amount of Each Disbursement this Period 2200.00 <b>Transaction ID : SB17.4289</b>
City The Village	State OK	
Purpose of Disbursement Administrative Consulting	Category/ Type 001	
Candidate Name <b>Mike Turner for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: OK	District: 05	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5050.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 30			
	<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)  
**Mike Turner for Congress**

Full Name (Last, First, Middle Initial) <b>A. Stephen Paulsen</b>		Date of Disbursement MM / DD / YYYY 05 / 05 / 2014
Mailing Address 2133 Brighton Ave.		Amount of Each Disbursement this Period 58.40 <b>Transaction ID : SB17.4290</b>
City The Village	State OK	
Purpose of Disbursement Administrative Consulting	001	Category/ Type
Candidate Name <b>Mike Turner for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK	District: 05	

Full Name (Last, First, Middle Initial) <b>B. Stephen Paulsen</b>		Date of Disbursement MM / DD / YYYY 05 / 07 / 2014
Mailing Address 2133 Brighton Ave.		Amount of Each Disbursement this Period 79.00 <b>Transaction ID : SB17.4291</b>
City The Village	State OK	
Purpose of Disbursement Administrative Consulting	001	Category/ Type
Candidate Name <b>Mike Turner for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK	District: 05	

Full Name (Last, First, Middle Initial) <b>c. Stephen Paulsen</b>		Date of Disbursement MM / DD / YYYY 05 / 30 / 2014
Mailing Address 2133 Brighton Ave.		Amount of Each Disbursement this Period 2200.00 <b>Transaction ID : SB17.4292</b>
City The Village	State OK	
Purpose of Disbursement Administrative Consulting	001	Category/ Type
Candidate Name <b>Mike Turner for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK	District: 05	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2337.40
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 30		
	<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)  
**Mike Turner for Congress**

Full Name (Last, First, Middle Initial) <b>A. Precision Strategy Group</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address PO Box 891105		Amount of Each Disbursement this Period 872.19 <b>Transaction ID : SB17.4295</b>
City Oklahoma City	State OK	
Purpose of Disbursement Solicitation Design and Printing	Category/ Type 003	
Candidate Name <b>Mike Turner for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: OK	District: 05	

Full Name (Last, First, Middle Initial) <b>B. Quail Plaza</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address Hefner & N. May Ave.		Amount of Each Disbursement this Period 550.00 <b>Transaction ID : SB17.4297</b>
City Oklahoma City	State OK	
Purpose of Disbursement Office Space Deposit	Category/ Type 001	
Candidate Name <b>Mike Turner for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: OK	District: 05	

Full Name (Last, First, Middle Initial) <b>c. Quail Plaza</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address Hefner & N. May Ave.		Amount of Each Disbursement this Period 550.00 <b>Transaction ID : SB17.4300</b>
City Oklahoma City	State OK	
Purpose of Disbursement Office Rent	Category/ Type 001	
Candidate Name <b>Mike Turner for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: OK	District: 05	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1972.19
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 30		
	<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)  
**Mike Turner for Congress**

Full Name (Last, First, Middle Initial) <b>A. Quail Plaza</b>		Date of Disbursement MM / DD / YYYY 06 / 01 / 2014
Mailing Address Hefner & N. May Ave.		Amount of Each Disbursement this Period 550.00 <b>Transaction ID : SB17.4301</b>
City Oklahoma City	State OK	
Zip Code 73120	Purpose of Disbursement Office Rent	Category/ Type 001
Candidate Name <b>Mike Turner for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: OK District: 05	

Full Name (Last, First, Middle Initial) <b>B. Sooner Mailing Services, Inc.</b>		Date of Disbursement MM / DD / YYYY 04 / 18 / 2014
Mailing Address 1216 NW 3rd St.		Amount of Each Disbursement this Period 638.53 <b>Transaction ID : SB17.4304</b>
City Oklahoma City	State OK	
Zip Code 73106	Purpose of Disbursement Mailers	Category/ Type 006
Candidate Name <b>Mike Turner for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: OK District: 05	

Full Name (Last, First, Middle Initial) <b>c. The City Sentinel</b>		Date of Disbursement MM / DD / YYYY 04 / 23 / 2014
Mailing Address PO Box 60876		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : SB17.4238</b>
City Oklahoma City	State OK	
Zip Code 73102	Purpose of Disbursement Advertising - newspaper	Category/ Type 004
Candidate Name <b>Mike Turner for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: OK District: 05	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1588.53
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 30	
	<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)  
**Mike Turner for Congress**

Full Name (Last, First, Middle Initial) <b>A. The Pin People</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2014
Mailing Address 35 West St. Ste. 101		Amount of Each Disbursement this Period 420.00 <b>Transaction ID : SB17.4293</b>
City Spring Valley	State NY Zip Code 10977	
Purpose of Disbursement Pins	Category/Type 006	
Candidate Name Mike Turner for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK District: 05		

Full Name (Last, First, Middle Initial) <b>B. Tony Newcomb Sportswear Inc.</b>		Date of Disbursement MM / DD / YYYY 05 / 08 / 2014
Mailing Address 313 E. Ayers St. Ste. B		Amount of Each Disbursement this Period 596.06 <b>Transaction ID : SB17.4306</b>
City Edmond	State OK Zip Code 73034	
Purpose of Disbursement T-Shirts	Category/Type 006	
Candidate Name Mike Turner for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK District: 05		

Full Name (Last, First, Middle Initial) <b>c. Visionary Resources International, LLC</b>		Date of Disbursement MM / DD / YYYY 05 / 01 / 2014
Mailing Address PO Box 3707		Amount of Each Disbursement this Period 4561.07 <b>Transaction ID : SB17.4278</b>
City Washington	State DC Zip Code 20027	
Purpose of Disbursement General Campaign Consulting	Category/Type 001	
Candidate Name Mike Turner for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK District: 05		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5577.13
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 30			
	<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)  
**Mike Turner for Congress**

Full Name (Last, First, Middle Initial) <b>A. Visionary Resources International, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address PO Box 3707		Amount of Each Disbursement this Period 517.39 <b>Transaction ID : SB17.4280</b>
City Washington State DC Zip Code 20027	Purpose of Disbursement General Campaign Consulting 001 Category/Type	
Candidate Name <b>Mike Turner for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 05	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Visionary Resources International, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address PO Box 3707		Amount of Each Disbursement this Period 6393.26 <b>Transaction ID : SB17.4281</b>
City Washington State DC Zip Code 20027	Purpose of Disbursement General Campaign Consulting 001 Category/Type	
Candidate Name <b>Mike Turner for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 05	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Visionary Resources International, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address PO Box 3707		Amount of Each Disbursement this Period 4388.79 <b>Transaction ID : SB17.4282</b>
City Washington State DC Zip Code 20027	Purpose of Disbursement General Campaign Consulting 001 Category/Type	
Candidate Name <b>Mike Turner for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 05	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	11299.44
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 30	
	<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)  
**Mike Turner for Congress**

Full Name (Last, First, Middle Initial) <b>A. Wilson Perkins Allen</b>		Date of Disbursement MM / DD / YYYY 04 / 09 / 2014
Mailing Address 1319 Classen Dr.		Amount of Each Disbursement this Period 16075.00 <b>Transaction ID : SB17.4308</b>
City Oklahoma City	State OK Zip Code 73103	
Purpose of Disbursement Opinion Polling/Research	Category/Type 005	
Candidate Name <b>Mike Turner for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK District: 05		

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	16075.00
<b>TOTAL</b> This Period (last page this line number only).....	390682.57

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

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4140**  
**Mike Turner for Congress**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2014  
**Michael Jeffrey Turner**  Primary  
 Mailing Address General  
 18608 Saddle River Dr.  Other (specify) ▼

City State ZIP Code  
 Oklahoma City OK 73012

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
250000.00	0.00	250000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
01 / 27 / 2014	5/4/15	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	250000.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	250000.00

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