

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 Robertson For Congress

ADDRESS (number and street) PO Box 452123 Grove OK 74345 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00557686 3. IS THIS REPORT NEW (N) OR AMENDED (A) CITY STATE ZIP CODE STATE DISTRICT OK 02

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) Termination Report (TER) (b) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on M M / D D / Y Y Y Y in the State of (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on M M / D D / Y Y Y Y in the State of

5. Covering Period 06 / 05 / 2014 through 06 / 30 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. John Raymond Farris

Signature of Treasurer Mr. John Raymond Farris [Electronically Filed] Date 07 / 02 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Robertson For Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	3770.41	31708.97
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	3770.41	31708.97
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	50389.57	128200.95
(b) Total Offsets to Operating Expenditures (from Line 14).....	150.00	1460.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	50239.57	126740.95
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1668.02	
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).....	108272.08	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Robertson For Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	2750.00	27515.39
(ii) Unitemized.....	1020.41	4193.58
(iii) TOTAL of contributions from individuals ▶	3770.41	31708.97
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	3770.41	31708.97
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	38000.00	38000.00
(b) All Other Loans.....	1700.00	60000.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	39700.00	98000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	150.00	1460.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	43620.41	131168.97

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	50389.57	128200.95
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	1300.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	50389.57	129500.95

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	8437.18
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	43620.41
25. SUBTOTAL (add Line 23 and Line 24).....	52057.59
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	50389.57
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1668.02

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 37
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Robertson For Congress

A. Full Name (Last, First, Middle Initial)
Randy Drake

Mailing Address 5433 W 520

City Pryor State OK Zip Code 74361

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

Name of Employer Self Occupation Rancher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 18 / 2014

Transaction ID : SA11AI.4515

Amount of Each Receipt this Period
 250.00

Check

B. Full Name (Last, First, Middle Initial)
Mr. Stephen Holly

Mailing Address P.O. Box 234

City Southwest City State MO Zip Code 64863

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

Name of Employer Self Employed Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 20 / 2014

Transaction ID : SA11AI.4486

Amount of Each Receipt this Period
 1500.00

Check

C. Full Name (Last, First, Middle Initial)
Shad Schenck

Mailing Address 6042 W Division Rd

City Waynetown State IN Zip Code 47990

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

Name of Employer Self Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 10 / 2014

Transaction ID : SA11AI.4495

Amount of Each Receipt this Period
 500.00

Check

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 37
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Robertson For Congress

A. Full Name (Last, First, Middle Initial)
Earl Shero

Mailing Address 913 SW 1030 Ave

City Wilburton State OK Zip Code 74578

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

Name of Employer Self Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 16 / 2014

Transaction ID : SA11AI.4517

Amount of Each Receipt this Period
 250.00

Check

B. Full Name (Last, First, Middle Initial)
Earl Shero

Mailing Address 913 SW 1030 Ave

City Wilburton State OK Zip Code 74578

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

Name of Employer Self Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 16 / 2014

Transaction ID : SA11AI.4519

Amount of Each Receipt this Period
 250.00

Check

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

500.00

2750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 37
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Robertson For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Darrel Marshall Robertson

Mailing Address 68251 E 340 Rd

City Jay State OK Zip Code 74346

FEC ID number of contributing federal political committee. **C H4OK02147**

Name of Employer Self Occupation Cattleman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 37000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 25 / 2014

Transaction ID : SA13A.4527

Amount of Each Receipt this Period
 _____ 37000.00

Wire transfer

B. Full Name (Last, First, Middle Initial)
Mr. Darrel Marshall Robertson

Mailing Address 68251 E 340 Rd

City Jay State OK Zip Code 74346

FEC ID number of contributing federal political committee. **C H4OK02147**

Name of Employer Self Occupation Cattleman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 38000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2014

Transaction ID : SA13A.4528

Amount of Each Receipt this Period
 _____ 1000.00

Wire transfer

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

Mailing Address

City _____ State _____ Zip Code _____

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

_____ 38000.00

_____ 38000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 37
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Robertson For Congress

A. Full Name (Last, First, Middle Initial)
Grand Savings Bank

Mailing Address PO Box 451809

City State Zip Code
Grove OK 74345

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
60000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 21 / 2014

Transaction ID : SA13B.4485

Amount of Each Receipt this Period
 1700.00

LOC

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

1700.00

1700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 37			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Robertson For Congress

Full Name (Last, First, Middle Initial) A. All American Outdoors		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address PO Box 3984		Amount of Each Disbursement this Period 1300.00 Transaction ID : SB17.4556
City Springfield	State MO	
Purpose of Disbursement Billboard signs	Category/ Type 006	
Candidate Name Robertson For Congress	Disbursement For: 2014	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK District: 02		

Full Name (Last, First, Middle Initial) B. Hoguen Apperson		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 33000 S 690 Rd		Amount of Each Disbursement this Period 400.30 Transaction ID : SB17.4529
City Jay	State OK	
Purpose of Disbursement Payroll	Category/ Type 001	
Candidate Name Robertson For Congress	Disbursement For: 2014	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK District: 02		

Full Name (Last, First, Middle Initial) c. Hoguen Apperson		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2014
Mailing Address 33000 S 690 Rd		Amount of Each Disbursement this Period 313.14 Transaction ID : SB17.4531
City Jay	State OK	
Purpose of Disbursement Expense reimbursement	Category/ Type 002	
Candidate Name Robertson For Congress	Disbursement For: 2014	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK District: 02		

SUBTOTAL of Disbursements This Page (optional).....	2013.44
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 37			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Robertson For Congress

Full Name (Last, First, Middle Initial) A. Hoguen Apperson		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2014
Mailing Address 33000 S 690 Rd		Amount of Each Disbursement this Period 552.58 Transaction ID : SB17.4534
City Jay	State OK Zip Code 74346	
Purpose of Disbursement Expense reimbursement	Category/Type 002	
Candidate Name Robertson For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: OK District: 02	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Hoguen Apperson		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014
Mailing Address 33000 S 690 Rd		Amount of Each Disbursement this Period 421.64 Transaction ID : SB17.4537
City Jay	State OK Zip Code 74346	
Purpose of Disbursement Payroll	Category/Type 001	
Candidate Name Robertson For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: OK District: 02	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Hoguen Apperson		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2014
Mailing Address 33000 S 690 Rd		Amount of Each Disbursement this Period 294.25 Transaction ID : SB17.4543
City Jay	State OK Zip Code 74346	
Purpose of Disbursement Expense reimbursement	Category/Type 002	
Candidate Name Robertson For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: OK District: 02	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1268.47
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 37		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Robertson For Congress

Full Name (Last, First, Middle Initial) A. Hoguen Apperson		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2014
Mailing Address 33000 S 690 Rd		Amount of Each Disbursement this Period 421.64 Transaction ID : SB17.4545
City Jay State OK Zip Code 74346	Purpose of Disbursement Payroll 001 Category/Type	
Candidate Name Robertson For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 02	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. Hoguen Apperson		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2014
Mailing Address 33000 S 690 Rd		Amount of Each Disbursement this Period 273.71 Transaction ID : SB17.4548
City Jay State OK Zip Code 74346	Purpose of Disbursement Expense reimbursement 002 Category/Type	
Candidate Name Robertson For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 02	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) c. Hoguen Apperson		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2014
Mailing Address 33000 S 690 Rd		Amount of Each Disbursement this Period 421.64 Transaction ID : SB17.4551
City Jay State OK Zip Code 74346	Purpose of Disbursement Payroll 001 Category/Type	
Candidate Name Robertson For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 02	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional).....	1116.99
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 37	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Robertson For Congress

Full Name (Last, First, Middle Initial) A. AT&T		Date of Disbursement MM / DD / YYYY 06 / 11 / 2014
Mailing Address PO Box 105414		Amount of Each Disbursement this Period 96.77 Transaction ID : SB17.4535
City Atlanta	State GA	
Zip Code 30348	Purpose of Disbursement Telephone	Category/ Type 001
Candidate Name Robertson For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: OK District: 02	

Full Name (Last, First, Middle Initial) B. AT&T		Date of Disbursement MM / DD / YYYY 06 / 30 / 2014
Mailing Address PO Box 105414		Amount of Each Disbursement this Period 93.79 Transaction ID : SB17.4557
City Atlanta	State GA	
Zip Code 30348	Purpose of Disbursement Telephone	Category/ Type 001
Candidate Name Robertson For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: OK District: 02	

Full Name (Last, First, Middle Initial) c. Blue House Media, LLC		Date of Disbursement MM / DD / YYYY 06 / 23 / 2014
Mailing Address 17 West 5th Street		Amount of Each Disbursement this Period 375.00 Transaction ID : SB17.4550
City Tulsa	State OK	
Zip Code 74103	Purpose of Disbursement Video editing	Category/ Type 006
Candidate Name Robertson For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: OK District: 02	

SUBTOTAL of Disbursements This Page (optional).....	565.56
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 37			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Robertson For Congress

Full Name (Last, First, Middle Initial) A. Claremore Daily Progress		Date of Disbursement MM / DD / YYYY 06 / 19 / 2014
Mailing Address 315 W Will Rogers Blvd		Amount of Each Disbursement this Period 430.95 Transaction ID : SB17.4565
City Claremore	State OK	
Zip Code 74017	Purpose of Disbursement Newspaper ad	Category/ Type 004
Candidate Name Robertson For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: OK District: 02	

Full Name (Last, First, Middle Initial) B. Concentric Direct, LLC		Date of Disbursement MM / DD / YYYY 06 / 26 / 2014
Mailing Address 200 Ashford Center North		Amount of Each Disbursement this Period 34112.94 Transaction ID : SB17.4553
City Atlanta	State GA	
Zip Code 30338	Purpose of Disbursement Campaign consultant	Category/ Type 006
Candidate Name Robertson For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: OK District: 02	

Full Name (Last, First, Middle Initial) c. Ms Patricia Dalke		Date of Disbursement MM / DD / YYYY 06 / 20 / 2014
Mailing Address 604 Joplin St		Amount of Each Disbursement this Period 254.66 Transaction ID : SB17.4547
City Grove	State OK	
Zip Code 74344	Purpose of Disbursement Payroll	Category/ Type 001
Candidate Name Robertson For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: OK District: 02	

SUBTOTAL of Disbursements This Page (optional).....	34798.55
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 37			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Robertson For Congress

Full Name (Last, First, Middle Initial) A. Ms Patricia Dalke		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2014
Mailing Address 604 Joplin St		Amount of Each Disbursement this Period 254.66 Transaction ID : SB17.4552
City Grove State OK Zip Code 74344	Purpose of Disbursement Payroll 001 Category/Type	
Candidate Name Robertson For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK District: 02		

Full Name (Last, First, Middle Initial) B. Dashelle D'Ann Real Estate		Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2014
Mailing Address 414 E 3rd Street		Amount of Each Disbursement this Period 700.00 Transaction ID : SB17.4549
City Grove State OK Zip Code 74344	Purpose of Disbursement Office rent 001 Category/Type	
Candidate Name Robertson For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK District: 02		

Full Name (Last, First, Middle Initial) c. Grand Savings Bank		Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2014
Mailing Address PO Box 451809		Amount of Each Disbursement this Period 274.54 Transaction ID : SB17.4591
City Grove State OK Zip Code 74345	Purpose of Disbursement Interest 001 Category/Type	
Candidate Name Robertson For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK District: 02		

SUBTOTAL of Disbursements This Page (optional).....	1229.20
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 15 OF 37	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Robertson For Congress

Full Name (Last, First, Middle Initial) A. Gravis Marketing		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014
Mailing Address 910 Belle Ave Ste #1180		Amount of Each Disbursement this Period 684.00 Transaction ID : SB17.4575
City Winter Springs State FL Zip Code 32708	Purpose of Disbursement Robo calls 006 Category/Type	
Candidate Name Robertson For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK District: 02		

Full Name (Last, First, Middle Initial) B. Gravis Marketing		Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2014
Mailing Address 910 Belle Ave Ste #1180		Amount of Each Disbursement this Period 684.00 Transaction ID : SB17.4566
City Winter Springs State FL Zip Code 32708	Purpose of Disbursement Robo calls 006 Category/Type	
Candidate Name Robertson For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK District: 02		

Full Name (Last, First, Middle Initial) c. Gravis Marketing		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2014
Mailing Address 910 Belle Ave Ste #1180		Amount of Each Disbursement this Period 684.00 Transaction ID : SB17.4564
City Winter Springs State FL Zip Code 32708	Purpose of Disbursement Robo calls 006 Category/Type	
Candidate Name Robertson For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK District: 02		

SUBTOTAL of Disbursements This Page (optional)	2052.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 37			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Robertson For Congress

Full Name (Last, First, Middle Initial) A. Gravis Marketing		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 910 Belle Ave Ste #1180		Amount of Each Disbursement this Period 684.00 Transaction ID : SB17.4562
City Winter Springs State FL Zip Code 32708	Purpose of Disbursement Robo calls 006 Category/Type	
Candidate Name Robertson For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK District: 02		

Full Name (Last, First, Middle Initial) B. Hoffman Printing		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2014
Mailing Address 1409 West Shawnee		Amount of Each Disbursement this Period 5524.42 Transaction ID : SB17.4484 [MEMO ITEM]
City Muskogee State OK Zip Code 74401	Purpose of Disbursement Campaign mailer 006 Category/Type	
Candidate Name Robertson For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK District: 02		

Full Name (Last, First, Middle Initial) c. IRS		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 500 North Capitol St. NW		Amount of Each Disbursement this Period 1824.64 Transaction ID : SB17.4580
City Washington State DC Zip Code 20001	Purpose of Disbursement Tax payment 001 Category/Type	
Candidate Name Robertson For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK District: 02		

SUBTOTAL of Disbursements This Page (optional).....	2508.64
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.4484

Paid by Darrel Robertson

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 37			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Robertson For Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. IRS		M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 500 North Capitol St. NW		Amount of Each Disbursement this Period
City Washington State DC Zip Code 20001	Purpose of Disbursement Tax payment	88.14
Candidate Name Robertson For Congress	Category/Type 001	Transaction ID : SB17.4581
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK District: 02		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. IRS		M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 500 North Capitol St. NW		Amount of Each Disbursement this Period
City Washington State DC Zip Code 20001	Purpose of Disbursement Tax payment	1490.03
Candidate Name Robertson For Congress	Category/Type 001	Transaction ID : SB17.4582
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK District: 02		

Full Name (Last, First, Middle Initial)		Date of Disbursement
c. Oklahoma ECC		M M / D D / Y Y Y Y 06 / 17 / 2014
Mailing Address PO Box 52004		Amount of Each Disbursement this Period
City Oklahoma City State OK Zip Code 73152	Purpose of Disbursement OK tax payment	350.00
Candidate Name Robertson For Congress	Category/Type 001	Transaction ID : SB17.4579
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OK District: 02		

SUBTOTAL of Disbursements This Page (optional).....	1928.17
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 37			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Robertson For Congress

Full Name (Last, First, Middle Initial) A. Play 2 Win Athletics		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2014
Mailing Address 405 N Owalla Ave		Amount of Each Disbursement this Period 90.00 Transaction ID : SB17.4576
City Claremore	State OK	
Purpose of Disbursement T-shirts		Category/ Type 006
Candidate Name Robertson For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: OK	District: 02	

Full Name (Last, First, Middle Initial) B. Political Lawn Signs		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2014
Mailing Address 916 Byrd Avenue		Amount of Each Disbursement this Period 622.95 Transaction ID : SB17.4559 [MEMO ITEM]
City Neenah	State WI	
Purpose of Disbursement Yard signs		Category/ Type 006
Candidate Name Robertson For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: OK	District: 02	

Full Name (Last, First, Middle Initial) c. Cameron J Price		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2014
Mailing Address 224 S Jefferson		Amount of Each Disbursement this Period 543.06 Transaction ID : SB17.4530
City Stillwater	State OK	
Purpose of Disbursement Payroll		Category/ Type 001
Candidate Name Robertson For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: OK	District: 02	

SUBTOTAL of Disbursements This Page (optional).....	633.06
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.4559

Paid by Darrel Robertson

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 37		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Robertson For Congress

Full Name (Last, First, Middle Initial) A. Cameron J Price		Date of Disbursement MM / DD / YYYY 06 / 13 / 2014
Mailing Address 224 S Jefferson		Amount of Each Disbursement this Period 543.06 Transaction ID : SB17.4540
City Stillwater	State OK	
Purpose of Disbursement Payroll	Category/ Type 001	
Candidate Name Robertson For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: OK	District: 02	

Full Name (Last, First, Middle Initial) B. Cameron J Price		Date of Disbursement MM / DD / YYYY 06 / 20 / 2014
Mailing Address 224 S Jefferson		Amount of Each Disbursement this Period 543.06 Transaction ID : SB17.4546
City Stillwater	State OK	
Purpose of Disbursement Payroll	Category/ Type 001	
Candidate Name Robertson For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: OK	District: 02	

Full Name (Last, First, Middle Initial) c. Cameron J Price		Date of Disbursement MM / DD / YYYY 06 / 26 / 2014
Mailing Address 224 S Jefferson		Amount of Each Disbursement this Period 543.06 Transaction ID : SB17.4554
City Stillwater	State OK	
Purpose of Disbursement Payroll	Category/ Type 001	
Candidate Name Robertson For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: OK	District: 02	

SUBTOTAL of Disbursements This Page (optional).....	1629.18
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 37	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Robertson For Congress

Full Name (Last, First, Middle Initial) A. PSO		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014
Mailing Address 212 E 6th St		Amount of Each Disbursement this Period 78.02 Transaction ID : SB17.4536
City Tulsa	State OK	
Purpose of Disbursement Electricity	Category/ Type 001	
Candidate Name Robertson For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: OK	District: 02	

Full Name (Last, First, Middle Initial) B. Van's Printing Service		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2014
Mailing Address 423 S Hazel St.		Amount of Each Disbursement this Period 49.05 Transaction ID : SB17.4532
City Grove	State OK	
Purpose of Disbursement Printing	Category/ Type 006	
Candidate Name Robertson For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: OK	District: 02	

Full Name (Last, First, Middle Initial) c. Van's Printing Service		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 423 S Hazel St.		Amount of Each Disbursement this Period 546.50 Transaction ID : SB17.4560 [MEMO ITEM]
City Grove	State OK	
Purpose of Disbursement Push cards	Category/ Type 006	
Candidate Name Robertson For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: OK	District: 02	

SUBTOTAL of Disbursements This Page (optional).....	127.07
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.4560

Paid by Darrel Robertson

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 37	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Robertson For Congress

Full Name (Last, First, Middle Initial) A. Vantine Barrett & VanWinkle CPAs, LLC		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address PO Box 906		Amount of Each Disbursement this Period 100.00
City Rogers State AR Zip Code 72757	Purpose of Disbursement CPA	Transaction ID : SB17.4555
Candidate Name Robertson For Congress	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 02	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Walmart		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 2115 S Main St		Amount of Each Disbursement this Period 60.00
City Grove State OK Zip Code 74344	Purpose of Disbursement Tent for event	Transaction ID : SB17.4558
Candidate Name Robertson For Congress	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 02	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement	
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).....	100.00
TOTAL This Period (last page this line number only).....	49970.33

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.4558

Paid by Darrel Robertson

Form/Schedule:

Transaction ID:

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Robertson For Congress

Transaction ID : **SC/10.4527**

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

Mr. Darrel Marshall Robertson

Primary

General

Other (specify) ▼

Mailing Address
68251 E 340 Rd

City State ZIP Code
Jay OK 74346

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
37000.00 0.00 37000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

06

25

2014

2015

0.00

% (apr)

Yes No

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

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

SUBTOTALS This Period This Page (optional)..... 37000.00

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.

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Robertson For Congress** Transaction ID : **SC/10.4528**

LOAN SOURCE Full Name (Last, First, Middle Initial) *[PERSONAL FUNDS]* Election: 2014
Mr. Darrel Marshall Robertson Primary
 Mailing Address 68251 E 340 Rd General
 Other (specify) ▼

City State ZIP Code
 Jay OK 74346

Original Amount of Loan 1000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 1000.00
------------------------------------	------------------------------------	--

TERMS Date Incurred Date Due Interest Rate Secured:
 M M / D D / Y Y Y Y M M / D D / Y Y Y Y 0.00 % (apr) Yes No
 06 / 30 / 2014 / 1/1/15

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

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

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.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Robertson For Congress** Transaction ID : **SC/10.4214**

LOAN SOURCE Full Name (Last, First, Middle Initial) Grand Savings Bank		Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO Box 451809		
City Grove	State OK	ZIP Code 74345

Original Amount of Loan 5000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 5000.00
------------------------------------	------------------------------------	--

TERMS	Date Incurred M 02 / D 21 / Y 2014	Date Due M / D / Y 2/21/15	Interest Rate 6.00 % (apr)	Secured: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
--------------	---------------------------------------	-------------------------------	-------------------------------	---

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

1. Full Name (Last, First, Middle Initial) Mr. Darrel Marshall Robertson	Name of Employer Self
Mailing Address 68251 E 340 Rd	Occupation Cattleman
City Jay	State OK
ZIP Code 74346	Amount Guaranteed Outstanding: 60000.00 Transaction ID : SC/10.4214.0.SC2
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City	State
ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City	State
ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City	State
ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....	5000.00
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.	

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Robertson For Congress** Transaction ID : **SC/10.4283**

LOAN SOURCE Full Name (Last, First, Middle Initial)
Grand Savings Bank

Election: 2014
 Primary
 General
 Other (specify) ▼

Mailing Address
PO Box 451809

City State ZIP Code
Grove OK 74345

Original Amount of Loan 13300.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 13300.00
-------------------------------------	------------------------------------	---

TERMS

Date Incurred: M 04 / D 11 / Y 2014
Date Due: M M / D D / Y 2/21/15
Interest Rate: 6.00 % (apr)
Secured: Yes No

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

1. Full Name (Last, First, Middle Initial) Mr. Darrel Marshall Robertson	Name of Employer Self
Mailing Address 68251 E 340 Rd	Occupation Cattleman
City State ZIP Code Jay OK 74346	Amount Guaranteed Outstanding: 60000.00 Transaction ID : SC/10.4283.0.SC2
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶ 13300.00

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.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Robertson For Congress** Transaction ID : **SC/10.4284**

LOAN SOURCE Full Name (Last, First, Middle Initial) Grand Savings Bank		Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO Box 451809		
City Grove	State OK	ZIP Code 74345

Original Amount of Loan 20000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 20000.00
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TERMS

Date Incurred M 04 / D 14 / Y 2014	Date Due M M / D D / Y 2/21/15	Interest Rate 6.00 % (apr)	Secured: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial) Mr. Darrel Marshall Robertson	Name of Employer Self
Mailing Address 68251 E 340 Rd	Occupation Cattleman
City Jay	State OK
ZIP Code 74346	Amount Guaranteed Outstanding: 60000.00 Transaction ID : SC/10.4284.0.SC2
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City	State
ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City	State
ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City	State
ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....	20000.00
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.	

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Robertson For Congress** Transaction ID : **SC/10.4361**

LOAN SOURCE Full Name (Last, First, Middle Initial) Grand Savings Bank	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO Box 451809	

City	State	ZIP Code
Grove	OK	74345

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
10000.00	0.00	10000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 05 / D 08 / Y 2014 Y	M M / D D / Y 2/21/15 Y	6.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

1. Full Name (Last, First, Middle Initial) Mr. Darrel Marshall Robertson	Name of Employer Self
Mailing Address 68251 E 340 Rd	Occupation Cattleman
City State ZIP Code Jay OK 74346	Amount Guaranteed Outstanding: 60000.00 Transaction ID : SC/10.4361.0.SC2
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....	10000.00
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.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Robertson For Congress** Transaction ID : **SC/10.4362**

LOAN SOURCE Full Name (Last, First, Middle Initial) Grand Savings Bank	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO Box 451809	
City State ZIP Code Grove OK 74345	

Original Amount of Loan 10000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 10000.00
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TERMS

Date Incurred M 05 / D 30 / Y 2014	Date Due M M / D D / Y 2/21/15	Interest Rate 6.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial) Mr. Darrel Marshall Robertson	Name of Employer Self
Mailing Address 68251 E 340 Rd	Occupation Cattleman
City State ZIP Code Jay OK 74346	Amount Guaranteed Outstanding: 60000.00 Transaction ID : SC/10.4362.0.SC2
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....	10000.00
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.	

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Robertson For Congress** Transaction ID : SC/10.4485

LOAN SOURCE Full Name (Last, First, Middle Initial) Grand Savings Bank	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO Box 451809	

City	State	ZIP Code
Grove	OK	74345

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1700.00	0.00	1700.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
06 / 21 / 2014	2/21/15	6.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

1. Full Name (Last, First, Middle Initial) Mr. Darrel Marshall Robertson	Name of Employer Self
Mailing Address 68251 E 340 Rd	Occupation Cattleman
City State ZIP Code Jay OK 74346	Amount Guaranteed Outstanding: 60000.00 Transaction ID : SC/10.4485.0.SC2
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....	1700.00
TOTALS This Period (last page in this line only).....	98000.00

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

SCHEDULE C-1 (FEC Form 3) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for
Information found on
Page ____ of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (In Full) Robertson For Congress	Transaction ID : SC/10.4485.SC1	FEC IDENTIFICATION NUMBER C C00557686
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LENDING INSTITUTION (LENDER) Full Name Grand Savings Bank	Amount of Loan 60000.00	Interest Rate (APR) 6.00 %
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Mailing Address PO Box 451809	Date Incurred or Established 02 / 21 / 2014	Date Due 2/21/15
City State Zip Code Grove OK 74345	Back Ref SC/10.4485	

A. Has loan been restructured? No Yes If yes, date originally incurred **02 / 21 / 2014**

B. If line of credit,
Amount of this Draw: **0.00** Total Outstanding Balance: **0.00**

C. Are other parties secondarily liable for the debt incurred?
 No Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?
 No Yes If yes, specify: _____

What is the value of this collateral? **0.00**

Does the lender have a perfected security interest in it? No Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? No Yes If yes, specify: _____

What is the estimated value? **0.00**

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2). Location of account: _____

Date account established: **02 / 21 / 2014** Address: _____

City, State, Zip: _____

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.

G. COMMITTEE TREASURER Typed Name Mr. John Raymond Farris Signature _____	DATE 07 / 02 / 2014
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H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:

- I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.
- II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.
- III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.

AUTHORIZED REPRESENTATIVE Typed Name Mr. John Raymond Farris Signature Mr. John Raymond Farris	[Electronically Filed]	DATE 06 / 21 / 2014
Title Treasurer		

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Robertson For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Mr. Darrel Marshall Robertson

Mailing Address 68251 E 340 Rd

City State Zip Code
Jay OK 74346

Nature of Debt (Purpose):
CC newspaper ads

Outstanding Balance Beginning This Period **Transaction ID : SD10.4462**
525.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 0.00 525.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Mr. Darrel Marshall Robertson

Mailing Address 68251 E 340 Rd

City State Zip Code
Jay OK 74346

Nature of Debt (Purpose):
Money Order Filing fee

Outstanding Balance Beginning This Period **Transaction ID : SD10.4463**
750.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 0.00 750.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Mr. Darrel Marshall Robertson

Mailing Address 68251 E 340 Rd

City State Zip Code
Jay OK 74346

Nature of Debt (Purpose):
CC booth space

Outstanding Balance Beginning This Period **Transaction ID : SD10.4464**
25.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 0.00 25.00

1) SUBTOTALS This Period This Page (optional)	▶	1300.00
2) TOTALS This Period (last page this line number only)	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶		

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Robertson For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mr. Darrel Marshall Robertson		Nature of Debt (Purpose): CC yard signs
Mailing Address 68251 E 340 Rd		
City Jay	State OK	Zip Code 74346

Outstanding Balance Beginning This Period 818.71	Transaction ID : SD10.4465	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 818.71

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mr. Darrel Marshall Robertson		Nature of Debt (Purpose): CC yard signs
Mailing Address 68251 E 340 Rd		
City Jay	State OK	Zip Code 74346

Outstanding Balance Beginning This Period 1399.50	Transaction ID : SD10.4466	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1399.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mr. Darrel Marshall Robertson		Nature of Debt (Purpose): CC yard signs
Mailing Address 68251 E 340 Rd		
City Jay	State OK	Zip Code 74346

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4468	
Amount Incurred This Period 622.95	Payment This Period 0.00	Outstanding Balance at Close of This Period 622.95

1) SUBTOTALS This Period This Page (optional)	2841.16
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Robertson For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mr. Darrel Marshall Robertson	Nature of Debt (Purpose): CC flyer printing
Mailing Address 68251 E 340 Rd	
City State Zip Code Jay OK 74346	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4469	
Amount Incurred This Period 546.50	Payment This Period 0.00	Outstanding Balance at Close of This Period 546.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mr. Darrel Marshall Robertson	Nature of Debt (Purpose): Cash tent for outdoor event
Mailing Address 68251 E 340 Rd	
City State Zip Code Jay OK 74346	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4467	
Amount Incurred This Period 60.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 60.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mr. Darrel Marshall Robertson	Nature of Debt (Purpose): Campaign mailer
Mailing Address 68251 E 340 Rd	
City State Zip Code Jay OK 74346	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4483	
Amount Incurred This Period 5524.42	Payment This Period 0.00	Outstanding Balance at Close of This Period 5524.42

1) SUBTOTALS This Period This Page (optional)	6130.92
2) TOTALS This Period (last page this line number only)	10272.08
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	98000.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	108272.08