

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Oklahoma Leadership Council

ADDRESS (number and street) 4031 N. Lincoln Boulevard
 Check if different than previously reported. (ACC)
Oklahoma City OK 73105

2. **FEC IDENTIFICATION NUMBER** C00167213
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

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 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 02 01 2009 through 02 28 2009

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 MELVIN H. GRAGG

Signature of Treasurer Electronically Filed by MELVIN H. GRAGG Date 03 20 2009

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 3X
(Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Oklahoma Leadership Council

Report Covering the Period: From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		79422.36
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	63682.13									
(c) Total Receipts (from Line 19)	8613.89	9837.02								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	72296.02	89259.38								
7. Total Disbursements (from Line 31)	18877.19	35840.55								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	53418.83	53418.83								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

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**

Write or Type Committee Name
Oklahoma Leadership Council

Report Covering the Period: From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	0	9

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	2800.00	2800.00
(i) Itemized (use Schedule A)	4213.00	5433.00
(ii) Unitemized	7013.00	8233.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	7013.00	8233.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	1600.89	1604.02
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	8613.89	9837.02
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	8613.89	9837.02

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	712.80	1186.00
(ii) Non-Federal Share.....	4039.20	6824.96
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	4752.00	8010.96
22. Transfers to Affiliated/Other Party Committees.....	0.00	100.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. 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 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	500.00	500.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	13625.19	27229.59
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	13625.19	27229.59
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	18877.19	35840.55
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	14837.99	29015.59

DETAILED SUMMARY PAGE
of Disbursements

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	7013.00	8233.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7013.00	8233.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	712.80	1186.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	712.80	1186.00

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

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

FOR LINE NUMBER: PAGE 6 / 23
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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)
Oklahoma Leadership Council

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

Mailing Address 2191 SE KYLE RD

City State Zip Code
BARTLESVILLE OK 74006

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

Name of Employer Occupation
PHILLIPS PETROLEUM CO ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
02 / 26 / 2009

Transaction ID: SA11AI.14494

Amount of Each Receipt this Period
1000.00

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

Mailing Address 3200 KIMBERLEA DRIVE

City State Zip Code
MUSKOGEE OK 74403

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

Name of Employer Occupation
SELF EMPLOYED APPRAISER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 09 / 2009

Transaction ID: SA11AI.14487

Amount of Each Receipt this Period
250.00

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

Mailing Address 7310 S. 26TH W AVE

City State Zip Code
TULSA OK 74132

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 12 / 2009

Transaction ID: SA11AI.14489

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► 1500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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)
Oklahoma Leadership Council

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

Mailing Address 20237 SW TINNEY RD

City CACHE State OK Zip Code 73527

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

Name of Employer SELF - EMPLOYED Occupation CPA - RANCHER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt 02 / 28 / 2009

Transaction ID: SA11AI.14522

Amount of Each Receipt this Period 300.00

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

Mailing Address 4024 N. HARVY PARKWAY

City OKLAHOMA CITY State OK Zip Code 73118

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 13 / 2009

Transaction ID: SA11AI.14491

Amount of Each Receipt this Period 500.00

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

Mailing Address P.O. BOX 429

City MADILL State OK Zip Code 73446

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

Name of Employer SELF EMPLOYED Occupation LEWIS SHAW ENTERPRISES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 27 / 2009

Transaction ID: SA11AI.14495

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 1050.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 8 / 23	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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)
Oklahoma Leadership Council

A.	Full Name (Last, First, Middle Initial) CHARLES ZEECK		Date of Receipt																					
	Mailing Address P.O. BOX 14458		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	2	/	2	0	/	2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	2	/	2	0	/	2	0	0	9														
	City	State	Zip Code	Transaction ID: SA11AI.14492																				
	OKLAHOMA CITY	OK	73113	Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	<input type="text" value="250.00"/>																					
Name of Employer SELF EMPLOYED		Occupation REAL ESTATE																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="250.00"/>																					

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="250.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="2800.00"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 23
	(check only one)
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input checked="" type="checkbox"/> 17	

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)
Oklahoma Leadership Council

A.

Full Name (Last, First, Middle Initial)
GARY JONES

Mailing Address 20237 SW TINNEY RD

City State Zip Code
CACHE OK 73527

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

Name of Employer Occupation
SELF - EMPLOYED CPA - RANCHER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
02 / 13 / 2009

Transaction ID: SA17.14484

Amount of Each Receipt this Period
500.00

DEPOSIT INTO COMMITTEE ACCOUNT IN ERROR

B.

Full Name (Last, First, Middle Initial)
OKLAHOMA COUNTY REPUBLICAN PARTY

Mailing Address 4031 N. LINCOLN BLVD

City State Zip Code
OKLAHOMA CITY OK 73105

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
MM / DD / YYYY
02 / 20 / 2009

Transaction ID: SA17.14485

Amount of Each Receipt this Period
1100.00

OFFICE SPACE RENT

SUBTOTAL of Receipts This Page (optional)	1600.00
TOTAL This Period (last page this line number only)	1600.00

**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)

PAGE 10 / 23

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
Oklahoma Leadership Council

A.

Full Name (Last, First, Middle Initial)
OKLAHOMA COUNTY REPUBLICAN PARTY

Transaction ID: SB29.14486

Date of Disbursement

Mailing Address 4031 N. LINCOLN BLVD

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	3		2	0	0	9

City State Zip Code
OKLAHOMA CITY OK 73105

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
TRANSFER OF DEPOSIT IN ERROR.

--

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

500.00

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

500.00

**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)

PAGE 11 / 23

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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)
Oklahoma Leadership Council

A.	Full Name (Last, First, Middle Initial) ARVEST BANK	Transaction ID: SB30B.14474
	Mailing Address P.O. BOX 55500	Date of Disbursement 02 / 02 / 2009
	City OKLAHOMA CITY State OK Zip Code 73155	Amount of Each Disbursement this Period 84.47
	Purpose of Disbursement FEDERAL PAYROLL TAX DEPOSIT	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ARVEST BANK	Transaction ID: SB30B.14499
	Mailing Address P.O. BOX 55500	Date of Disbursement 02 / 06 / 2009
	City OKLAHOMA CITY State OK Zip Code 73155	Amount of Each Disbursement this Period 1124.55
	Purpose of Disbursement FEDERAL PAYROLL TAX DEPOSIT	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) ARVEST BANK	Transaction ID: SB30B.14465
	Mailing Address P.O. BOX 55500	Date of Disbursement 02 / 28 / 2009
	City OKLAHOMA CITY State OK Zip Code 73155	Amount of Each Disbursement this Period 1.97
	Purpose of Disbursement BANK SERVICE CHARGE	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1210.99
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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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)
Oklahoma Leadership Council

A.	Full Name (Last, First, Middle Initial) ARVEST BANK	Transaction ID: SB30B.14471 Date of Disbursement
	Mailing Address P.O. BOX 55500	<input type="text" value="02"/> <input type="text" value="28"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City OKLAHOMA CITY State OK Zip Code 73155	Amount of Each Disbursement this Period
	Purpose of Disbursement BANK SERVICE CHARGE	<input type="text" value="14.12"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ARVEST BANK	Transaction ID: SB30B.14498 Date of Disbursement
	Mailing Address P.O. BOX 55500	<input type="text" value="02"/> <input type="text" value="28"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City OKLAHOMA CITY State OK Zip Code 73155	Amount of Each Disbursement this Period
	Purpose of Disbursement BANK SERVICE CHARGE	<input type="text" value="8.53"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) BANKCARD OPERATIONS	Transaction ID: SB30B.14477 Date of Disbursement
	Mailing Address PO BXO 24990	<input type="text" value="02"/> <input type="text" value="17"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City TULSA State OK Zip Code 73124	Amount of Each Disbursement this Period
	Purpose of Disbursement CREDIT CARD PAYMENT	<input type="text" value="1264.68"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1287.33"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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)

PAGE 13 / 23

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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)
Oklahoma Leadership Council

A.	Full Name (Last, First, Middle Initial) CHELSEA BARNETT	Transaction ID: SB30B.14483 Date of Disbursement MM / DD / YYYY 02 / 25 / 2009
	Mailing Address 609 HOEHNER AVE	Amount of Each Disbursement this Period 300.00
	City OKARCHE State OK Zip Code 73762	
	Purpose of Disbursement STAFF TRAVEL TO ATTEND CPAC CONFERENCE	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) KRISTEN BROWN	Transaction ID: SB30B.14515 Date of Disbursement MM / DD / YYYY 02 / 06 / 2009
	Mailing Address 520 W MAIN	Amount of Each Disbursement this Period 662.00
	City OKLAHOMA CITY State OK Zip Code 73102	
	Purpose of Disbursement STAFF WAGES - NET PAYROLL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) GARY JONES	Transaction ID: SB30B.14501 Date of Disbursement MM / DD / YYYY 02 / 06 / 2009
	Mailing Address 20237 SW TINNEY RD	Amount of Each Disbursement this Period 1907.58
	City CACHE State OK Zip Code 73527	
	Purpose of Disbursement STAFF WAGES - NET PAYROLL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	2869.58
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)

PAGE 14 / 23

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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)
Oklahoma Leadership Council

A.	Full Name (Last, First, Middle Initial) JAY MANDRACCIA	Transaction ID: SB30B.14502 Date of Disbursement	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	6		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y														
0	2		0	6		2	0	0	9														
	Mailing Address 1505 BRECKENRIDGE		<table border="1"> <tr> <td colspan="10">Amount of Each Disbursement this Period</td> </tr> <tr> <td colspan="10" style="text-align: center;">656.34</td> </tr> </table>	Amount of Each Disbursement this Period										656.34									
Amount of Each Disbursement this Period																							
656.34																							
	City EDMOND	State OK	Zip Code 73013																				
	Purpose of Disbursement STAFF WAGES - NET PAYROLL	<input type="checkbox"/> 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.	Full Name (Last, First, Middle Initial) OKLAHOMA BUSINESS INSURORS	Transaction ID: SB30B.14479 Date of Disbursement	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	7		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y														
0	2		1	7		2	0	0	9														
	Mailing Address 3001 UNITED FOUNDERS BLVD		<table border="1"> <tr> <td colspan="10">Amount of Each Disbursement this Period</td> </tr> <tr> <td colspan="10" style="text-align: center;">954.00</td> </tr> </table>	Amount of Each Disbursement this Period										954.00									
Amount of Each Disbursement this Period																							
954.00																							
	City OKLAHOMA CITY	State OK	Zip Code 73112																				
	Purpose of Disbursement LIABILITY INSURANCE	<input type="checkbox"/> 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:																						
C.	Full Name (Last, First, Middle Initial) OKLAHOMA TAX COMMISSION	Transaction ID: SB30B.14473 Date of Disbursement	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	6		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y														
0	2		0	6		2	0	0	9														
	Mailing Address P.O. BOX 26880		<table border="1"> <tr> <td colspan="10">Amount of Each Disbursement this Period</td> </tr> <tr> <td colspan="10" style="text-align: center;">291.00</td> </tr> </table>	Amount of Each Disbursement this Period										291.00									
Amount of Each Disbursement this Period																							
291.00																							
	City OKLAHOMA CITY	State OK	Zip Code 73147																				
	Purpose of Disbursement STATE PAYROLL TAX DEPOSIT	<input type="checkbox"/> Category/ Type																					
	Candidate Name																						
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
	State: District:																						

SUBTOTAL of Disbursements This Page (optional)	1901.34
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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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)
Oklahoma Leadership Council

A.	Full Name (Last, First, Middle Initial) JEFFREY J PETERS	Transaction ID: SB30B.14503 Date of Disbursement
	Mailing Address 404 HUNTERS GLEN COURT	<input type="text" value="02"/> <input type="text" value="06"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City MOORE State OK Zip Code 73160	Amount of Each Disbursement this Period
	Purpose of Disbursement STAFF WAGES - NET PAYROLL	<input type="text" value="109.90"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PINPOINT CONSULTANTS	Transaction ID: SB30B.14466 Date of Disbursement
	Mailing Address 8622 E. 98TH PLACE	<input type="text" value="02"/> <input type="text" value="06"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City TULSA State OK Zip Code 74133	Amount of Each Disbursement this Period
	Purpose of Disbursement STRATEGIC PLANNING & WEBSITE MAINTENANCE	<input type="text" value="2500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) PINPOINT CONSULTANTS	Transaction ID: SB30B.14467 Date of Disbursement
	Mailing Address 8622 E. 98TH PLACE	<input type="text" value="02"/> <input type="text" value="06"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City TULSA State OK Zip Code 74133	Amount of Each Disbursement this Period
	Purpose of Disbursement REIMBURSEMENT- STAFF TRAVEL & CELL PHONE	<input type="text" value="40.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2649.90"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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)

PAGE 16 / 23

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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)
Oklahoma Leadership Council

A.	Full Name (Last, First, Middle Initial) PINPOINT CONSULTANTS	Transaction ID: SB30B.14468 Date of Disbursement
	Mailing Address 8622 E. 98TH PLACE	<input type="text" value="02"/> / <input type="text" value="20"/> / <input type="text" value="2009"/>
	City TULSA State OK Zip Code 74133	Amount of Each Disbursement this Period
	Purpose of Disbursement STRATEGIC PLANNING & WEBSITE MAINTENANCE	<input type="text" value="2500.00"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PINPOINT CONSULTANTS	Transaction ID: SB30B.14469 Date of Disbursement
	Mailing Address 8622 E. 98TH PLACE	<input type="text" value="02"/> / <input type="text" value="25"/> / <input type="text" value="2009"/>
	City TULSA State OK Zip Code 74133	Amount of Each Disbursement this Period
	Purpose of Disbursement REIMBURSEMENT - STAFF TRAVEL	<input type="text" value="216.00"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) U.S. POSTMASTER	Transaction ID: SB30B.14478 Date of Disbursement
	Mailing Address 5200 N. SHARTEL	<input type="text" value="02"/> / <input type="text" value="17"/> / <input type="text" value="2009"/>
	City OKLAHOMA CITY State OK Zip Code 73150	Amount of Each Disbursement this Period
	Purpose of Disbursement POSTAGE	<input type="text" value="745.00"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3461.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="13380.14"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A. Full Name (Last, First, Middle Initial) GARY JONES			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 20237 SW TINNEY RD			Allocated Activity or Event Year-To-Date 4141.54		
City CACHE	State OK	Zip Code 73527	Date <input type="text" value="02"/> / <input type="text" value="20"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: STAFF WAGES - NET PAYROLL			Transaction ID: H4.14516		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
286.14		1621.44		1907.58

B. Full Name (Last, First, Middle Initial) KRISTEN BROWN			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 520 W MAIN			Allocated Activity or Event Year-To-Date 4793.55		
City OKLAHOMA CITY	State OK	Zip Code 73102	Date <input type="text" value="02"/> / <input type="text" value="20"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: STAFF WAGES - NET PAYROLL			Transaction ID: H4.14517		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
97.80		554.21		652.01

C. Full Name (Last, First, Middle Initial) JAY MANDRACCIA			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1505 BRECKENRIDGE			Allocated Activity or Event Year-To-Date 5565.46		
City EDMOND	State OK	Zip Code 73013	Date <input type="text" value="02"/> / <input type="text" value="20"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: STAFF WAGES - NET PAYROLL			Transaction ID: H4.14518		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
115.79		656.12		771.91

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
499.73		2831.77		3331.50

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

A. Full Name (Last, First, Middle Initial) JEFFREY J PETERS			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 404 HUNTERS GLEN COURT			Allocated Activity or Event Year-To-Date 5785.25		
City MOORE	State OK	Zip Code 73160	Date <input type="text" value="02"/> / <input type="text" value="20"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: STAFF WAGES - NET PAYROLL			Transaction ID: H4.14519		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
32.97		186.82		219.79

B. Full Name (Last, First, Middle Initial) LAUREE BETH STEDJE			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 520 W. MAIN			Allocated Activity or Event Year-To-Date 5819.88		
City OKLAHOMA CITY	State OK	Zip Code 73102	Date <input type="text" value="02"/> / <input type="text" value="20"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: STAFF WAGES - NET PAYROLL			Transaction ID: H4.14520		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.19		29.44		34.63

C. Full Name (Last, First, Middle Initial) ARVEST BANK			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. BOX 55500			Allocated Activity or Event Year-To-Date 6985.96		
City OKLAHOMA CITY	State OK	Zip Code 73155	Date <input type="text" value="02"/> / <input type="text" value="20"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: STAFF WAGES - NET PAYROLL			Transaction ID: H4.14521		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
174.91		991.17		1166.08

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
213.07		1207.43		1420.50

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
712.80		4039.20		4752.00

SCHEDULE L (FEC Form 3X)

AGGREGATION PAGE: LEVIN FUNDS

Transaction ID: SL.14464

NAME OF COMMITTEE (In Full)
Oklahoma Leadership Council

NAME OF ACCOUNT
OKLAHOMA LEADERSHIP LEVIN ACCOUNT

	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
a. Itemized..... (Use Schedule L-A)	0.00	0.00
b. Unitemized.....	0.00	0.00
c. Total.....	0.00	0.00
2. OTHER RECEIPTS.....	0.03	0.06
3. TOTAL RECEIPTS..... (Add Lines 1c and 2)	0.03	0.06
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
a. Voter Registration.....	0.00	0.00
b. Voter ID.....	0.00	0.00
c. GOTV.....	0.00	0.00
d. Generic Campaign.....	0.00	0.00
e. Total.....	0.00	0.00
5. OTHER DISBURSEMENTS.....	6.82	6.82
6. TOTAL DISBURSEMENTS..... (Add Lines 4e and 5)	6.82	6.82
7. BEGINNING CASH ON HAND..... (for Column B, use cash as of January 1st)	453.88	453.85
8. RECEIPTS..... (from Line 3)	0.03	0.06
9. SUBTOTAL..... (Add Lines 7 and 8)	453.91	453.91
10. DISBURSEMENTS..... (From Line 6)	6.82	6.82
11. ENDING CASH ON HAND..... (Subtract Line 10 From Line 9)	447.09	447.09

SCHEDULE L-A (FEC Form 3X) ITEMIZED RECEIPTS OF LEVIN FUNDS

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

FOR LINE NUMBER: 1a 2
(check only one)

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)
Oklahoma Leadership Council

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

Mailing Address P.O. BOX 55500

City	State	Zip Code
OKLAHOMA CITY	OK	73155

Name of Employer or Principal Place of Business

Occupation

Transaction ID: SASL2.14525

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	8	/	2	0	0	9

Amount of Each Receipt this Period

0.03

Aggregate Year-to-Date

0.06

Account: 12678

SUBTOTAL of Receipts This Page (optional)

0.03

TOTAL This Period (last page this line number only)

0.03

**SCHEDULE L-B (FEC Form 3X)
ITEMIZED DISBURSEMENTS
OF LEVIN FUNDS**

Use separate schedule(s) for each category of the Aggregation Page	FOR LINE NUMBER: (check only one)		PAGE 21 / 23
	<input type="checkbox"/> 4a	<input type="checkbox"/> 4c	<input checked="" type="checkbox"/> 5
	<input type="checkbox"/> 4b	<input type="checkbox"/> 4d	

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)
Oklahoma Leadership Council

A.	Full Name (Last, First, Middle Initial) / Full Organization Name ARVEST BANK	Transaction ID: SBSL5.14526 Date of Disbursement
	Mailing Address P.O. BOX 55500	<input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/>
	City State Zip Code OKLAHOMA CITY OK 73155	Amount of Each Disbursement this Period <input type="text" value="6.82"/>
	Purpose of Disbursement BANK SERVICE CHARGE	Account:

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="6.82"/>
TOTAL This Period (last page this line number only)	<input type="text" value="6.82"/>

Image# 29991780892

Form/Schedule: **SA17**
Transaction ID: **SA17.14484**

AMOUNT DEPOSITED INTO COMMITTEE'S ACCOUNT IN ERROR. SEE THE CHECK TRANSFERING THIS AMOUNT TO OKLAHOMA COUNTY REPUBLICAN PARTY ON 2-13-09.

Form/Schedule: **SB29**
Transaction ID: **SB29.14486**

THE PAYMENT OF \$500 TO THE OKLAHOMA COUNTY REPUBLICAN PARTY CORRECTS THE DEPOSIT ON 2-13-09. THE DEPOSIT AND PAYMENT ARE LISTED FOR DISCLOSURE INTO THE COMMITTEES ACCOUNT IN ERROR. THE DEPOSIT AND PAYMENT ARE LISTED FOR DISCLOSURE.

Image# 29991780893

Form/Schedule: **SB30B**

Transaction ID: **SB30B.14477**

CREDIT CARD PAYMENT -- SUMMARY AS FOLLOWS -- AMERICAN AIRLINES, 4333 AMON CARTER BLVD, F
.20; AIRLINE TICKETS FOR STAFF TRAVEL TO WASHINGTON DC FOR CONFERENCE. CAPITAL HILL HILT
NW, WASHINGTON DC 20036, \$256.48, HOTEL FOR STAFF AT CONFERENCE. CALLINGCARD.COM, 982
1, HOUSTON TX 77024, \$50.00, RENEWAL DEPOSIT FOR TELECONFERENCE SERVICE.
