

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

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

12FE4M5

RESTORE OKLAHOMA

ADDRESS (number and street)

PO BOX 341027

Check if different than previously reported. (ACC)

AUSTIN

TX

78734

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00753491

3. IS THIS REPORT NEW OR AMENDED

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)
July 31 Mid-Year Report (Non-election Year Only) (MY)
Termination Report (TER)

- (b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S)

Election on [MM/DD/YYYY] in the State of []

- (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

Election on [MM/DD/YYYY] in the State of []

5. Covering Period

07 / 01 / 2020 through 09 / 30 / 2020

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

HOBBS, CABELL, , ,

Type or Print Name of Treasurer

Signature of Treasurer

HOBBS, CABELL, , ,

[Electronically Filed]

Date

10 / 13 / 2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office Use Only

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

RESTORE OKLAHOMA

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="0.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="357050.00"/>	<input type="text" value="357050.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="357050.00"/>	<input type="text" value="357050.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="245730.00"/>	<input type="text" value="245730.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="111320.00"/>	<input type="text" value="111320.00"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

RESTORE OKLAHOMA

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A).....	357000.00	357000.00
(ii) Unitemized	50.00	50.00
(iii) TOTAL (add Lines 11(a)(i) and (ii).....▶	357050.00	357050.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	357050.00	357050.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	357050.00	357050.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	357050.00	357050.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	25730.00	25730.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	25730.00	25730.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	220000.00	220000.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	245730.00	245730.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	245730.00	245730.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	357050.00	357050.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	357050.00	357050.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	25730.00	25730.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	25730.00	25730.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 25
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
RESTORE OKLAHOMA

A. AIRWOLF FILTER CORP
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1344

City OKMULGEE	State OK	Zip Code 74447
------------------	-------------	-------------------

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

Name of Employer (for Individual)	Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 13 / 2020

Transaction ID : SA11AI.4124

Amount of Each Receipt this Period
 20000.00

Memo Item

B. ALLEN, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38 WOODLANDS DR

City ENID	State OK	Zip Code 73703
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 01 / 2020

Transaction ID : SA11AI.4155

Amount of Each Receipt this Period
 10000.00

Memo Item

C. ASBJORNSON, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 708 W 79TH ST

City TULSA	State OK	Zip Code 74132
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AAON INC	Occupation (for Individual) MANAGEMENT
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2020

Transaction ID : SA11AI.4210

Amount of Each Receipt this Period
 10000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	40000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 25
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
RESTORE OKLAHOMA

A. BLACK, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4000 NW 39TH EXPRESSWAY
 City OKLAHOMA CITY State OK Zip Code 73112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RK BLACK INC Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 12500.00

Date of Receipt 09 / 21 / 2020
Transaction ID : SA11AI.4221
 Amount of Each Receipt this Period 12500.00
 Memo Item

B. BLANCO, RUDOLFO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 472104
 City TULSA State OK Zip Code 74147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PATHWAY SERVICES Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 06 / 2020
Transaction ID : SA11AI.4120
 Amount of Each Receipt this Period 10000.00
 Memo Item

C. BRAUM, DREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 NE 63RD ST
 City OKLAHOMA CITY State OK Zip Code 73121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRAUM'S ICE CREAM Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 22 / 2020
Transaction ID : SA11AI.4206
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	27500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 25
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
RESTORE OKLAHOMA

A. BROCK, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2021 S LEWIS AVE, STE 415

City TULSA	State OK	Zip Code 74104
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) PETROLEUM ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2020

Transaction ID : SA11AI.4229

Amount of Each Receipt this Period
5000.00

Memo Item

B. BROWN, RUSSELL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4009 SOUTH NOGAL AVE

City BROKEN ARROW	State OK	Zip Code 74011
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PREMIER	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2020

Transaction ID : SA11AI.4145

Amount of Each Receipt this Period
2500.00

Memo Item

C. CASE, MIKE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4200 E SKELLY DR, STE 800

City TULSA	State OK	Zip Code 74135
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CASE AND ASSOC. PROPERTIES	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
25000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2020

Transaction ID : SA11AI.4225

Amount of Each Receipt this Period
25000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	32500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 25
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
RESTORE OKLAHOMA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. DIESEL CASTING SERVICE INC

Mailing Address 29 NE 8TH ST

City OKLAHOMA CITY	State OK	Zip Code 73104
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2020

Transaction ID : SA11AI.4136

Amount of Each Receipt this Period
5000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. DILLINGHAM, CHAD, , ,

Mailing Address 4 MONTEREY DR

City ENID	State OK	Zip Code 73703
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) INSURANCE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2020

Transaction ID : SA11AI.4212

Amount of Each Receipt this Period
500.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. GARMAN, JAMES, , ,

Mailing Address 141 NE 70TH ST

City OKLAHOMA CITY	State OK	Zip Code 73105
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PADD INC	Occupation (for Individual) CONTRACTOR
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 21 / 2020

Transaction ID : SA11AI.4128

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	10500.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 25
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
RESTORE OKLAHOMA

A. GREGORY, RON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 908 MESSENGER LANE
 City MOORE State OK Zip Code 73160
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AIR COMFORT SOLUTIONS Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 08 / 25 / 2020
Transaction ID : SA11AI.4143
 Amount of Each Receipt this Period 25000.00
 Memo Item

B. HUGGARD, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3724 SPYGLASS RD
 City OKLAHOMA CITY State OK Zip Code 73120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DIESEL CASTING SERVICES INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 08 / 24 / 2020
Transaction ID : SA11AI.4139
 Amount of Each Receipt this Period 2500.00
 Memo Item

C. KANTE, BENNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16749 WEST OZARK TRAIL
 City SEPULPA State OK Zip Code 74066
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CSO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 12 / 2020
Transaction ID : SA11AI.4122
 Amount of Each Receipt this Period 10000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	37500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 25
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
RESTORE OKLAHOMA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. KIRBY-SMITH MACHINERY INC

Mailing Address 6715 W RENO

City OKLAHOMA CITY	State OK	Zip Code 73127
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 10 / 2020

Transaction ID : SA11AI.4171

Amount of Each Receipt this Period
10000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. KRIMBILL, MIKE, , ,

Mailing Address 5620 E 114TH ST

City TULSA	State OK	Zip Code 74137
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NGL ENERGY PARTNERS	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2020

Transaction ID : SA11AI.4161

Amount of Each Receipt this Period
20000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. LONE STAR SPECIALTY PRODUCTS LLC

Mailing Address 4200 E. SKELLEY DR, STE 600

City TULSA	State OK	Zip Code 78143
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2020

Transaction ID : SA11AI.4132

Amount of Each Receipt this Period
10000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	40000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 OF 25
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
RESTORE OKLAHOMA

A. MARSHALL, PAULA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4829
 City TULSA State OK Zip Code 74159
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE BAMA COMPANIES Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 27 / 2020
Transaction ID : SA11AI.4149
 Amount of Each Receipt this Period
 5000.00
 Memo Item

B. MID STATES REAL ESTATE LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 S GARLAND RD
 City ENID State OK Zip Code 73703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2020
Transaction ID : SA11AI.4231
 Amount of Each Receipt this Period
 5000.00
 Memo Item

C. PILGRAM, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 990
 City EDMOND State OK Zip Code 78083
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DIAKONOS GROUP Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 01 / 2020
Transaction ID : SA11AI.4157
 Amount of Each Receipt this Period
 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	15000.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 25
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
RESTORE OKLAHOMA

A. POE & ASSOCIATES INC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1601 NORTHWEST EXPRESSWAY, STE 515

City OKLAHOMA CITY	State OK	Zip Code 73118
-----------------------	-------------	-------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2020

Transaction ID : SA11AI.4163

Amount of Each Receipt this Period
5000.00

Memo Item

B. POLLARD, BARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 102 S VAN BUREN

City ENID	State OK	Zip Code 73703
--------------	-------------	-------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FARMER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2020

Transaction ID : SA11AI.4175

Amount of Each Receipt this Period
2500.00

Memo Item

C. POLSTON, RODERICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4708 N PORTER AVE

City NORMAN	State OK	Zip Code 73071
----------------	-------------	-------------------

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

Name of Employer (for Individual) POLSTON TAX	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2020

Transaction ID : SA11AI.4179

Amount of Each Receipt this Period
10000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	17500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 25
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
RESTORE OKLAHOMA

A. REED, BART, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 205 EAST KINGS RD
 City ADA State OK Zip Code 78420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HEALTH CARE SERVICES
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 5000.00

Date of Receipt 09 / 20 / 2020
Transaction ID : SA11AI.4126
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. RUSSELL, VINCENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3201 NW 176TH PL
 City EDMOND State OK Zip Code 73102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) T&W TIRE Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 5000.00

Date of Receipt 09 / 30 / 2020
Transaction ID : SA11AI.4227
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. SILVER STAR CONSTRUCTION COMPANY
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2401 S BROADWAY
 City MOORE State OK Zip Code 73161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 10000.00

Date of Receipt 09 / 01 / 2020
Transaction ID : SA11AI.4153
 Amount of Each Receipt this Period 10000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	20000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 OF 25
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
RESTORE OKLAHOMA

A. SLAWSON, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1606 CAMDEN WAY
 City NICHOLS HILLS State OK Zip Code 73116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SLAWSON EXPL CO INC Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 26 / 2020
Transaction ID : SA11AI.4147
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. SNF PAYMENT SERVICES
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 270120
 City OKLAHOMA CITY State OK Zip Code 73137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 24 / 2020
Transaction ID : SA11AI.4134
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. STATEWIDE SERVICE CENTER
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 950368
 City OKLAHOMA CITY State OK Zip Code 73195
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 09 / 2020
Transaction ID : SA11AI.4165
 Amount of Each Receipt this Period 10000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	16000.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 16 OF 25
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
RESTORE OKLAHOMA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. TANENBAUM, RICHARD, , ,

Mailing Address 131 PARK AVE #2900

City OKLAHOMA CITY State OK Zip Code 73102

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

Name of Employer (for Individual) GARDNER TANENBAUM HOLDINGS Occupation (for Individual) REAL ESTATE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 09 / 10 / 2020
Transaction ID : SA11AI.4169

Amount of Each Receipt this Period 50000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. THE HANOR COMPANY OF WISCONSIN LLC

Mailing Address 4005 E OWEN K. GARNOTT RD

City ENID State OK Zip Code 73701

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 01 / 2020
Transaction ID : SA11AI.4151

Amount of Each Receipt this Period 10000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. VANCE, JOHN, , ,

Mailing Address 6406 OAKTREE CIR

City EDMOND State OK Zip Code 73025

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

Name of Employer (for Individual) JOHN VANCE AUTO GROUP Occupation (for Individual) AUTO DEALER

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 10 / 2020
Transaction ID : SA11AI.4167

Amount of Each Receipt this Period 500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 60500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 25
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
RESTORE OKLAHOMA

A. VAN HOOSE, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 NE 70

City OKLAHOMA CITY	State OK	Zip Code 73105
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) VHC	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2020

Transaction ID : SA11AI.4208

Amount of Each Receipt this Period
5000.00

Memo Item

B. WARD, MYRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 900 BROOKSIDE DR

City ENID	State OK	Zip Code 73703
--------------	-------------	-------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) OIL & GAS INVESTMENTS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2020

Transaction ID : SA11AI.4130

Amount of Each Receipt this Period
10000.00

Memo Item

C. WEBBER, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 915 W BLUE STARR DR

City CLAREMORE	State OK	Zip Code 74107
-------------------	-------------	-------------------

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

Name of Employer (for Individual) HYDROHOIST MARINE GROUP	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 10 / 2020

Transaction ID : SA11AI.4177

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	20000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 25
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
RESTORE OKLAHOMA

A. WILLIAMS CAPITAL CORPORATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 112

City ENID	State OK	Zip Code 73702
--------------	-------------	-------------------

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

Name of Employer (for Individual)	Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2020

Transaction ID : SA11AI.4159

Amount of Each Receipt this Period
5000.00

Memo Item

B. WINTER, BRIAN, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1414 EAST TRAIL ST

City DODGE CITY	State KS	Zip Code 67801
--------------------	-------------	-------------------

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

Name of Employer (for Individual) WINTER LIVESTOCK	Occupation (for Individual) AGRICULTURE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2020

Transaction ID : SA11AI.4223

Amount of Each Receipt this Period
5000.00

Memo Item

C. WRIGHT, MICHAEL, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2105 MAPLE LEAFE CIRCLE

City ENID	State OK	Zip Code 73703
--------------	-------------	-------------------

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

Name of Employer (for Individual) EDWARD JONES	Occupation (for Individual) FINANCIAL ADVISOR
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 10 / 2020

Transaction ID : SA11AI.4173

Amount of Each Receipt this Period
10000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	20000.00
TOTAL This Period (last page this line number only).....▶	357000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
RESTORE OKLAHOMA

Full Name (Last, First, Middle Initial)
A. ABSOLUTE RESOURCE DEVELOPMENT

Date of Disbursement: MM / DD / YYYY
09 / 09 / 2020

Mailing Address 673 W 78TH PLACE

City TULSA State OK Zip Code 74132

Purpose of Disbursement FINANCE CONSULTING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C
Transaction ID : SB21B.4199
Amount of Each Disbursement this Period: 14700.55

Memo Item

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

Date of Disbursement: MM / DD / YYYY
08 / 12 / 2020

Mailing Address 5555 HILTON, STE 106

City BATON ROUGE State LA Zip Code 70808

Purpose of Disbursement CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C
Transaction ID : SB21B.4187
Amount of Each Disbursement this Period: 400.30

Memo Item

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

Date of Disbursement: MM / DD / YYYY
08 / 20 / 2020

Mailing Address 5555 HILTON, STE 106

City BATON ROUGE State LA Zip Code 70808

Purpose of Disbursement CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C
Transaction ID : SB21B.4188
Amount of Each Disbursement this Period: 200.30

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 15301.15

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
RESTORE OKLAHOMA

Full Name (Last, First, Middle Initial)
A. ANEDOT

Mailing Address 5555 HILTON, STE 106

City BATON ROUGE State LA Zip Code 70808

Purpose of Disbursement
CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 21 / 2020

FEC Identification Number: **C**

Transaction ID : **SB21B.4189**

Amount of Each Disbursement this Period: 200.30

Memo Item

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

Mailing Address 5555 HILTON, STE 106

City BATON ROUGE State LA Zip Code 70808

Purpose of Disbursement
CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 25 / 2020

FEC Identification Number: **C**

Transaction ID : **SB21B.4190**

Amount of Each Disbursement this Period: 1000.30

Memo Item

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

Mailing Address 5555 HILTON, STE 106

City BATON ROUGE State LA Zip Code 70808

Purpose of Disbursement
CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 25 / 2020

FEC Identification Number: **C**

Transaction ID : **SB21B.4191**

Amount of Each Disbursement this Period: 100.30

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1300.90

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
RESTORE OKLAHOMA

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 5555 HILTON, STE 106

City
BATON ROUGE

State
LA

Zip Code
70808

Purpose of Disbursement
CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	7			2	0	2	0		

FEC Identification Number

C []

Transaction ID : SB21B.4192

Amount of Each Disbursement this Period

[] 200.30

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 5555 HILTON, STE 106

City
BATON ROUGE

State
LA

Zip Code
70808

Purpose of Disbursement
CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C []

Transaction ID : SB21B.4193

Amount of Each Disbursement this Period

[] 200.30

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 5555 HILTON, STE 106

City
BATON ROUGE

State
LA

Zip Code
70808

Purpose of Disbursement
CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C []

Transaction ID : SB21B.4219

Amount of Each Disbursement this Period

[] 500.30

Memo Item

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

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

[] 900.90

[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
RESTORE OKLAHOMA

A. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 5555 HILTON, STE 106

City BATON ROUGE State LA Zip Code 70808

Purpose of Disbursement CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 27 / 2020

FEC Identification Number: C

Transaction ID : SB21B.4220

Amount of Each Disbursement this Period: 200.30

Memo Item

B. ASCENT MEDIA LLC

Full Name (Last, First, Middle Initial)

Mailing Address 7600 E. EASTMAN AVENUE, STE 405

City DENVER State CO Zip Code 80231

Purpose of Disbursement MEDIA CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 02 / 2020

FEC Identification Number: C

Transaction ID : SB21B.4196

Amount of Each Disbursement this Period: 5000.00

Memo Item

C. DICKINSON WRIGHT PLLC

Full Name (Last, First, Middle Initial)

Mailing Address 1825 EYE STREET NW, STE 900

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement LEGAL CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 02 / 2020

FEC Identification Number: C

Transaction ID : SB21B.4197

Amount of Each Disbursement this Period: 480.50

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5680.80

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
RESTORE OKLAHOMA

A. DICKINSON WRIGHT PLLC

Full Name (Last, First, Middle Initial)

Mailing Address 1825 EYE STREET NW, STE 900

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement LEGAL CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 30 / 2020

FEC Identification Number: C

Transaction ID : SB21B.4217

Amount of Each Disbursement this Period: 770.00

Memo Item

B. RIGHTSIDE COMPLIANCE LLC

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 341027

City AUSTIN State TX Zip Code 78734

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 02 / 2020

FEC Identification Number: C

Transaction ID : SB21B.4194

Amount of Each Disbursement this Period: 750.00

Memo Item

C. RIGHTSIDE COMPLIANCE LLC

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 341027

City AUSTIN State TX Zip Code 78734

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 30 / 2020

FEC Identification Number: C

Transaction ID : SB21B.4218

Amount of Each Disbursement this Period: 961.75

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	2481.75
TOTAL This Period (last page this line number only).....▶	25665.50

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) RESTORE OKLAHOMA
FEC IDENTIFICATION NUMBER C C00753491

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee ASCENT MEDIA LLC
Mailing Address 7600 E. EASTMAN AVENUE, STE 405
City DENVER State CO Zip Code 80231
Purpose of Expenditure MEDIA
Name of Federal Candidate: BICE, STEPHANIE, , , Support
Office Sought: House District: 05 State: OK
Disbursement For: General 2020
Amount 19000.00
Transaction ID: SE.4103

Full Name of Payee ASCENT MEDIA LLC
Mailing Address 7600 E. EASTMAN AVENUE, STE 405
City DENVER State CO Zip Code 80231
Purpose of Expenditure MEDIA
Name of Federal Candidate: HORN, KENDRA, , , Oppose
Office Sought: House District: 05 State: OK
Disbursement For: General 2020
Amount 38000.00
Transaction ID: SE.4104

(a) SUBTOTAL of Itemized Independent Expenditures 38000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HOBBS, CABELL, , ,

[Electronically Filed]

Date 10 / 13 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) RESTORE OKLAHOMA
FEC IDENTIFICATION NUMBER C C00753491

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee ASCENT MEDIA LLC
Mailing Address 7600 E. EASTMAN AVENUE, STE 405
City DENVER State CO Zip Code 80231
Purpose of Expenditure MEDIA
Name of Federal Candidate: HORN, KENDRA, , ,
Calendar Year-To-Date Per Election for Office Sought 192500.00
Disbursement For: General 2020

Full Name of Payee ASCENT MEDIA LLC
Mailing Address 7600 E. EASTMAN AVENUE, STE 405
City DENVER State CO Zip Code 80231
Purpose of Expenditure MEDIA
Name of Federal Candidate: HORN, KENDRA, , ,
Calendar Year-To-Date Per Election for Office Sought 220000.00
Disbursement For: General 2020

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 182000.00, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures 220000.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HOBBS, CABELL, , ,

[Electronically Filed]

Date 10 / 13 / 2020

Signature