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Image# 14960054951

FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An A	uthorized Com	mittee			Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT	•	cample: If typinger the lines.	g, type	12FE4M5	
Guild for Congres	SS		1 1 1 1 1	1 1 1 1		1
	PO Box 6621					
ADDRESS (number and s	treet)					
Check if differe than previously reported. (ACC	Edmond				OK	73083
2. <b>FEC IDENTIFICAT</b>	TION NUMBER ▼	CITY A			STATE A	ZIP CODE
C C00546242		3. IS THIS REPORT	X NEW	OR	AMEND (A)	STATE ▼ DISTRICT  OK  OK  OK  OK  OK  OK  OK  OK  OK  O
4. TYPE OF REPO	RT (Choose One)					
(a) Quarterly Repo	, ,	(b) 12-Day PRE	-Election Repo	ort for the:	-	
April 15 Qu	uarterly Report (Q1)	Ц	Primary (12P	)	General (1	2G) Runoff (12R)
	arterly Report (Q2)		Convention (	12C)	Special (1	2S)
	5 Quarterly Report (Q3)	Election on	M M /	D D /	YYYY	in the State of
X January 31	Year-End Report (YE)	(c) 30-Day <b>POS</b>	ST-Election Rep	port for the:		
			General (30G	i)	Runoff (30	R) Special (30S)
Termination	n Report (TER)	Election on	M M	D D /	Y " Y " Y " Y	in the State of
5. Covering Period	M M / D D /	2013	through	M M 12	/ 31 /	2013
I certify that I have exam	nined this Report and to	the best of my kr	nowledge and	belief it is tro	ue, correct and	l complete.
Type or Print Name of T	reasurer Thomas Guild	I				
Signature of Treasurer	Thomas Guild		[Electronically I	Filed] D	Date 01	/ DDD / Y Y Y Y Y Y 2014
NOTE: Submission of fals	se, erroneous, or incomple	te information may	subject the per	son signing t	this Report to the	ne penalties of 2 U.S.C. §437g.
Office Use Only						FEC FORM 3 (Revised 02/2003)

### SUMMARY PAGE

FEC Form 3 (Revised 02/2003) of Receipts and Disbursements

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Write or Type Committee Name

Guild 1	for Cor	ngress
---------	---------	--------

2013 10 12 31 01 2013 Report Covering the Period: From: To: **COLUMN A COLUMN B Election Cycle-to-Date** This Period Net Contributions (other than loans) **Total Contributions** (a) 9523.86 18348.16 (other than loans) (from Line 11(e)) .... (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) ..... (c) Net Contributions (other than loans) 9523.86 18348.16 (subtract Line 6(b) from Line 6(a)) ...... Net Operating Expenditures (a) Total Operating Expenditures 4868.54 13208.09 (from Line 17) ..... (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 4868.54 13208.09 (subtract Line 7(b) from Line 7(a)) ...... Cash on Hand at Close of 13366.57 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 7300.00 Schedule C and/or Schedule D).....

#### 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)

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Write or Type Committee Name

#### **Guild for Congress**

Report Covering the Period: From: 10 01 2013 To: 12 31 2013

	I. RECEIPTS	I. RECEIPTS COLUMN A Total This Period			
I1. CON	ITRIBUTIONS (other than loans) FROM:				
( )	Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	4162.27	5938.27		
	(ii) Unitemized	5261.59	12309.89		
	(iii) TOTAL of contributions from individuals	9423.86	18248.16		
	Political Party Committees	100.00	100.00		
` '	Other Political Committees (such as PACs)	0.00	0.00		
(e)	The Candidate TOTAL CONTRIBUTIONS	0.00	0.00		
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	9523.86	18348.16		
	NSFERS FROM OTHER HORIZED COMMITTEES	0.00	0.00		
3. LOA					
	Made or Guaranteed by the Candidate	5600.00	7300.00		
` '	All Other Loans	0.00	0.00		
` '	TOTAL LOANS (add Lines 13(a) and (b))	5600.00	7300.00		
	SETS TO OPERATING ENDITURES				
	unds, Rebates, etc.)	0.00	0.00		
	ER RECEIPTS dends, Interest, etc.)	0.00	926.50		
11(e)	AL RECEIPTS (add Lines , 12, 13(c), 14, and 15) y Total to Line 24, page 4)	15123.86	26574.66		

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3 (Revised 02/2003)

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		II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPI	ERATING EXPENDITURES	4868.54	13208.09
18.		ANSFERS TO OTHER THORIZED COMMITTEES	0.00	0.00
19.	LOA	AN 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.	REF	FUNDS 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
			7 7 7 7	
	(d)	TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
21.	ОТІ	HER DISBURSEMENTS	0.00	0.00
22.	. •	<b>TAL DISBURSEMENTS</b> d Lines 17, 18, 19(c), 20(d), and 21)	4868.54	13208.09
		III. CASH SU	MMARY	
23.	CAS	SH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	3111.25
24	то	TAL RECEIPTS THIS PERIOD (from Line 1	16, page 3)	15123.86
25.	SUI	BTOTAL (add Line 23 and Line 24)		18235.11
26.	TO	TAL DISBURSEMENTS THIS PERIOD (from	m Line 22)	4868.54
7	CAS	SH ON HAND AT CLOSE OF REPORTING	G PERIOD	13366.57

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

FOR LINE NUMBER: **PAGE** 5 OF 28 Use separate schedule(s) (check only one) 11a 11b 11d 11c 12 13a 13b

for each category of the Detailed Summary Page 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) Guild for Congress Full Name (Last, First, Middle Initial) Veronna Brown Date of Receipt Mailing Address 308 NW 42nd St 2013 07 City State Zip Code Transaction ID: SA11AI.4660 OK 73118 Oklahoma City FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 200.00 Name of Employer Occupation Contribution Information Requested Receipt For: 2014 Election Cycle-to-Date Primary X General 400.00 Other (specify) Full Name (Last, First, Middle Initial) Joel Epstein Date of Receipt Mailing Address 521 W Lyon Farm Dr 04 2013 City State Zip Code Transaction ID: SA11AI.4573 Greenwich CT 06831 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 25.00 Name of Employer Occupation Consultant Contribution Self Receipt For: 2014 Election Cycle-to-Date ✓ General Primary 275.00 Other (specify) Full Name (Last, First, Middle Initial) Joel Epstein Date of Receipt Mailing Address 521 W Lyon Farm Dr 2013 29 City State Zip Code Transaction ID: SA11AI.4833 CT 06831 Greenwich FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 25.00 Name of Employer Occupation Self Consultant Contribution Receipt For: 2014 Election Cycle-to-Date X General Primary 300.00 Other (specify) 250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

FOR LINE NUMBER: **PAGE** 6 OF 28 Use separate schedule(s) (check only one) 11a 11d 11b 11c 12

for each category of the Detailed Summary Page 13a 13b 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) Guild for Congress Full Name (Last, First, Middle Initial) Joel Epstein Date of Receipt Mailing Address 521 W Lyon Farm Dr 2013 31 City State Zip Code Transaction ID: SA11AI.4886 CT 06831 Greenwich FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 25.00 Name of Employer Occupation Contribution Self Consultant Receipt For: 2014 Election Cycle-to-Date X General Primary 325.00 Other (specify) Full Name (Last, First, Middle Initial) James Gragg Date of Receipt Mailing Address 10609 Regent 07 2013 City State Zip Code Transaction ID: SA11AI.4655 Oklahoma City OK 73162 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation Retired Contribution Retired Receipt For: 2014 Election Cycle-to-Date M General Primary 1000.00 Other (specify) Full Name (Last, First, Middle Initial) Barbara Hall Date of Receipt Mailing Address 9532 Sand Hill Ct 2013 04 City State Zip Code Transaction ID: SA11AI.4577 CO Highlands Ranch 80126 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 50.00 Name of Employer Occupation N/A N/A Contribution Receipt For: 2014 Election Cycle-to-Date X General Primary 325.00 Other (specify) 575.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

### SCHEDULE A (FEC Form 3)

FOR LINE NUMBER: **PAGE** 7 OF 28 Use separate schedule(s) (check only one) 11a 11b 11c 12 13a 13b 14

for each category of the ITEMIZED RECEIPTS Detailed Summary Page 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) Guild for Congress Full Name (Last, First, Middle Initial) Barbara Hall Date of Receipt Mailing Address 9532 Sand Hill Ct 2013 80 City State Zip Code Transaction ID: SA11AI.4779 CO 80126 Highlands Ranch FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 25.00 Name of Employer Occupation Contribution N/A N/A Receipt For: 2014 Election Cycle-to-Date X General Primary 350.00 Other (specify) Full Name (Last, First, Middle Initial) Barbara Hall Date of Receipt Mailing Address 9532 Sand Hill Ct 31 2013 Citv State Zip Code Transaction ID: SA11AI.4895 Highlands Ranch CO 80126 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 25.00 Name of Employer Occupation N/A Contribution N/A Receipt For: 2014 Election Cycle-to-Date M General Primary 375.00 Other (specify) Full Name (Last, First, Middle Initial) Debbie Hammons Date of Receipt Mailing Address 31408 Old Highway 2013 25 City State Zip Code Transaction ID: SA11AI.4642 OK 74852 Macomb FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation **RH Trucking** Owner Contribution Receipt For: 2014 Election Cycle-to-Date | General Primary 500.00 Other (specify) 550.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

### SCHEDULE A (FEC Form 3)

Use separate schedule(s) for each category of the

FOF	LINE	PAGE	:	8	OF		28				
(che	(check only one)										
X	11a		11b		11c		11	d			
	12		13a		13b		14			15	

ITEMIZED RECEIPTS Detailed Summary Page 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) Guild for Congress Full Name (Last, First, Middle Initial) Gene Hunt Date of Receipt Mailing Address 4536 Kiva Ct 2013 02 City State Zip Code Transaction ID: SA11AI.4828 OK 73135 Oklahoma City FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 60.00 Name of Employer Occupation Contribution Retired Retired Receipt For: 2014 Election Cycle-to-Date Primary X General 636.00 Other (specify) Full Name (Last, First, Middle Initial) Nancy Kenderdine Date of Receipt Mailing Address 2805 NW 166th St 04 2013 City State Zip Code Transaction ID: SA11AI.4571 Edmond OK 73012 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 200.00 Name of Employer Occupation Retired Contribution Retired Receipt For: 2014 Election Cycle-to-Date ✓ General Primary 650.00 Other (specify) Full Name (Last First Middle Initial) C.

	Date of Receipt
	12 31 2013
e Zip Code	Transaction ID : SA11AI.4892
73012	Transaction in . OATTAL 1992
	Amount of Each Receipt this Period
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900.00	
	ation on Cycle-to-Date

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

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

510.00

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

FOR LINE NUMBER: **PAGE** 9 OF Use separate schedule(s) (check only one) 11a 11d 11b 11c 12

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for each category of the Detailed Summary Page 13a 13b 14 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) Guild for Congress Full Name (Last, First, Middle Initial) Dennis Lipsitz Date of Receipt Mailing Address 7112 NW 119th St 10 2013 31 City State Zip Code Transaction ID: SA11AI.4727 OK 73162 Oklahoma City FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 50.00 Name of Employer Occupation Contribution Unemployed Unemployed Receipt For: 2014 Election Cycle-to-Date Primary X General 275.00 Other (specify) Full Name (Last, First, Middle Initial) Dennis Lipsitz Date of Receipt Mailing Address 7112 NW 119th St 29 2013 City State Zip Code Transaction ID: SA11AI.4838 Oklahoma City OK 73162 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 50.00 Name of Employer Occupation Contribution Unemployed Unemployed Receipt For: 2014 Election Cycle-to-Date M General Primary 325.00 Other (specify) Full Name (Last, First, Middle Initial) Dennis Lipsitz Date of Receipt Mailing Address 7112 NW 119th St 2013 12 31 City State Zip Code Transaction ID: SA11AI.4908 OK Oklahoma City 73162 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 50.00 Name of Employer Occupation Unemployed Unemployed Contribution Receipt For: 2014 Election Cycle-to-Date | General Primary 375.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

FOR LINE NUMBER: **PAGE** 10 OF 28 (check only one) 11a 11b 11d 11c Detailed Summary Page 12 13a 13b 14

Use separate schedule(s) for each category of the 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) Guild for Congress Full Name (Last, First, Middle Initial) Nancy Majors Date of Receipt Mailing Address 4334 NW Expressway 2013 31 Ste 252 City State Zip Code Transaction ID: SA11AI.4918 OK 73116 Oklahoma City FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 250.00 Name of Employer Occupation Contribution N/A N/A Receipt For: 2014 Election Cycle-to-Date Primary X General 250.00 Other (specify) Full Name (Last, First, Middle Initial) Kenneth McMillen Date of Receipt Mailing Address 500 Edwards Dr 31 2013 City State Zip Code Transaction ID: SA11AI.4902 Norman RΙ 73072 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 100.00 Name of Employer Occupation Requested Contribution Information Receipt For: 2014 Election Cycle-to-Date M General Primary 300.00 Other (specify) Full Name (Last, First, Middle Initial) David Powell Date of Receipt Mailing Address 18628 Agua Dr 2013 11 City State Zip Code Transaction ID: SA11AI.4593 OK Edmond 73012 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation Self Freelance Translator Contribution Receipt For: 2014 Election Cycle-to-Date X General Primary 250.00 Other (specify) 600.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

### SCHEDULE A (FEC Form 3)

FOR LINE NUMBER: PAGE 11 OF 28 (check only one) 11a 11b 11d 11c 12 13a 13b 14

Use separate schedule(s) for each category of the ITEMIZED RECEIPTS Detailed Summary Page 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) Guild for Congress Full Name (Last, First, Middle Initial) Mark Ryan Date of Receipt Mailing Address 247 W 26th St, 2013 31 Apt 4C City State Zip Code Transaction ID: SA11AI.4893 NY 10001 New York City FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 227.27 Name of Employer Occupation Contribution Google Information Technology Receipt For: 2014 Election Cycle-to-Date X General Primary 227.27 Other (specify) Full Name (Last, First, Middle Initial) Wanda Jo Stapleton Date of Receipt Mailing Address 425 SW 51st St 04 2013 City State Zip Code Transaction ID: SA11AI.4574 Oklahoma City OK 73109 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 300.00 Name of Employer Occupation Retired Contribution Retired Receipt For: 2014 Election Cycle-to-Date M General Primary 500.00 Other (specify) Full Name (Last, First, Middle Initial) Wanda Jo Stapleton Date of Receipt Mailing Address 425 SW 51st St 2013 18 City State Zip Code Transaction ID: SA11AI.4704 OK Oklahoma City 73109 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation Retired Retired Contribution Receipt For: 2014 Election Cycle-to-Date X General Primary 1000.00 Other (specify) 1027.27 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

FOR LINE NUMBER: PAGE 12 OF 28 Use separate schedule(s) (check only one)  $|X|_{11a}$ 11b 11c 11d 12 13a

for each category of the Detailed Summary Page 13b 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) Guild for Congress Full Name (Last, First, Middle Initial) Tallent & Associates Date of Receipt Mailing Address 1620 Ridgecrest 10 2013 17 City State Zip Code Transaction ID: SA11AI.4634 OK 73013 Edmond FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 500.00 Name of Employer Occupation Contribution Receipt For: 2014 Election Cycle-to-Date Primary X General 500.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) 500.00 SUBTOTAL of Receipts This Page (optional)..... 4162.27 TOTAL This Period (last page this line number only).....

## SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

	FC	OR LINE	NU	MBER:	PAGE	 13 OF	28
Use separate schedule(s)	(cl	neck only	or	ne)			
for each category of the		11a	×	11b	11c	11d	
Detailed Summary Page		12		13a	13b	14	15

_						12	13a	13b	14	15				
An or	y information copied from such Reports and S for commercial purposes, other than using the	Statements may e name and add	not be sold o	r used by any olitical committe	person tee to s	for the	purpose ontribution	of soliciting	g contrib h comm	utions ittee.				
	NAME OF COMMITTEE (In Full)													
$\backslash $	Guild for Congress													
	Full Name (Last, First, Middle Initial)													
A.	Don Sherry  Mailing Address 1408 NW 147th St				-		Receipt		V V	V				
						12 31 2013								
	City Edmond	State OK	Zip Code 73013		Tra	Transaction ID : SA11B.4891								
	FEC ID number of contributing					_								
	federal political committee.	С			/	Amount	of Each I	Receipt this	s Period					
	Name of Employer	Occupation							100.0	00				
	Information	Requested			c	ontribut	ion							
	Receipt For: 2014 Primary General	Election Cycl	e-to-Date		_									
	Other (specify)													
_	Full Name (Last, First, Middle Initial)					- · ·	<u> </u>							
B.	Mailing Address				- '	Date of	Receipt			V				
						M M / D D / Y Y Y Y								
	City	State	Zip Code											
	FEC ID number of contributing federal political committee.					Amount	of Each	Receipt this	s Period					
	Name of Employer	Occupation												
	Receipt For:	Election Cycl	e-to-Date											
	Primary General				1									
	Other (specify)	-			-									
	Full Name (Last, First, Middle Initial)					D-4f	Danaint							
C.	Mailing Address				- '		Receipt							
						M M	/ D		Y	Y				
	City	State	Zip Code		-									
	FEC ID number of contributing federal political committee.	С				Amount	of Each	Receipt this	s Period					
		0					0. 200			-				
	Name of Employer	Occupation												
	leceipt For: Election Cycle-to-Date													
	Primary General Other (specify)													
	Curior (specify)				1									
Г						100.0	00							
S	UBTOTAL of Receipts This Page (optional)				_	-			100.0					
۱.	OTAL This Period (last page this line number of	only)				١			100.0	00				

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 OF 28 (check only one)  11a
Any information copied from such Reports and S or for commercial purposes, other than using the			person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Guild for Congress			
Full Name (Last, First, Middle Initial) Thomas Guild Mailing Address PO Box 6621  City Edmond	State OK	Zip Code 73083	Date of Receipt  11 08 2013  Transaction ID : SA13A.4753
FEC ID number of contributing federal political committee.  Name of Employer University of Central Oklahoma	C H0 Occupation Professor	OK05155	Amount of Each Receipt this Period  800.00  Loan
Receipt For: 2014 Primary General Other (specify)		ycle-to-Date 2500.00	
Full Name (Last, First, Middle Initial)  Thomas Guild  Mailing Address PO Box 6621			Date of Receipt  11 29 2013
City Edmond	State OK	Zip Code 73083	Transaction ID : SA13A.4826
FEC ID number of contributing federal political committee.		OK05155	Amount of Each Receipt this Period
Name of Employer University of Central Oklahoma Receipt For: 2014	Occupation Professor Election C	n ycle-to-Date	2500.00 Loan
Primary Seneral Other (specify)		5000.00	
Full Name (Last, First, Middle Initial)  Thomas Guild  Mailing Address PO Box 6621			Date of Receipt
City Edmond	State OK	Zip Code 73083	12 31 2013  Transaction ID : SA13A.4922
FEC ID number of contributing federal political committee.	С но	OK05155	Amount of Each Receipt this Period
Name of Employer University of Central Oklahoma  Receipt For: 2014  Primary General Other (specify)	Occupation Professor Election C	ycle-to-Date 7300.00	2300.00 Loan
SUBTOTAL of Receipts This Page (optional)			5600.00

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

5600.00

ActBlue

Cambridge

City

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

NAME OF COMMITTEE (In Full) Guild for Congress

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 382110

House

Senate

House Senate

District:

President

District:

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 382110

Purpose of Disbursement Merchant Service Fees

President

Purpose of Disbursement

Merchant Service Fees

Candidate Name

Office Sought:

ActBlue

Cambridge

Candidate Name

Office Sought:

State:

City

**PAGE** 15 28 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19b 19a Detailed Summary Page 20a 20b 20c 21 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. Date of Disbursement 2013 10 04 State Zip Code Amount of Each Disbursement this Period MA 02238 50.48 001 Transaction ID: SB17.4590 Category/ Type Disbursement For: Primary General Other (specify) Date of Disbursement 10 2013 11 State Zip Code Amount of Each Disbursement this Period MA 02238 15.31 001 Transaction ID: SB17.4623 Category/ Type Disbursement For: Primary General Other (specify) Date of Disbursement 10 2013 18 State Zip Code Amount of Each Disbursement this Period 02238 MA

Full Name (Last, First, Middle Initial)

#### c. ActBlue

State:

Mailing Address PO Box 382110 City Cambridge Purpose of Disbursement Merchant Service Fees 001 Category/

Candidate Name Office Sought: Disbursement For: House Primary General Senate

39.45

Transaction ID : SB17.4724

State:	District:	Other (specify)										
SUBTOTAL o	f Disbursements This Page	(optional)	I	_	,	Ξ	I		_	10	5.24	
TOTAL This F	Period (last page this line n	umber only)	Ξ	Ξ	,	Ξ		,	Ξ	Ξ		

Type

### S

	J											
		3 (FEC Form SBURSEMENT	-	FOR LINE NUMBER: PAGE 16 OF 28 (check only one)    X   17								
						person for the purpose of soliciting contributions e to solicit contributions from such committee.						
	NAME OF COMP	, ,	-									
Α.	Full Name (Last, ActBlue	First, Middle Initial)				Date of Disbursement						
	Mailing Address	PO Box 382110				10 24 2013						
	City Cambridge		State MA	Zip Code 02238		Amount of Each Disbursement this Period						
	Purpose of Disbu Merchant Service				001	2.63 Transaction ID : SB17.4804						
	Candidate Name				Category/ Type	Transaction is 102 in 100 in						
	Office Sought:	House Senate President	Disbursement For Primary Other (s	General								
_	State:	District:										
В.	Λ of Dlug	First, Middle Initial) PO Box 382110		Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y								
	City		Associated Facts Bishamous at this Basis I									
	Cambridge		MA		Amount of Each Disbursement this Period							
	Purpose of Disbu Merchant Service	e Fee			001	3.56 Transaction ID : SB17.4865						
	Candidate Name				Category/ Type							
	Office Sought:	House Senate President	Disbursement For Primary Other (s	General								
	State:	District:										
C.	Full Name (Last, ActBlue	First, Middle Initial)				Date of Disbursement						
	Mailing Address	PO Box 382110				11 08 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
	City Cambridge			p Code 2238		Amount of Each Disbursement this Period						
	Purpose of Disbu Merchant Service	ursement e Fees		001	16.53							
	Candidate Name			Category/ Type	Transaction ID : SB17.4803							
	Office Sought:	House Senate President	Disbursement For Primary Other (s	General								
	State:	District:										
						22.72						

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

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

### ITEMIZED DISBURSEMENTS

**PAGE** 17 28 FOR LINE NUMBER: SCHEDULE B (FEC Form 3) Use separate schedule(s) (check only one) for each category of the X 17 18 19b 19a Detailed Summary Page 20a 20b 20c 21 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) Guild for Congress Full Name (Last, First, Middle Initial) Date of Disbursement ActBlue 2013 Mailing Address PO Box 382110 19 City State Zip Code Amount of Each Disbursement this Period MA Cambridge 02238 Purpose of Disbursement 0.16 Merchant Service Fee 001 Transaction ID: SB17.4820 Candidate Name Category/ Type Disbursement For: 2014 Office Sought: House **X** General Senate Primary Other (specify) President District: State: Full Name (Last, First, Middle Initial) ActBlue Date of Disbursement Mailing Address PO Box 382110 22 2013 11 City State Zip Code Amount of Each Disbursement this Period MA 02238 Cambridge Purpose of Disbursement Merchant Service Fees 1.79 001 Transaction ID: SB17.4813 Candidate Name Category/ Type Disbursement For: Office Sought: House Senate Primary General Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement c. ActBlue Mailing Address PO Box 382110 2013 29 City State Zip Code Amount of Each Disbursement this Period 02238 Cambridge MA Purpose of Disbursement 7.26 Merchant Service Fees 001 Transaction ID : SB17.4841 Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) State: District:

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

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

9.21

### ITEMIZED DISBURSEMENTS

**PAGE** 18 28 FOR LINE NUMBER: SCHEDULE B (FEC Form 3) Use separate schedule(s) (check only one) for each category of the X 17 18 19b 19a Detailed Summary Page 20a 20b 20c 21 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) Guild for Congress Full Name (Last, First, Middle Initial) Date of Disbursement ActBlue 2013 Mailing Address PO Box 382110 12 06 City State Zip Code Amount of Each Disbursement this Period MA Cambridge 02238 Purpose of Disbursement 8.85 Merchant Service Fees 001 Transaction ID: SB17.4842 Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) President District: State: Full Name (Last, First, Middle Initial) ActBlue Date of Disbursement Mailing Address PO Box 382110 12 31 2013 City State Zip Code Amount of Each Disbursement this Period MA 02238 Cambridge Purpose of Disbursement Merchant Service Fees 22.83 001 Transaction ID: SB17.4874 Candidate Name Category/ Type Disbursement For: Office Sought: House Senate Primary General Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement c. ActBlue Mailing Address PO Box 382110 12 2013 31 City State Zip Code Amount of Each Disbursement this Period 02238 Cambridge MA Purpose of Disbursement 41.41 Merchant Service Fees 001 Transaction ID : SB17.4875 Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) State: District:

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

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

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	CHEDULE B EMIZED DIS	•	-	Use separate sch for each category Detailed Summar	y of the	FOR LINE NUMBER: PAGE 19 OF 28 (check only one)    X   17						
						person for the purpose of soliciting contributions e to solicit contributions from such committee.						
	NAME OF COMMIT Guild for Cor	, ,										
Α.	Full Name (Last, Fi AT&T	rst, Middle Initial)				Date of Disbursement						
	Mailing Address P	O Box 536216				10 18 2013						
	City Atlanta		State GA	Zip Code 30353		Amount of Each Disbursement this Period						
	Purpose of Disburs Telephone Service				001	50.89 Transaction ID : SB17.4687						
	Candidate Name				Category/ Type	Transaction is . 35 m. 4007						
	Office Sought:	House Senate President	Disbursement For Primary Other (s	General								
_	State: I Full Name (Last, Fi	District: rst. Middle Initial)				+						
В.	AT&T  Mailing Address P	·	Date of Disbursement  M M M / D D / Y M Y M Y M Y M Y M Y M Y M Y M Y M Y									
	City											
	Atlanta		State GA	Zip Code 30353		Amount of Each Disbursement this Period						
	Purpose of Disburs Telephone Service				001	50.89 Transaction ID : SB17.4812						
	Candidate Name				Category/ Type							
	Office Sought:	House Senate President	Disbursement For Primary Other (s	General								
		District:										
C.	Full Name (Last, Fi Campaign Te		ofessionals, LL	.C		Date of Disbursement						
		601 NW Expressway te. 305W	/			11 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
	City			p Code 3112		Amount of Each Disbursement this Period						
	Oklahoma City Purpose of Disburs Campaign Finance	sement Reporting	1080.00									
	Candidate Name				001 Category/ Type	Transaction ID : SB17.4676						
	Office Sought:	House Senate President	Disbursement For Primary Other (s	General								
_	State:	District:										
						1181.78						

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

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS				Use separate sch for each category Detailed Summar	of the	FOR LINE NUMBER: PAGE 20 OF 28 (check only one)    X   17	
						person for the purpose of soliciting contributions ee to solicit contributions from such committee.	
	NAME OF COMM Guild for Co	, ,					
Α.	Full Name (Last, First, Middle Initial) Oklahoma Democratic Party				Date of Disbursement		
	Mailing Address 4100 N Lincoln Blvd					10 14 2013	
	City State Zip Code Oklahoma City OK 73105				Amount of Each Disbursement this Period		
	Purpose of Disbursement VAN access Services			005	1000.00 Transaction ID : SB17.4672		
	Candidate Name				Category/ Type		
	Office Sought:	House Senate President	Disbursement For Primary Other (s	General			
	State:	District:					
B.	Full Name (Last, First, Middle Initial) Pam Paul  Mailing Address 2632 Cashion Pl				Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City State Zip Code Oklahoma City OK 73112					Amount of Each Disbursement this Period  100.00  Transaction ID : SB17.4856	
	Purpose of Disbursement Consulting Service 001				001		
	Candidate Name			Category/ Type			
	Office Sought:	House Senate President District:	Disbursement For Primary Other (s	General			
	Full Name (Last, First, Middle Initial)						
C.	Pam Paul				Date of Disbursement		
	Mailing Address 2632 Cashion PI				10 D D / Y Y Y Y Y 2013		
	City State Zip Code				Amount of Each Disbursement this Period		
	Oklahoma City OK 73112  Purpose of Disbursement Consulting Service				200.00		
	Candidate Name				001 Category/ Type	Transaction ID : SB17.4675	
	Office Sought:	House Senate President	Disbursement For Primary Other (s	General	туре		
	State:	District:					

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

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

1300.00

### SCHEDULE B (FEC Form 3)

**PAGE** 21 28 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c 21

ITEMIZED DISBURSEMENTS 19b 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) Guild for Congress Full Name (Last, First, Middle Initial) Stoneway Office Center Date of Disbursement 2013 Mailing Address 2401 NW 39th St 10 17 City State Zip Code Amount of Each Disbursement this Period OK Oklahoma City 73112 Purpose of Disbursement Campaign Office Rent Expense 1544.00 001 Transaction ID: SB17.4674 Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) President District: State: Full Name (Last, First, Middle Initial) Date of Disbursement В. Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Category/ Type Disbursement For: Office Sought: House Senate **Primary** General Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Category/ Type Office Sought: Disbursement For: House Senate General Primary President Other (specify) State: District: 1544.00 SUBTOTAL of Disbursements This Page (optional)..... 4236.04

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

Use separate schedule(s)

FOR LINE NUMBER:

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DANS			Detailed Summary Page		13a 13b
AME OF COMMITTEE (In Full)	)		Transac	ction ID : SC/10.4284	
Guild for Congress					
LOAN SOURCE Full Name Thomas Guild	e (Last, First, Midd	dle Initial)	[PERSONAL FUNDS]	Election: 2014 Primary General	
Mailing Address PO Box 6621				Other (specify) ▼	
City		State ZIP Co	ode		
Edmond		OK 73083			
Original Amount of Loan		Cumulative Payment To	Date Bala	ance Outstanding at Close of	This Period
2	200.00		0.00	2	00.00
TERMS  Date Incurred	1	Date Due	Interest Rate	e Secure	ad:
M 01 M / D 01 D / Y	Ž013 Y		4/1/2015 Y 0.00	0 % (apr)	X
List All Endorsers or Guar	antors (if any) to	Loan Source		Ye	es No
1. Full Name (Last, First, N	Middle Initial)		Name of Employer		
Mailing Address			Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:	7	
2. Full Name (Last, First, M	iddle Initial)		Name of Employer		
Mailing Address			Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:	7 7 7	
3. Full Name (Last, First, M	iddle Initial)		Name of Employer		
Mailing Address			Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
4. Full Name (Last, First, M	iddle Initial)		Name of Employer		
Mailing Address			Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:	9 9 9	
SUBTOTALS This Period This	Page (optional)		<b>&gt;</b>	2	00.00
TOTALS This Period (last page	e in this line only)				
Carry outstanding balance on	v to LINE 3. Sche	edule D, for this line. If	no Schedule D. carry for	ward to appropriate line of S	Summarv.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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(check only one) Detailed Summary Page Transaction ID: SC/10.4209 NAME OF COMMITTEE (In Full) Guild for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Thomas Guild ★ General Mailing Address Other (specify)  $\blacktriangledown$ PO Box 6621 City State ZIP Code OK 73083 Edmond Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 1000.00 0.00 1000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>D</sup> 11 <sup>M</sup>06<sup>M</sup> 2013 4/1/2015 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 1000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

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Detailed Summary Page Transaction ID: SC/10.4393 NAME OF COMMITTEE (In Full) Guild for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Thomas Guild ★ General Mailing Address Other (specify)  $\blacktriangledown$ PO Box 6621 City State ZIP Code OK 73083 Edmond Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 300.00 0.00 300.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>M</sup> 09<sup>M</sup> 06 2013 4/1/2015 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 300.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

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28

Detailed Summary Page 13b Transaction ID: SC/10.4548 NAME OF COMMITTEE (In Full) Guild for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Thomas Guild ★ General Mailing Address Other (specify)  $\blacktriangledown$ PO Box 6621 City State ZIP Code OK 73083 Edmond Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 200.00 0.00 200.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>D</sup>26 <sup>M</sup> 09<sup>M</sup> 2013 4/1/2015 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 200.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

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(check only one) Detailed Summary Page Transaction ID: SC/10.4753 NAME OF COMMITTEE (In Full) Guild for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Thomas Guild ★ General Mailing Address Other (specify)  $\blacktriangledown$ PO Box 6621 City State ZIP Code OK 73083 Edmond Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 800.00 0.00 800.00 **TERMS** Date Incurred Date Due Interest Rate Secured: м <sub>= М</sub> 08 2013 4/1/2015 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 800.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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(check only one) Detailed Summary Page Transaction ID: SC/10.4826 NAME OF COMMITTEE (In Full) Guild for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Thomas Guild ★ General Mailing Address Other (specify)  $\blacktriangledown$ PO Box 6621 City State ZIP Code OK 73083 Edmond Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 2500.00 0.00 2500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: м <sub>= М</sub> <sup>D</sup>29<sup>D</sup> 2013 4/1/2015 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 2500.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

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**LOANS** (check only one) Detailed Summary Page Transaction ID: SC/10.4922 NAME OF COMMITTEE (In Full) Guild for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Thomas Guild General Mailing Address Other (specify)  $\blacktriangledown$ PO Box 6621 City State ZIP Code OK 73083 Edmond Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 2300.00 0.00 2300.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>D</sup>31 <sup>M</sup> 12<sup>M</sup> 2013 04/1/2015 0.00 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 2300.00 TOTALS This Period (last page in this line only) ...... 7300.00 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.