

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 Cole for Congress

ADDRESS (number and street) P.O. Box 722256 Check if different than previously reported. (ACC) Norman OK 73070

2. FEC IDENTIFICATION NUMBER C C00379735 3. IS THIS REPORT NEW (N) OR AMENDED (A) CITY STATE ZIP CODE STATE DISTRICT OK 04

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 M M / D D / Y Y Y Y 06 / 05 / 2014 through M M / D D / Y Y Y Y 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. Rick Nagel

Signature of Treasurer Mr. Rick Nagel [Electronically Filed] Date M M / D D / Y Y Y Y 08 / 28 / 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  
**Cole 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))....	<input type="text" value="62713.82"/>	<input type="text" value="988934.8"/>
(b) Total Contribution Refunds (from Line 20(d)) .....	<input type="text"/>	<input type="text" value="15400"/>
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	<input type="text" value="62713.82"/>	<input type="text" value="973534.8"/>
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	<input type="text" value="100042.79"/>	<input type="text" value="533356.28"/>
(b) Total Offsets to Operating Expenditures (from Line 14).....	<input type="text"/>	<input type="text" value="9121.76"/>
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	<input type="text" value="100042.79"/>	<input type="text" value="524234.52"/>
8. Cash on Hand at Close of Reporting Period (from Line 27).....	<input type="text" value="1269715.76"/>	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text"/>	

**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

**Cole 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).....	25033.44	542149.58
(ii) Unitemized.....	435	34905
(iii) TOTAL of contributions from individuals ▶	25468.44	577054.58
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....	37245.38	411880.22
(d) The Candidate.....		
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	62713.82	988934.8
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....		
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....		
(b) All Other Loans.....		
(c) TOTAL LOANS (add Lines 13(a) and (b)).....		
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....		9121.76
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	165.24	3167.48
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	62879.06	1001224.04

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	100042.79	533356.28
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....		
(b) Of All Other Loans .....		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....		11900
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		3500
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....		15400
21. OTHER DISBURSEMENTS .....	4000	16250
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	104042.79	565006.28

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1310879.49
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	62879.06
25. SUBTOTAL (add Line 23 and Line 24).....	1373758.55
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	104042.79
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1269715.76

**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 38
	<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)  
**Cole for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Governor Bill Anoatubby**

Mailing Address 14524 CR 3585

City State Zip Code  
Ada OK 74820-3070

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

Name of Employer Occupation  
Chickasaw Nation Governor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000**

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

**Transaction ID : SA11Ai-CN14707**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**San Carlos Apache Tribe**

Mailing Address PO Box O

City State Zip Code  
San Carlos AZ 85550

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

Name of Employer Occupation  
Indian Tribe Indian Tribe

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**4000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 12 / 2014**

**Transaction ID : SA11Ai-CN14715**

Amount of Each Receipt this Period  
**2000**

**C.** Full Name (Last, First, Middle Initial)  
**San Carlos Apache Tribe**

Mailing Address PO Box O

City State Zip Code  
San Carlos AZ 85550

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

Name of Employer Occupation  
Indian Tribe Indian Tribe

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2600**

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

**Transaction ID : SA11Ai-CN14805**

Amount of Each Receipt this Period  
**-1400**

Redesignated to General 2014

**[MEMO ITEM]**  
Redesignated

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

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

**3000.00**

**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 38
	<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)  
**Cole for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**San Carlos Apache Tribe**

Mailing Address PO Box O

City San Carlos State AZ Zip Code 85550

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

Name of Employer Indian Tribe Occupation Indian Tribe

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **4000**

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

**Transaction ID : SA11Ai-CN14806**

Amount of Each Receipt this Period  
**1400**

Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Craig Billingsley**

Mailing Address PO Box 6630

City Lawton State OK Zip Code 73506

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

Name of Employer Billingsley Ford Inc. Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

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

**Transaction ID : SA11Ai-CN14709**

Amount of Each Receipt this Period  
**2600**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Denise A. Bode**

Mailing Address 28389 Catalpa Point Rt.

City Easton State MD Zip Code 21601

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

Name of Employer AWEA Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 12 / 2014**

**Transaction ID : SA11Ai-CN14714**

Amount of Each Receipt this Period  
**1000**

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

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

**3600.00**

**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 38
	<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)  
**Cole for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Denise A. Bode**

Mailing Address 28389 Catalpa Point Rt.

City Easton State MD Zip Code 21601

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

Name of Employer AWEA Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

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

**Transaction ID : SA11Ai-CN14807**

Amount of Each Receipt this Period  
**-900**  
 Redesignated to General 2014

**[MEMO ITEM]**  
Redesignated

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Denise A. Bode**

Mailing Address 28389 Catalpa Point Rt.

City Easton State MD Zip Code 21601

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

Name of Employer AWEA Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3500**

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

**Transaction ID : SA11Ai-CN14808**

Amount of Each Receipt this Period  
**900**  
 Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

**C.** Full Name (Last, First, Middle Initial)  
**Mr. William M Cameron**

Mailing Address 7314 Lancet Ln

City Nichols Hills State OK Zip Code 73120-1416

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

Name of Employer American Fidelity Corp Occupation Insurance

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500**

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

**Transaction ID : SA11Ai-CN14712**

Amount of Each Receipt this Period  
**2500**

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

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

**2500.00**

**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 38
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Cole for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. James Chambers**

Mailing Address 301 West Main  
# 332

City Ardmore State OK Zip Code 73401

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

Name of Employer Chambers & Jackson Occupation CPA

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 24 / 2014

**Transaction ID : SA11Ai-CN14736**

Amount of Each Receipt this Period  
500

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Hajeh J Farzaneh**

Mailing Address 3400 Crystal Spring Dr

City Norman State OK Zip Code 73072-1318

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 12 / 2014

**Transaction ID : SA11Ai-CN14719**

Amount of Each Receipt this Period  
1000

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Gene E. Hill**

Mailing Address 1544 Spring Hill Rd  
# 9563

City Mc Lean State VA Zip Code 22102

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

Name of Employer Computercraft Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000

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

**Transaction ID : SA11Ai-CN14727**

Amount of Each Receipt this Period  
500

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 38
	<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)  
**Cole for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Thomas Sung-Hoon Kim**

Mailing Address 7009 Arbor Ln

City Mclean State VA Zip Code 22101

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

Name of Employer Thomas Capitol Partners Inc. Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 24 / 2014**

**Transaction ID : SA11Ai-CN14731**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Mack Kimbrough**

Mailing Address PO Box 1426

City Ada State OK Zip Code 74820

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

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

**Transaction ID : SA11Ai-CN14730**

Amount of Each Receipt this Period  
**200**

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

Mailing Address PO Box 18756

City Oklahoma City State OK Zip Code 73154-0496

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

Name of Employer Chesapeake Energy Corp. Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **10200**

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

**Transaction ID : SA11Ai-CN14713**

Amount of Each Receipt this Period  
**5200**

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

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

**5650.00**

**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 10 OF 38
	<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)  
**Cole for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. J.R. McGraw**

Mailing Address 10900 S Louisville Ave

City Tulsa State OK Zip Code 74137-6721

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

Name of Employer McGraw Davisson Stewart Occupation Real Estate Broker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **650**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 24 / 2014**

**Transaction ID : SA11Ai-CN14738**

Amount of Each Receipt this Period  
**150**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Barry K. Moore**

Mailing Address 247 N Broadway Ste 102 Suite 605

City Edmond State OK Zip Code 73034

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

Name of Employer The BKM Group Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3000**

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

**Transaction ID : SA11Ai-CN14708**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Barry K. Moore**

Mailing Address 247 N Broadway Ste 102 Suite 605

City Edmond State OK Zip Code 73034

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

Name of Employer The BKM Group Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

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

**Transaction ID : SA11Ai-CN14809**

Amount of Each Receipt this Period  
**-400**  
 Redesignated to General 2014

**[MEMO ITEM]**  
 Redesignated

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

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

**1150.00**

**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 11 OF 38
	<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)  
**Cole for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Barry K. Moore**

Mailing Address **247 N Broadway Ste 102**  
**Suite 605**

City **Edmond** State **OK** Zip Code **73034**

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

Name of Employer **The BKM Group** Occupation **Executive**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3000**

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

**Transaction ID : SA11Ai-CN14810**

Amount of Each Receipt this Period  
**400**

Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

**B.** Full Name (Last, First, Middle Initial)  
**Pokagon Band of Potawatomi Indians**

Mailing Address **PO Box 180**

City **Dowagiac** State **MI** Zip Code **49047**

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

Name of Employer **None** Occupation **Indian tribe**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000**

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

**Transaction ID : SA11Ai-CN14733**

Amount of Each Receipt this Period  
**2500**

**C.** Full Name (Last, First, Middle Initial)  
**General Thomas P Stafford**

Mailing Address **88181 Old Hwy. Coral Harbor**

City **Islamorada** State **FL** Zip Code **33036**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 12 / 2014**

**Transaction ID : SA11Ai-CN14718**

Amount of Each Receipt this Period  
**1500**

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

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

**4000.00**

**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 12 OF 38
	<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)  
**Cole for Congress**

Full Name (Last, First, Middle Initial) <b>Quapaw Tribe</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 10 / 2014
Mailing Address PO Box 765		<b>Transaction ID : SA11Ai-CN14710</b>
City Quapaw	State OK	Zip Code 74363
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2700	
Name of Employer Indian Tribe	Occupation Indian Tribe	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200	

Full Name (Last, First, Middle Initial) <b>Quapaw Tribe</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 30 / 2014
Mailing Address PO Box 765		<b>Transaction ID : SA11Ai-CN14811</b>
City Quapaw	State OK	Zip Code 74363
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period -2600	
Name of Employer Indian Tribe	Occupation Indian Tribe	Redesignated to General 2014
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600	<b>[MEMO ITEM]</b> Redesignated

Full Name (Last, First, Middle Initial) <b>Quapaw Tribe</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 30 / 2014
Mailing Address PO Box 765		<b>Transaction ID : SA11Ai-CN14812</b>
City Quapaw	State OK	Zip Code 74363
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2600	
Name of Employer Indian Tribe	Occupation Indian Tribe	Redesignated from Primary 2014
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200	<b>[MEMO ITEM]</b> Redesignation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2700.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 13 OF 38
	<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)  
**Cole for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Letitia White**

Mailing Address 13901 Piscataway Dr

City State Zip Code  
Fort Washington MD 20744-6639

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

Name of Employer Occupation  
Innovative Federal Strategies Lobbyist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**886.29**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 17 / 2014**

**Transaction ID : SA11Ai-CN14745**

Amount of Each Receipt this Period  
**433.44**

In-Kind Received Food and Beverage

**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).....

**433.44**

**25033.44**

**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 14 OF 38
	<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)  
**Cole for Congress**

**A. American Dental PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1111-14th St NW Ste 1100  
 City Washington State DC Zip Code 20005  
 FEC ID number of contributing federal political committee. **C C00000729**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **4000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 18 / 2014  
**Transaction ID : SA11C-CN14721**  
 Amount of Each Receipt this Period  
 1000

**B. American Society Of Plastic Surgeons PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 444 East Algonquin Road  
 City Arlington Heights State IL Zip Code 60005  
 FEC ID number of contributing federal political committee. **C C00249342**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **4000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 05 / 2014  
**Transaction ID : SA11C-CN14607**  
 Amount of Each Receipt this Period  
 2000

**C. American Sugar Cane League Of USA PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Drawer 938  
 City Thibodaux State LA Zip Code 70302  
 FEC ID number of contributing federal political committee. **C C00081414**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 18 / 2014  
**Transaction ID : SA11C-CN14724**  
 Amount of Each Receipt this Period  
 1000

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

4000.00

**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 15 OF 38
	<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)  
**Cole for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**BAE Systems USA PAC**

Mailing Address 1300 N. 17th Street

City State Zip Code  
Arlington VA 22209

FEC ID number of contributing federal political committee. **C C00281212**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**9000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 24 / 2014**

**Transaction ID : SA11C-CN14741**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Brinker International PAC**

Mailing Address 6820 LBJ Freeway

City State Zip Code  
Dallas TX 75240

FEC ID number of contributing federal political committee. **C C00241851**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

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

**Transaction ID : SA11C-CN14711**

Amount of Each Receipt this Period  
**1000**

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

Mailing Address 1201 15th St NW

City State Zip Code  
Washington DC 20005-2842

FEC ID number of contributing federal political committee. **C C00000901**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3000**

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

**Transaction ID : SA11C-CN14722**

Amount of Each Receipt this Period  
**1000**

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

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

**2500.00**

**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 16 OF 38
	<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)  
**Cole for Congress**

Full Name (Last, First, Middle Initial) <b>A. Centerpoint Energy PAC</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 12 / 2014
Mailing Address P.O. Box 4567		<b>Transaction ID : SA11C-CN14716</b>
City Houston	State TX	
Zip Code 77210-4567		Amount of Each Receipt this Period 2500
FEC ID number of contributing federal political committee. C C00333534		
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000	

Full Name (Last, First, Middle Initial) <b>B. Diageo North America Employees PAC</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 10 / 2014
Mailing Address 801 Main Ave PO Box 778		<b>Transaction ID : SA11C-CN14746</b>
City Norwalk	State CT	
Zip Code 06851		Amount of Each Receipt this Period 745.38
FEC ID number of contributing federal political committee. C C00034470		
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 745.38	In-Kind Received Food and Beverage

Full Name (Last, First, Middle Initial) <b>C. Employees of Northrop Grumman PAC</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 18 / 2014
Mailing Address 3699 Wilshire Blvd Ste 1290		<b>Transaction ID : SA11C-CN14723</b>
City Los Angeles	State CA	
Zip Code 90010		Amount of Each Receipt this Period 1000
FEC ID number of contributing federal political committee. C C00088591		
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 7000	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4245.38
<b>TOTAL</b> This Period (last page this line number only).....	[ ]

**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 17 OF 38
	<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)  
**Cole for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**General Dynamics Voluntary PAC**

Mailing Address 2941 Fairview Park Dr #100

City Falls Church State VA Zip Code 22042

FEC ID number of contributing federal political committee. **C C00078451**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **6000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 05 / 2014

**Transaction ID : SA11C-CN14605**

Amount of Each Receipt this Period  
 1000

**B.** Full Name (Last, First, Middle Initial)  
**Home Depot Inc. Pac**

Mailing Address 101 Constitution Ave. NW  
Suite 800 West

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00284885**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 12 / 2014

**Transaction ID : SA11C-CN14717**

Amount of Each Receipt this Period  
 2000

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

Mailing Address 101 Constitution Ave NW  
Ste 500 W

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00096156**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **9055.84**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 05 / 2014

**Transaction ID : SA11C-CN14606**

Amount of Each Receipt this Period  
 2000

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

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

5000.00

**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 18 OF 38
	<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)  
**Cole for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lorillard Tobacco Company Public Affairs Comm.**

Mailing Address 714 Green Valley Rd.

City Greensboro State NC Zip Code 27408

FEC ID number of contributing federal political committee. **C** C00112888

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 24 / 2014

**Transaction ID : SA11C-CN14742**

Amount of Each Receipt this Period  
 1000

**B.** Full Name (Last, First, Middle Initial)  
**National Beer Wholesalers PAC**

Mailing Address 1101 King St  
Suite 600

City Alexandria State VA Zip Code 22314-2950

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 7500

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

**Transaction ID : SA11C-CN14734**

Amount of Each Receipt this Period  
 2500

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

Mailing Address 1100 Wilson Blvd Ste 1500

City Arlington State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000

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

**Transaction ID : SA11C-CN14802**

Amount of Each Receipt this Period  
 2000  
 Received 6/25 - Postmarked 6/23

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

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

5500.00

**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 19 OF 38
	<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)  
**Cole for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Raytheon Co. PAC**

Mailing Address 1100 Wilson Blvd Ste 1500

City State Zip Code  
Arlington VA 22209

FEC ID number of contributing federal political committee. **C C00097568**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**6000**

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

**Transaction ID : SA11C-CN14803**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Realtors PAC**

Mailing Address 430 N Michigan Ave

City State Zip Code  
Chicago IL 60611

FEC ID number of contributing federal political committee. **C C00030718**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5000**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 19 / 2014

**Transaction ID : SA11C-CN14725**

Amount of Each Receipt this Period  
**4000**

**C.** Full Name (Last, First, Middle Initial)  
**South Texas Sugar Cane Producers PAC**

Mailing Address PO Box Drawer A

City State Zip Code  
Santa Rosa TX 78593

FEC ID number of contributing federal political committee. **C C00379735**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 24 / 2014

**Transaction ID : SA11C-CN14743**

Amount of Each Receipt this Period  
**1000**

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

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

**6000.00**

**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 20 OF 38
	<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)  
**Cole for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Spectra Energy Corp. PAC**

Mailing Address 5400 Westheimer Court

City Houston State TX Zip Code 77056

FEC ID number of contributing federal political committee. **C** C00429662

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3000

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

**Transaction ID : SA11C-CN14726**

Amount of Each Receipt this Period  
 500

**B.** Full Name (Last, First, Middle Initial)  
**UBS Americas PAC**

Mailing Address 1501 K Street Ste 1100

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00012245

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2500

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 24 / 2014

**Transaction ID : SA11C-CN14744**

Amount of Each Receipt this Period  
 1500

**C.** Full Name (Last, First, Middle Initial)  
**UnitedHealth Group Inc. PAC**

Mailing Address 9900 Bren Rd E

City Hopkins State MN Zip Code 55343

FEC ID number of contributing federal political committee. **C** C00274431

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000

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

**Transaction ID : SA11C-CN14804**

Amount of Each Receipt this Period  
 2000

Received 6/25 - Postmarked 6/23

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

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

4000.00

**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 21 OF 38
	<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)  
**Cole for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Valero PAC**

Mailing Address **PO Box 696000**

City **San Antonio** State **TX** Zip Code **78269**

FEC ID number of contributing federal political committee. **C C00109546**

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

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ 5000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 24 / 2014**

**Transaction ID : SA11C-CN14735**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 5000

**B.** Full Name (Last, First, Middle Initial)  
**Western Sugar Cooperative PAC**

Mailing Address **7555 E Hampden Ave  
Ste 600**

City **Denver** State **CO** Zip Code **80231**

FEC ID number of contributing federal political committee. **C C00446674**

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

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ 1000

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

**Transaction ID : SA11C-CN14720**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000

**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).....

\_\_\_\_\_ 6000.00

\_\_\_\_\_ 37245.38

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 OF 38  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14  15

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NAME OF COMMITTEE (In Full)  
**Cole for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Banc2**

Mailing Address 909 S Meridian

City State Zip Code  
Oklahoma City OK 73108

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1148.47**

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

**Transaction ID : SA15-RC1444**

Amount of Each Receipt this Period  
**78.66**

Interest Earned

**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).....

**78.66**

**78.66**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 38	
	<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)  
**Cole for Congress**

Full Name (Last, First, Middle Initial) <b>A. BB&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address PO Box 200		Amount of Each Disbursement this Period 69.00
City Wilson	State NC	Zip Code 27894
Purpose of Disbursement Bank Service Charge	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX6273
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014	Bank Service Charge
State: District:		

Full Name (Last, First, Middle Initial) <b>B. National Republican Congressional Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2014
Mailing Address 320 1st St SE		Amount of Each Disbursement this Period 5000.00
City Washington	State DC	Zip Code 20003
Purpose of Disbursement TRANSFER OF EXCESS FUNDS	Category/ Type 005	
Candidate Name		Transaction ID : SB17-EX6249
Office Sought: <input 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) Primary 2014	TRANSFER OF EXCESS FUNDS
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Graftec Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2014
Mailing Address 3168 North Portland Avenue		Amount of Each Disbursement this Period 504.36
City Oklahoma City	State OK	Zip Code 73112
Purpose of Disbursement Letterhead & Envelope Printing	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX6261
Office Sought: <input 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) Primary 2014	Letterhead & Envelope Printing
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5573.36
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 38			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Cole for Congress**

Full Name (Last, First, Middle Initial) <b>A. Norman Transcript</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2014
Mailing Address 215 E Comanche St		Amount of Each Disbursement this Period 1660.06
City Norman	State OK	Zip Code 73069
Purpose of Disbursement Newspaper Advertising	Category/ Type 004	
Candidate Name	Transaction ID : SB17-EX6274	
Office Sought: <input 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) Primary 2014	Newspaper Advertising
State: District:		

Full Name (Last, First, Middle Initial) <b>B. FEC Financial</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2014
Mailing Address PO Box 651374		Amount of Each Disbursement this Period 2744.37
City Sterling	State VA	Zip Code 20165
Purpose of Disbursement PAYMENT: SEE BELOW	Category/ Type 001	
Candidate Name	Transaction ID : SB17-EX6257	
Office Sought: <input 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) Primary 2014	PAYMENT: SEE BELOW
State: District:		

Full Name (Last, First, Middle Initial) <b>C. FEC Financial</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2014
Mailing Address PO Box 651374		Amount of Each Disbursement this Period 2650.00
City Sterling	State VA	Zip Code 20165
Purpose of Disbursement Accounting Services	Category/ Type 001	
Candidate Name	Transaction ID : SB17-EX6258	
Office Sought: <input 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) Primary 2014	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4404.43
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 38	
	<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)  
**Cole for Congress**

Full Name (Last, First, Middle Initial) <b>A. FEC Financial</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2014
Mailing Address PO Box 651374		Amount of Each Disbursement this Period 94.37
City Sterling	State VA	
Zip Code 20165	Purpose of Disbursement Postage Reimbursement	Transaction ID : <b>SB17-EX6259</b>
Candidate Name	001 Category/ Type	
Office Sought: <input 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) Primary 2014	<b>[MEMO ITEM]</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Alfano Communication</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2014
Mailing Address 606 Pennsylvania Ave SE		Amount of Each Disbursement this Period 2524.48
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Media Production	Transaction ID : <b>SB17-EX6277</b>
Candidate Name	004 Category/ Type	
Office Sought: <input 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) Primary 2014	Media Production
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address P.O. Box 6463		Amount of Each Disbursement this Period 112.51
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement Telephone Expense	Transaction ID : <b>SB17-EX6262</b>
Candidate Name	001 Category/ Type	
Office Sought: <input 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) Primary 2014	Telephone Expense
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2636.99
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 38			
	<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)  
**Cole for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>A. Key &amp; Associates</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>24</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	06		24		2014
M M	/	D D	/	Y Y Y Y									
06		24		2014									
Mailing Address 12176 Chancery Station Cir		Amount of Each Disbursement this Period											
City Reston State VA Zip Code 20190 Purpose of Disbursement PAYMENT: SEE BELOW Candidate Name Office Sought: <input 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) Primary 2014 State: District:		<table border="1"> <tr> <td>39813.00</td> </tr> </table> Transaction ID : SB17-EX6263  PAYMENT: SEE BELOW		39813.00									
39813.00													
Category/Type													
003													

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>B. Key &amp; Associates</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>24</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	06		24		2014
M M	/	D D	/	Y Y Y Y									
06		24		2014									
Mailing Address 12176 Chancery Station Cir		Amount of Each Disbursement this Period											
City Reston State VA Zip Code 20190 Purpose of Disbursement Fundraising Retainer Candidate Name Office Sought: <input 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) Primary 2014 State: District:		<table border="1"> <tr> <td>2000.00</td> </tr> </table> Transaction ID : SB17-EX6264  [MEMO ITEM]		2000.00									
2000.00													
Category/Type													
003													

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>C. Key &amp; Associates</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>24</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	06		24		2014
M M	/	D D	/	Y Y Y Y									
06		24		2014									
Mailing Address 12176 Chancery Station Cir		Amount of Each Disbursement this Period											
City Reston State VA Zip Code 20190 Purpose of Disbursement Fundraising Commission Candidate Name Office Sought: <input 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) Primary 2014 State: District:		<table border="1"> <tr> <td>37813.00</td> </tr> </table> Transaction ID : SB17-EX6265  [MEMO ITEM]		37813.00									
37813.00													
Category/Type													
003													

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	39813.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 38	
	<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)  
**Cole for Congress**

Full Name (Last, First, Middle Initial)  
**A. Credit Card Operations**

Mailing Address PO Box 22116

City Tulsa State OK Zip Code 74121

Purpose of Disbursement  
CREDIT CARD PAYMENT: SEE BELOW

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
06 / 23 / 2014

Amount of Each Disbursement this Period  
1661.84

Transaction ID : SB17-EX6290

CREDIT CARD PAYMENT: SEE BELOW

Category/Type  
001

Full Name (Last, First, Middle Initial)  
**B. Shell Oil**

Mailing Address PO Box 2463

City Houston State TX Zip Code 77252

Purpose of Disbursement  
Travel Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
06 / 23 / 2014

Amount of Each Disbursement this Period  
14.89

Transaction ID : SB17-EX6278

[MEMO ITEM]  
Fuel

Category/Type  
002

Full Name (Last, First, Middle Initial)  
**c. Corkscrew Wine and Spirits**

Mailing Address 2319 West Lindsey Street

City Norman State OK Zip Code 73069

Purpose of Disbursement  
Campaign Event Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
06 / 23 / 2014

Amount of Each Disbursement this Period  
154.56

Transaction ID : SB17-EX6279

[MEMO ITEM]  
Food and Beverage

Category/Type  
007

**SUBTOTAL** of Disbursements This Page (optional)..... 1661.84

**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 28 OF 38	
	<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)  
**Cole for Congress**

Full Name (Last, First, Middle Initial) <b>A. Royal Pipes And Tobacco</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 105 East Boyd St		Amount of Each Disbursement this Period 188.40
City Norman	State OK Zip Code 73069	
Purpose of Disbursement Campaign Event Expenses	Category/Type 007	<b>Transaction ID : SB17-EX6280</b>
Candidate Name		
Office Sought: <input 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) Primary 2014	<b>[MEMO ITEM]</b> Host Gifts
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Facebook</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 1601 Willow Road		Amount of Each Disbursement this Period 22.61
City Menlo Park	State CA Zip Code 94025	
Purpose of Disbursement Advertising Expenses	Category/Type 004	<b>Transaction ID : SB17-EX6281</b>
Candidate Name		
Office Sought: <input 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) Primary 2014	<b>[MEMO ITEM]</b> Online Advertising
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Laughing Squid</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 320 W 38th St # 1505		Amount of Each Disbursement this Period 81.85
City New York	State NY Zip Code 10018	
Purpose of Disbursement Administrative/Salary/Overhead Expenses	Category/Type 001	<b>Transaction ID : SB17-EX6282</b>
Candidate Name		
Office Sought: <input 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) Primary 2014	<b>[MEMO ITEM]</b> Website Hosting
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 38	
	<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)  
**Cole for Congress**

Full Name (Last, First, Middle Initial) <b>A. Switzer's Locker Room</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 905 SE 19th		Amount of Each Disbursement this Period 124.00
City Moore	State OK Zip Code 73160	
Purpose of Disbursement Administrative/Salary/Overhead Expenses		Transaction ID : SB17-EX6283
Candidate Name		
Office Sought: <input 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) Primary 2014	[MEMO ITEM] Storage Expense
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>B. Red Prime Steakhouse</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 504 N Broadway Ave		Amount of Each Disbursement this Period 786.13
City Oklahoma City	State OK Zip Code 73102	
Purpose of Disbursement Campaign Event Expenses		Transaction ID : SB17-EX6284
Candidate Name		
Office Sought: <input 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) Primary 2014	[MEMO ITEM] Food and Beverage
State: District:	Category/Type 007	

Full Name (Last, First, Middle Initial) <b>C. Hilton Hotel</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 2809 Northwest Expressway		Amount of Each Disbursement this Period 42.00
City Oklahoma City	State OK Zip Code 73112	
Purpose of Disbursement Travel Expenses		Transaction ID : SB17-EX6285
Candidate Name		
Office Sought: <input 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) Primary 2014	[MEMO ITEM] Lodging
State: District:	Category/Type 002	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 38			
	<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)  
**Cole for Congress**

Full Name (Last, First, Middle Initial) <b>A. Tarahumaras Mexican Cafe</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014		
Mailing Address 702 North Porter Avenue			Amount of Each Disbursement this Period 80.00		
City Norman	State OK	Zip Code 73071	Transaction ID : <b>SB17-EX6286</b>		
Purpose of Disbursement Administrative/Salary/Overhead Expenses		Category/ Type 001	[MEMO ITEM] Food and Beverage		
Candidate Name					
Office Sought: <input 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) Primary 2014				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014		
Mailing Address 300 1st St SE			Amount of Each Disbursement this Period 34.40		
City Washington	State DC	Zip Code 20003	Transaction ID : <b>SB17-EX6287</b>		
Purpose of Disbursement Administrative/Salary/Overhead Expenses		Category/ Type 001	[MEMO ITEM] Food and Beverage		
Candidate Name					
Office Sought: <input 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) Primary 2014				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>c. Chadwicks</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014		
Mailing Address 203 Strand St			Amount of Each Disbursement this Period 85.00		
City Alexandria	State VA	Zip Code 22314	Transaction ID : <b>SB17-EX6288</b>		
Purpose of Disbursement Administrative/Salary/Overhead Expenses		Category/ Type 001	[MEMO ITEM] Food and Beverage		
Candidate Name					
Office Sought: <input 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) Primary 2014				
State: _____	District: _____				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 31 OF 38	
	<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)  
**Cole for Congress**

Full Name (Last, First, Middle Initial) <b>A. Hilton Garden Inn</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 135 NW 2nd St		Amount of Each Disbursement this Period 48.00
City Lawton State OK Zip Code 73501	Purpose of Disbursement Travel Expenses	
Candidate Name	Category/Type 002	<b>Transaction ID : SB17-EX6289</b>
Office Sought: <input 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) Primary 2014		
State: District:		<b>[MEMO ITEM]</b> Lodging

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 3060 Williams Drive Ste 200		Amount of Each Disbursement this Period 6483.00
City Fairfax State VA Zip Code 22031	Purpose of Disbursement Credit Card Paid by Paychex	
Candidate Name	Category/Type 001	<b>Transaction ID : SB17-EX6271</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014		
State: District:		Credit Card Paid by Paychex

Full Name (Last, First, Middle Initial) <b>c. Jeffrey Peters</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 328 Woodcreek Rd		Amount of Each Disbursement this Period 4723.06
City Edmond State OK Zip Code 73034	Purpose of Disbursement Administrative/Salary/Overhead Expenses	
Candidate Name	Category/Type 001	<b>Transaction ID : SB17-EX6269</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014		
State: District:		<b>[MEMO ITEM]</b> Net Salary

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6483.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 38	
	<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)  
**Cole for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2014
Mailing Address 3060 Williams Drive Ste 200		Amount of Each Disbursement this Period 1759.94
City Fairfax	State VA	
Zip Code 22031	Purpose of Disbursement Administrative/Salary/Overhead Expenses	<b>Transaction ID : SB17-EX6270</b>
Candidate Name	Category/Type 001	
Office Sought: <input 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) Primary 2014	<b>[MEMO ITEM]</b> Withholding Taxes
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2014
Mailing Address 3060 Williams Drive Ste 200		Amount of Each Disbursement this Period 109.58
City Fairfax	State VA	
Zip Code 22031	Purpose of Disbursement Payroll Service	<b>Transaction ID : SB17-EX6272</b>
Candidate Name	Category/Type 001	
Office Sought: <input 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) Primary 2014	Payroll Service
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Vanco Services</b>		Date of Disbursement MM / DD / YYYY 06 / 16 / 2014
Mailing Address 12600 Whitewater Drive Suite 200		Amount of Each Disbursement this Period 15.00
City Minnetonka	State MN	
Zip Code 55343	Purpose of Disbursement Credit Card Service Fee	<b>Transaction ID : SB17-EX6275</b>
Candidate Name	Category/Type 001	
Office Sought: <input 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) Primary 2014	Credit Card Service Fee
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	124.58
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 38	
	<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)  
**Cole for Congress**

Full Name (Last, First, Middle Initial) <b>A. Vanco Services</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 12600 Whitewater Drive Suite 200		Amount of Each Disbursement this Period 7.33
City Minnetonka	State MN	
Zip Code 55343	Purpose of Disbursement Credit Card Service Fee	<b>Transaction ID : SB17-EX6247</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014	Credit Card Service Fee
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Vanco Services</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 12600 Whitewater Drive Suite 200		Amount of Each Disbursement this Period 3.20
City Minnetonka	State MN	
Zip Code 55343	Purpose of Disbursement Credit Card Service Fee	<b>Transaction ID : SB17-EX6248</b>
Candidate Name	001 Category/ Type	
Office Sought: <input 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) Primary 2014	Credit Card Service Fee
State: District:		

Full Name (Last, First, Middle Initial) <b>c. United Parcel Service</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014
Mailing Address 55 Glenlake Parkway Northeast		Amount of Each Disbursement this Period 120.00
City Atlanta	State GA	
Zip Code 30328	Purpose of Disbursement Facility Rental	<b>Transaction ID : SB17-EX6260</b>
Candidate Name	007 Category/ Type	
Office Sought: <input 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) Primary 2014	Facility Rental
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	130.53
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 38			
	<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)  
**Cole for Congress**

Full Name (Last, First, Middle Initial) <b>A. Jeffrey Peters</b>			Date of Disbursement MM / DD / YYYY 06 / 10 / 2014	
Mailing Address 328 Woodcreek Rd			Amount of Each Disbursement this Period 488.20	
City Edmond	State OK	Zip Code 73034	Transaction ID : SB17-EX6254	
Purpose of Disbursement REIMBURSEMENT: SEE BELOW		Category/ Type 001	REIMBURSEMENT: SEE BELOW	
Candidate Name				
Office Sought: <input 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) Primary 2014			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Jeffrey Peters</b>			Date of Disbursement MM / DD / YYYY 06 / 10 / 2014	
Mailing Address 328 Woodcreek Rd			Amount of Each Disbursement this Period 160.20	
City Edmond	State OK	Zip Code 73034	Transaction ID : SB17-EX6255	
Purpose of Disbursement Mileage Reimbursement		Category/ Type 001	[MEMO ITEM]	
Candidate Name				
Office Sought: <input 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) Primary 2014			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. USPS</b>			Date of Disbursement MM / DD / YYYY 06 / 10 / 2014	
Mailing Address 458 Lenfant Plaza Southwest			Amount of Each Disbursement this Period 328.00	
City Washington	State DC	Zip Code 20024	Transaction ID : SB17-EX6256	
Purpose of Disbursement Postage		Category/ Type 001	[MEMO ITEM]	
Candidate Name				
Office Sought: <input 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) Primary 2014			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	488.20
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 38	
	<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)  
**Cole for Congress**

Full Name (Last, First, Middle Initial) <b>A. Lawton Constitution</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 102 SW 3rd		Amount of Each Disbursement this Period 4231.30
City Lawton	State OK	Zip Code 73501
Purpose of Disbursement Newspaper Advertising	Category/Type 004	
Candidate Name		Transaction ID : SB17-EX6252
Office Sought: <input 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) Primary 2014	
State: District:	Newspaper Advertising	

Full Name (Last, First, Middle Initial) <b>B. Marietta Monitor</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 104 W Main		Amount of Each Disbursement this Period 283.50
City Marietta	State OK	Zip Code 73448
Purpose of Disbursement Newspaper Advertising	Category/Type 004	
Candidate Name		Transaction ID : SB17-EX6253
Office Sought: <input 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) Primary 2014	
State: District:	Newspaper Advertising	

Full Name (Last, First, Middle Initial) <b>c. Meredith Siegfried</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address PO Box 3365		Amount of Each Disbursement this Period 2339.24
City Tulsa	State OK	Zip Code 74101
Purpose of Disbursement REIMBURSEMENT: SEE BELOW	Category/Type 007	
Candidate Name		Transaction ID : SB17-EX6266
Office Sought: <input 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) Primary 2014	
State: District:	REIMBURSEMENT: SEE BELOW	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6854.04
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 38			
	<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)  
**Cole for Congress**

Full Name (Last, First, Middle Initial) <b>A. Spaghetti Warehouse</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014	
Mailing Address 101 E Sheridan Ave			Amount of Each Disbursement this Period 2339.24	
City Oklahoma City	State OK	Zip Code 73104	Transaction ID : <b>SB17-EX6267</b>	
Purpose of Disbursement Food and Beverage		007		
Candidate Name			[MEMO ITEM]	
Office Sought: <input 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) Primary 2014			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Media Ad Ventures</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2014	
Mailing Address 8136 Old Keene Mill Rd Ste A-300			Amount of Each Disbursement this Period 30210.00	
City Springfield	State VA	Zip Code 22152	Transaction ID : <b>SB17-EX6268</b>	
Purpose of Disbursement Radio Advertising		004		
Candidate Name			Radio Advertising	
Office Sought: <input 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) Primary 2014			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Susan Gage Caterers</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014	
Mailing Address 7411 Livingston Rd			Amount of Each Disbursement this Period 484.00	
City Oxon Hill	State MD	Zip Code 20745	Transaction ID : <b>SB17-EX6276</b>	
Purpose of Disbursement Catering		007		
Candidate Name			Catering	
Office Sought: <input 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) Primary 2014			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	30694.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 38	
	<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)  
**Cole for Congress**

Full Name (Last, First, Middle Initial) <b>A. Diageo North America Employees PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2014
Mailing Address 801 Main Ave PO Box 778		Amount of Each Disbursement this Period 745.38
City Norwalk State CT Zip Code 06851	Category/Type	
Purpose of Disbursement IN-KIND RECEIVED Food and Beverage		<b>Transaction ID : SB17-CN14746</b>
Candidate Name <b>Diageo North America Employees PAC</b>		
Office Sought: <input 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) Primary 2014	In-Kind Received Food and Beverage
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mrs. Letitia White</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2014
Mailing Address 13901 Piscataway Dr		Amount of Each Disbursement this Period 433.44
City Fort Washington State MD Zip Code 20744	Category/Type	
Purpose of Disbursement IN-KIND RECEIVED Food and Beverage		<b>Transaction ID : SB17-CN14745</b>
Candidate Name		
Office Sought: <input 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) Primary 2014	In-Kind Received Food and Beverage
State: District:		

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1178.82
<b>TOTAL</b> This Period (last page this line number only).....	100042.79

**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 38 OF 38	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Cole for Congress**

Full Name (Last, First, Middle Initial) <b>A. Friends Of Jack Kingston</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address PO Box 2133		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : SB21-EX6250</b>
City Savannah State GA Zip Code 31402	Purpose of Disbursement Contribution 011 Category/Type	
Candidate Name <b>John H Kingston Sr.</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Contribution
State: GA District:		

Full Name (Last, First, Middle Initial) <b>B. Comstock For Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2014
Mailing Address PO Box 71596		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : SB21-EX6251</b>
City Richmond State VA Zip Code 23255	Purpose of Disbursement Contribution 011 Category/Type	
Candidate Name <b>Barbara J Comstock</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Contribution
State: VA District: 10		

Full Name (Last, First, Middle Initial) <b>C.</b>		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 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4000.00
<b>TOTAL</b> This Period (last page this line number only).....	4000.00