



**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Mullin 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))....	103635.83	315905.63
(b) Total Contribution Refunds (from Line 20(d)) .....	2500	8000
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	101135.83	307905.63
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	54513.58	259064.68
(b) Total Offsets to Operating Expenditures (from Line 14).....		82.25
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	54513.58	258982.43
8. Cash on Hand at Close of Reporting Period (from Line 27).....	117724.76	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....		
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	228000	

**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

**Mullin 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).....	55400	170525
(ii) Unitemized.....	1180	12830
(iii) TOTAL of contributions from individuals ▶	56580	183355
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....	47055.83	130555.83
(d) The Candidate.....		1994.8
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	103635.83	315905.63
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.) .....		
		82.25
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	103635.83	315987.88

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	54513.58	259064.68
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....		22000
(b) Of All Other Loans .....		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....		22000
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....		5500
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....	2500	2500
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	2500	8000
21. OTHER DISBURSEMENTS .....		
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	57013.58	289064.68

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	71102.51
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	103635.83
25. SUBTOTAL (add Line 23 and Line 24).....	174738.34
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	57013.58
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	117724.76

**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 52
	<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)  
**Mullin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Copp Rodeo-Cattle Company**

Mailing Address 14092 E 500 Road

City Claremore State OK Zip Code 74017

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 05 / 2013

**Transaction ID : SA11Ai-CN2394**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Jerry Copp**

Mailing Address 14092 E 500 Road

City Claremore State OK Zip Code 74017

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

Name of Employer Occupation  
 Copp Rodeo-Cattle Co Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 05 / 2013

**Transaction ID : SA11Ai-CN2459**

Amount of Each Receipt this Period  
**500**

Partnership-Copp Rodeo-Cattle Company

**[MEMO ITEM]**  
 \$500.00 MEMO Partnership Attributed

**C.** Full Name (Last, First, Middle Initial)  
**Lessley Properties LLC**

Mailing Address 920 16th St

City Claremore State OK Zip Code 74017

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

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 Y Y  
 05 / 03 / 2013

**Transaction ID : SA11Ai-CN2379**

Amount of Each Receipt this Period  
**2500**

**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 52
	<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)  
**Mullin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Ronald L Lessley**

Mailing Address 920 16th St

City State Zip Code  
Claremore OK 74017

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

Name of Employer Occupation  
Lessley Properties Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : SA11Ai-CN2380**

Amount of Each Receipt this Period  
 1250  
 Partnership-Lessley Properties LLC

**[MEMO ITEM]**  
 \$1250.00 MEMO Partnership Attributed

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Brett L Lessley**

Mailing Address 920 16th St

City State Zip Code  
Claremore OK 74017

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

Name of Employer Occupation  
Lessley Properties Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : SA11Ai-CN2381**

Amount of Each Receipt this Period  
 1250  
 Partnership-Lessley Properties LLC

**[MEMO ITEM]**  
 \$1250.00 MEMO Partnership Attributed

**C.** Full Name (Last, First, Middle Initial)  
**MCC Mechanical LLC**

Mailing Address PO Box 7101

City State Zip Code  
Metairie LA 70010

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

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  
 04 / 16 / 2013

**Transaction ID : SA11Ai-CN2351**

Amount of Each Receipt this Period  
 1000

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

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

1000.00

**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 52
	<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)  
**Mullin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Joseph A Jaeger Jr**

Mailing Address PO Box 7101

City State Zip Code  
Metairie LA 70010

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

Name of Employer Occupation  
MMC Mechanical CEO

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  
04 / 16 / 2013

**Transaction ID : SA11Ai-CN2458**

Amount of Each Receipt this Period  
1000  
Partnership-MCC Mechanical LLC

**[MEMO ITEM]**  
\$1000.00 MEMO Partnership Attributed

**B.** Full Name (Last, First, Middle Initial)  
**Whitten & Burrage LLP**

Mailing Address 1215 Claseen Drive

City State Zip Code  
Oklahoma City OK 73103

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

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  
04 / 24 / 2013

**Transaction ID : SA11Ai-CN2355**

Amount of Each Receipt this Period  
1000

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Reggie Whitten**

Mailing Address 1215 Claseen Drive

City State Zip Code  
Oklahoma City OK 73103

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

Name of Employer Occupation  
Whitten & Burrage Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 24 / 2013

**Transaction ID : SA11Ai-CN2456**

Amount of Each Receipt this Period  
500  
Partnership-Whitten & Burrage LLP

**[MEMO ITEM]**  
\$500.00 MEMO Partnership Attributed

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

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

1000.00

**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 52
	<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	

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)  
**Mullin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Michael Burrage**

Mailing Address 1215 Claseen Drive

City Oklahoma City State OK Zip Code 73103

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

Name of Employer Whitten & Burrage Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 24 / 2013

**Transaction ID : SA11Ai-CN2457**

Amount of Each Receipt this Period  
 500

Partnership-Whitten & Burrage LLP

**[MEMO ITEM]**  
 \$500.00 MEMO Partnership Attributed

**B.** Full Name (Last, First, Middle Initial)  
**Mr. James Bennett**

Mailing Address 10421 S Kingston Ave

City Tulsa State OK Zip Code 74137-7030

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

Name of Employer US Payments LLC Occupation CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 500

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 30 / 2013

**Transaction ID : SA11Ai-CN2388**

Amount of Each Receipt this Period  
 500

DEBT REDUCTION

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Jim Brakefield**

Mailing Address 25155 E 380 Rd

City Adair State OK Zip Code 74330-3200

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

Name of Employer Brakefield Equipment Occupation Contract Mining

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11Ai-CN2446**

Amount of Each Receipt this Period  
 1000

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

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

1500.00



**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 52
	<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)  
**Mullin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Russell D. Brown**

Mailing Address PO Box 688

City Bristow State OK Zip Code 74010-0688

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

Name of Employer Spirit Bank Occupation President

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 / 12 / 2013

**Transaction ID : SA11Ai-CN2435**

Amount of Each Receipt this Period  
 1000

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Tommy Caldwell**

Mailing Address PO Box 195

City Shady Point State OK Zip Code 74956-0195

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

Name of Employer Self Employed Occupation Rancher

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 05 / 2013

**Transaction ID : SA11Ai-CN2434**

Amount of Each Receipt this Period  
 2500

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Drew T. Carson**

Mailing Address PO Box 639

City Stilwell State OK Zip Code 74960-0639

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

Name of Employer Bank of Commerce Occupation President

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 / 24 / 2013

**Transaction ID : SA11Ai-CN2439**

Amount of Each Receipt this Period  
 1000

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

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

4500.00

**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 52
	<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	

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)  
**Mullin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Jerry Caughman II**

Mailing Address PO Box 1365

City Vian State OK Zip Code 74962

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

Name of Employer Cherokee Nation Occupation Clinic Admin

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**06 / 14 / 2013**

**Transaction ID : SA11Ai-CN2404**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Hollie Chappell**

Mailing Address PO Box 1095

City Guthrie State OK Zip Code 73044

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

Name of Employer Self Employed Occupation Long Term Care Facility

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**05 / 03 / 2013**

**Transaction ID : SA11Ai-CN2383**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Jeff Chappell**

Mailing Address PO Box 1095

City Guthrie State OK Zip Code 73044

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

Name of Employer Self Employed Occupation Long Term Care Facility

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**05 / 03 / 2013**

**Transaction ID : SA11Ai-CN2382**

Amount of Each Receipt this Period  
**1000**

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

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

**2250.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 52
	<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)  
**Mullin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Tom C Coble**

Mailing Address 717 Franklin Dr

City Ardmore State OK Zip Code 73401

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

Name of Employer Elmbrook Management Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 03 / 2013**

**Transaction ID : SA11Ai-CN2376**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Stephanie Cooper**

Mailing Address PO Box 118

City Mead State OK Zip Code 73449

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

Name of Employer THP-WNJ Occupation RN-Nurse Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 20 / 2013**

**Transaction ID : SA11Ai-CN2409**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Jeffrey Ehret**

Mailing Address 465 Indigo Springs Street

City Henderson State NV Zip Code 89014

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

Name of Employer The Penta Bulding Group Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 24 / 2013**

**Transaction ID : SA11Ai-CN2364**

Amount of Each Receipt this Period  
**1500**

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

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

**3500.00**

**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 52
	<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)  
**Mullin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Boyd Erickson**

Mailing Address 1326 Marshfield road

City Las Vegas State NV Zip Code 89135

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

Name of Employer FEA Consulting Engineers Occupation Principal Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 24 / 2013**

**Transaction ID : SA11Ai-CN2360**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Randall Shane Fidler**

Mailing Address 7335 S Lewis Ave Ste 306

City Tulsa State OK Zip Code 74136-6897

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

Name of Employer Fidler Wealth Management Occupation Financial Planner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 21 / 2013**

**Transaction ID : SA11Ai-CN2438**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Debra Fowler**

Mailing Address PO Box 280

City Collegedale State TN Zip Code 37315

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

Name of Employer McKee Food Corp. Occupation Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 14 / 2013**

**Transaction ID : SA11Ai-CN2384**

Amount of Each Receipt this Period  
**750**

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

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

**2750.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 52
	<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	

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)  
**Mullin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Jeff L Gregston**

Mailing Address 1603 Timbercreek Dr

City Duncan State OK Zip Code 73533

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

Name of Employer Gregston Nursing & Rehab Occupation Administrator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : SA11Ai-CN2375**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Don Greiner**

Mailing Address 4350 Will Rogers Pkwy # 300

City Oklahoma City State OK Zip Code 73108

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

Name of Employer Grace Living Centers Occupation Management

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  
 05 / 03 / 2013

**Transaction ID : SA11Ai-CN2373**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Rosie Grieves**

Mailing Address 5404 Canyon Bluff Trail NE

City Albuquerque State NM Zip Code 87111

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 Y Y  
 04 / 24 / 2013

**Transaction ID : SA11Ai-CN2359**

Amount of Each Receipt this Period  
**500**

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

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

**1750.00**

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

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

FOR LINE NUMBER: PAGE 14 OF 52  
(check only one)  
 11a 12   
  11b 13a   
  11c 13b   
  11d 14   
  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)  
**Mullin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Chris Hensley**

Mailing Address 25 Club View Cir

City Sallisaw State OK Zip Code 74955

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

Name of Employer Self Occupation Long-term Care

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : SA11Ai-CN2374**

Amount of Each Receipt this Period  
 500

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Larry Jack Horn**

Mailing Address PO Box 445

City Vian State OK Zip Code 74962

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

Name of Employer Vian Lumber Company Occupation Owner

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 14 / 2013

**Transaction ID : SA11Ai-CN2403**

Amount of Each Receipt this Period  
 250

**C.** Full Name (Last, First, Middle Initial)  
**Mike Leonard**

Mailing Address 3916 Putter Pl

City Muskogee State OK Zip Code 74403-1772

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

Name of Employer First National Bank Occupation President

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 30 / 2013

**Transaction ID : SA11Ai-CN2433**

Amount of Each Receipt this Period  
 2500

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

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

3250.00

**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 52
	<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)  
**Mullin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Tom Love**

Mailing Address 6824 NW Grand Blvd

City Oklahoma City State OK Zip Code 73116

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

Name of Employer Love's Travel Stop Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**06 / 27 / 2013**

**Transaction ID : SA11Ai-CN2440**

Amount of Each Receipt this Period  
**2500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Todd D. Martin**

Mailing Address 2716 E Phillips Ave

City Sallisaw State OK Zip Code 74955-5445

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

Name of Employer Mallory Funeral Home Occupation Funeral Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**06 / 14 / 2013**

**Transaction ID : SA11Ai-CN2402**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Stephen Mchugh**

Mailing Address 1919 Kenbar Court

City Mclean State VA Zip Code 22101

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

Name of Employer Requested Occupation Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**04 / 24 / 2013**

**Transaction ID : SA11Ai-CN2361**

Amount of Each Receipt this Period  
**500**

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

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

**3500.00**

**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 52
	<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	

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)  
**Mullin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Gary Moores**

Mailing Address **PO Box 841**

City **Eufaula** State **OK** Zip Code **74432**

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

Name of Employer **Concorde Resources** Occupation **Oil & Gas Operator**

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  
**04 / 30 / 2013**

**Transaction ID : SA11Ai-CN2369**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Cherokee Nation**

Mailing Address **PO Box 948**

City **Tahlequah** State **OK** Zip Code **74465**

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 **6500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 14 / 2013**

**Transaction ID : SA11Ai-CN2407**

Amount of Each Receipt this Period  
**1500**

**C.** Full Name (Last, First, Middle Initial)  
**Cherokee Nation**

Mailing Address **PO Box 948**

City **Tahlequah** State **OK** Zip Code **74465**

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 **8500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2013**

**Transaction ID : SA11Ai-CN2444**

Amount of Each Receipt this Period  
**2000**

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

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

**4500.00**



**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 17 OF 52
	<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)  
**Mullin For Congress**

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

Mailing Address PO Box 948

City State Zip Code  
Tahlequah OK 74465

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  
**7600**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2013**

**Transaction ID : SA11Ai-CN2454**

Amount of Each Receipt this Period  
**-900**

Redesignated to General 2014

**[MEMO ITEM]**  
Redesignated

**B.** Full Name (Last, First, Middle Initial)  
**Cherokee Nation**

Mailing Address PO Box 948

City State Zip Code  
Tahlequah OK 74465

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  
**8500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2013**

**Transaction ID : SA11Ai-CN2455**

Amount of Each Receipt this Period  
**900**

Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

**C.** Full Name (Last, First, Middle Initial)  
**Chickasaw Nation**

Mailing Address P.O. Box 1548

City State Zip Code  
Ada OK 74820

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  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 05 / 2013**

**Transaction ID : SA11Ai-CN2395**

Amount of Each Receipt this Period  
**1000**

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

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

**1000.00**

**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 52
	<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)  
**Mullin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Pala Band Of Mission Indians**

Mailing Address 12196 Pala Mission Road

City Pala	State CA	Zip Code 92059
--------------	-------------	-------------------

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  
2600

Date of Receipt  

M M	/	D D	/	Y Y Y Y
04		16		2013

**Transaction ID : SA11Ai-CN2353**

Amount of Each Receipt this Period  
2600

**B.** Full Name (Last, First, Middle Initial)  
**San Manuel Band of Mission Indians**

Mailing Address 3699 Wilshire Blvd. Ste. 1290

City Los Angeles	State CA	Zip Code 90010
---------------------	-------------	-------------------

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  
5200

Date of Receipt  

M M	/	D D	/	Y Y Y Y
04		30		2013

**Transaction ID : SA11Ai-CN2370**

Amount of Each Receipt this Period  
5200

**C.** Full Name (Last, First, Middle Initial)  
**San Manuel Band of Mission Indians**

Mailing Address 3699 Wilshire Blvd. Ste. 1290

City Los Angeles	State CA	Zip Code 90010
---------------------	-------------	-------------------

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  
2600

Date of Receipt  

M M	/	D D	/	Y Y Y Y
05		01		2013

**Transaction ID : SA11Ai-CN2371**

Amount of Each Receipt this Period  
-2600

Redesignated to General 2014

**[MEMO ITEM]**  
Redesignated

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

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

7800.00

**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 52
	<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)  
**Mullin For Congress**

**A. San Manuel Band of Mission Indians**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3699 Wilshire Blvd. Ste. 1290

City Los Angeles	State CA	Zip Code 90010
---------------------	-------------	-------------------

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  
 \_\_\_\_\_ 5200

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 01 / 2013

**Transaction ID : SA11Ai-CN2372**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2600

Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

**B. Mr. James W. Owens**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2701 NW 59th St

City Oklahoma City	State OK	Zip Code 73112-7025
-----------------------	-------------	------------------------

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

Name of Employer Self-Employed	Occupation Petroleum Engineer
-----------------------------------	----------------------------------

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 / 06 / 2013

**Transaction ID : SA11Ai-CN2397**

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

**C. Mr. Lewis Pemberton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Rt. 4 Box 5450

City Eufaula	State OK	Zip Code 74432
-----------------	-------------	-------------------

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

Name of Employer Mike Jordan Co.	Occupation Sales
-------------------------------------	---------------------

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 / 13 / 2013

**Transaction ID : SA11Ai-CN2436**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2500

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

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

\_\_\_\_\_ 3500.00

\_\_\_\_\_

**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 52
	<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)  
**Mullin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Lewis Pemberton**

Mailing Address Rt. 4 Box 5450

City Eufaula State OK Zip Code 74432

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

Name of Employer Mike Jordan Co. Occupation Sales

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 13 / 2013**

**Transaction ID : SA11Ai-CN2437**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Jeff Records Jr**

Mailing Address 501 NW Grand Blvd

City Oklahoma City State OK Zip Code 73118

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

Name of Employer Midland Financial Co. Occupation CEO & President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 30 / 2013**

**Transaction ID : SA11Ai-CN2389**

Amount of Each Receipt this Period  
**2500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Bart Reed**

Mailing Address 131 N Broadway

City Ada State OK Zip Code 74820

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

Name of Employer Self Employed Occupation Consultant

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  
**05 / 03 / 2013**

**Transaction ID : SA11Ai-CN2377**

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 21 OF 52
	<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)  
**Mullin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Rick H Reyburn**

Mailing Address 3711 Regulus Ave

City Las Vegas State NV Zip Code 89102

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

Name of Employer JBA Consulting Occupation Director

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  
**04 / 24 / 2013**

**Transaction ID : SA11Ai-CN2356**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Stanley Morgan Sheffield**

Mailing Address PO Box 90

City Webbers Falls State OK Zip Code 74470

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 **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2013**

**Transaction ID : SA11Ai-CN2452**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Gary Del Smith**

Mailing Address 11300 S Portland Ave

City Edmond State OK Zip Code 73003-8523

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

Name of Employer Dealers Auto Auction Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 22 / 2013**

**Transaction ID : SA11Ai-CN2387**

Amount of Each Receipt this Period  
**2500**

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

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

**3750.00**

**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 22 OF 52
	<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	

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)  
**Mullin For Congress**

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

Mailing Address 107 Harbor Hill Drive

City State Zip Code  
Lakeway TX 78734

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

Name of Employer Occupation  
Video Gaming Technologies Inc. Sr VP Of Sales

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 24 / 2013**

**Transaction ID : SA11Ai-CN2362**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. John Wald**

Mailing Address 2909 Coast Line Court

City State Zip Code  
Las Vegas NV 89117

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

Name of Employer Occupation  
Klai Juba Architects Architect

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1250**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 24 / 2013**

**Transaction ID : SA11Ai-CN2357**

Amount of Each Receipt this Period  
**1250**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Jon Yarbrough**

Mailing Address 4431 Dyke Bennett Road

City State Zip Code  
Franklin TN 37064

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

Name of Employer Occupation  
Video Gaming Technology CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 16 / 2013**

**Transaction ID : SA11Ai-CN2352**

Amount of Each Receipt this Period  
**1000**

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

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

**2750.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 52
	<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)  
**Mullin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. T Chris Youngblood**

Mailing Address 9832 Stone St NW

City Albuquerque State NM Zip Code 87114

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

Name of Employer Chavez-Grieves Occupation Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 24 / 2013**

**Transaction ID : SA11Ai-CN2358**

Amount of Each Receipt this Period  
**500**

**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).....

**500.00**

**55400.00**

**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 24 OF 52
	<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	

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)  
**Mullin For Congress**

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

Mailing Address 1120 Connecticut Ave. N.w.

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00004275

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  
 06 / 20 / 2013

**Transaction ID : SA11C-CN2410**

Amount of Each Receipt this Period  
 1000

**B.** Full Name (Last, First, Middle Initial)  
**American Beverage Association**

Mailing Address 1101 16th Street N.W.

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00100107

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  
 05 / 23 / 2013

**Transaction ID : SA11C-CN2390**

Amount of Each Receipt this Period  
 1000

**C.** Full Name (Last, First, Middle Initial)  
**American Fidelity Corporation Pac**

Mailing Address PO Box 25523

City Oklahoma City State OK Zip Code 73125

FEC ID number of contributing federal political committee. **C** C00210526

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 Y  
 06 / 12 / 2013

**Transaction ID : SA11C-CN2399**

Amount of Each Receipt this Period  
 2500

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

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

4500.00



**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 25 OF 52
	<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	

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)  
**Mullin For Congress**

**A. American Health Care Assn PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1201 L St NW  
 City Washington State DC Zip Code 20005  
 FEC ID number of contributing federal political committee. **C** C00006080  
 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  
 05 / 03 / 2013  
**Transaction ID : SA11C-CN2378**  
 Amount of Each Receipt this Period  
 5000

**B. American Sugarbeet Growers Assoc. PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1156 15th St NW Suite 1101  
 City Washington State DC Zip Code 20005  
 FEC ID number of contributing federal political committee. **C** C00167684  
 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  
 05 / 23 / 2013  
**Transaction ID : SA11C-CN2391**  
 Amount of Each Receipt this Period  
 1000

**C. ASLRRRA-PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 50 F St NW Ste 7020  
 City Washington State DC Zip Code 20001  
 FEC ID number of contributing federal political committee. **C** C00298190  
 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 / 14 / 2013  
**Transaction ID : SA11C-CN2408**  
 Amount of Each Receipt this Period  
 1000

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

7000.00

**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 26 OF 52
	<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	

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)  
**Mullin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Associated Builders And Contractors PAC**

Mailing Address 4250 North Fairfax Dr. 9th Floor

City: Arlington State: VA Zip Code: 22203

FEC ID number of contributing federal political committee: **C** C00010421

Name of Employer: Occupation:

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2500

Date of Receipt: 04 / 11 / 2013

**Transaction ID : SA11C-CN2349**

Amount of Each Receipt this Period: 2500

**B.** Full Name (Last, First, Middle Initial)  
**Associated Builders And Contractors PAC**

Mailing Address 4250 North Fairfax Dr. 9th Floor

City: Arlington State: VA Zip Code: 22203

FEC ID number of contributing federal political committee: **C** C00010421

Name of Employer: Occupation:

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 5000

Date of Receipt: 06 / 27 / 2013

**Transaction ID : SA11C-CN2442**

Amount of Each Receipt this Period: 2500

**C.** Full Name (Last, First, Middle Initial)  
**Associated Builders And Contractors PAC**

Mailing Address 4250 North Fairfax Dr. 9th Floor

City: Arlington State: VA Zip Code: 22203

FEC ID number of contributing federal political committee: **C** C00010421

Name of Employer: Occupation:

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 7500

Date of Receipt: 06 / 30 / 2013

**Transaction ID : SA11C-CN2447**

Amount of Each Receipt this Period: 2500

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

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

7500.00

**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 27 OF 52
	<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	

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)  
**Mullin For Congress**

**A. Associated General Contractors Pac**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2300 Wilson Blvd. Ste. 400  
 City Arlington State VA Zip Code 22201  
 FEC ID number of contributing federal political committee. **C** C00082917  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 1500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2013  
**Transaction ID : SA11C-CN2448**  
 Amount of Each Receipt this Period  
 1500

**B. AT&T Inc Federal PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 208 S Akard St Ste 2701  
 City Dallas State TX Zip Code 75202  
 FEC ID number of contributing federal political committee. **C** C00109017  
 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  
 04 / 18 / 2013  
**Transaction ID : SA11C-CN2348**  
 Amount of Each Receipt this Period  
 1000

**C. BNSF Railpac**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 961039  
 City Ft Worth State TX Zip Code 76161  
 FEC ID number of contributing federal political committee. **C** C00235739  
 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 Y Y  
 05 / 14 / 2013  
**Transaction ID : SA11C-CN2385**  
 Amount of Each Receipt this Period  
 2000

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

4500.00

**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 28 OF 52
	<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	

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)  
**Mullin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**BP North America Employee PAC**

Mailing Address 501 Westlake Park Blvd

City Houston State TX Zip Code 77079

FEC ID number of contributing federal political committee. **C** C00060103

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 / 14 / 2013

**Transaction ID : SA11C-CN2406**

Amount of Each Receipt this Period  
 1000

**B.** Full Name (Last, First, Middle Initial)  
**Gulf States Toyota Inc PAC**

Mailing Address 1375 Enclave Parkway

City Houston State TX Zip Code 77077

FEC ID number of contributing federal political committee. **C** C00349373

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 / 30 / 2013

**Transaction ID : SA11C-CN2449**

Amount of Each Receipt this Period  
 1000

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

Mailing Address 8404 Indian Hills Dr

City Omaha State NE Zip Code 68114

FEC ID number of contributing federal political committee. **C** C00103903

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  
 04 / 24 / 2013

**Transaction ID : SA11C-CN2354**

Amount of Each Receipt this Period  
 1000

**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 29 OF 52
	<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	

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)  
**Mullin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Holland & Knight Committee for Effective Govt**

Mailing Address 800 17th St Nw Ste 1100

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00171330

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  
 04 / 16 / 2013

**Transaction ID : SA11C-CN2350**

Amount of Each Receipt this Period  
 1000

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

Mailing Address 1155 F Street Nw Ste. 400

City Washington State DC Zip Code 20004

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 2500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11C-CN2450**

Amount of Each Receipt this Period  
 2500

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

Mailing Address 101 Constitution Ave. Nw Ste 500

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 51.48

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 05 / 2013

**Transaction ID : SA11C-CN2412**

Amount of Each Receipt this Period  
 51.48

In-Kind Received Catering

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

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

3551.48

**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 30 OF 52
	<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	

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)  
**Mullin For Congress**

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

Mailing Address 101 Constitution Ave. Nw Ste 500

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  
55.83

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 05 / 2013

**Transaction ID : SA11C-CN2413**

Amount of Each Receipt this Period  
4.35

In-Kind Received Room Rental

**B.** Full Name (Last, First, Middle Initial)  
**Majority Committee Pac - Mc Pac**

Mailing Address PO Box 10134

City Bakersfield	State CA	Zip Code 93389
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00428052

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 / 30 / 2013

**Transaction ID : SA11C-CN2445**

Amount of Each Receipt this Period  
2500

**C.** Full Name (Last, First, Middle Initial)  
**Nat'l Assoc. Of Insurance & Financial Advisors PAC**

Mailing Address 2901 Telestar Court

City Falls Church	State VA	Zip Code 22042
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00005249

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 / 05 / 2013

**Transaction ID : SA11C-CN2396**

Amount of Each Receipt this Period  
2500

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

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

5004.35

**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 31 OF 52
	<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	

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)  
**Mullin For Congress**

**A. National Beer Wholesalers Assn Pac**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1101 King Street Ste. 600  
 City Alexandria State VA Zip Code 22314  
 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

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 20 / 2013  
**Transaction ID : SA11C-CN2411**  
 Amount of Each Receipt this Period  
 1000

**B. National Stone Sand & Gravel Assn PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1605 King St  
 City Alexandria State VA Zip Code 22314  
 FEC ID number of contributing federal political committee. **C** C00089458  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 30 / 2013  
**Transaction ID : SA11C-CN2453**  
 Amount of Each Receipt this Period  
 1000

**C. Newfield Pac**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 363 North Sam Houston Pkwy  
 City Houston State TX Zip Code 77060  
 FEC ID number of contributing federal political committee. **C** C00443523  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 16 / 2013  
**Transaction ID : SA11C-CN2386**  
 Amount of Each Receipt this Period  
 2500

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

4500.00

**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 32 OF 52
	<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	

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)  
**Mullin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**NFIB Safe Trust**

Mailing Address 1201 F St. NW Ste. 200

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00101105

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 / 30 / 2013

**Transaction ID : SA11C-CN2443**

Amount of Each Receipt this Period  
 1000

**B.** Full Name (Last, First, Middle Initial)  
**Oge Energy Corp Employees Pac**

Mailing Address PO Box 321

City Oklahoma City State OK Zip Code 73101

FEC ID number of contributing federal political committee. **C** C00337808

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 Y Y  
 05 / 23 / 2013

**Transaction ID : SA11C-CN2392**

Amount of Each Receipt this Period  
 1000

**C.** Full Name (Last, First, Middle Initial)  
**Realtor's PAC**

Mailing Address 430 N Michigan Ave

City Chicago State IL Zip Code 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 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 06 / 2013

**Transaction ID : SA11C-CN2398**

Amount of Each Receipt this Period  
 1000

**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 33 OF 52
	<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	

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)  
**Mullin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Spectra/dcp Pac**

Mailing Address 5400 Westheimer Ct.

City Houston State TX Zip Code 77068

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 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 14 / 2013

**Transaction ID : SA11C-CN2400**

Amount of Each Receipt this Period  
 1000

**B.** Full Name (Last, First, Middle Initial)  
**The Williams Co PAC**

Mailing Address 1627 I St NW Ste 900

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00040394

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  
 06 / 30 / 2013

**Transaction ID : SA11C-CN2451**

Amount of Each Receipt this Period  
 1000

**C.** Full Name (Last, First, Middle Initial)  
**Weyerhaeuser Pac**

Mailing Address 400 North Capitol St. NW Ste. 490

City Washington State DC Zip Code 20000

FEC ID number of contributing federal political committee. **C** C00007948

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 Y  
 06 / 05 / 2013

**Transaction ID : SA11C-CN2393**

Amount of Each Receipt this Period  
 2500

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

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

4500.00

47055.83

**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 52			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)  
**Mullin For Congress**

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

Mailing Address 4020 N. Lincoln Ste. 100

City Oklahoma City State OK Zip Code 73105

Purpose of Disbursement Fundraising Commission

Candidate Name

Office Sought:  House  Senate  President

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

State: District:

Date of Disbursement: 06 / 03 / 2013

Amount of Each Disbursement this Period: 11799.40

Transaction ID : SB17-EX1111

Fundraising Commission

Category/Type: 003

Full Name (Last, First, Middle Initial)  
**B. Hartog Kallenberger & Swarouth PLLC**

Mailing Address 1560 E. 21st St.

City Tulsa State OK Zip Code 74114

Purpose of Disbursement Legal Services

Candidate Name

Office Sought:  House  Senate  President

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

State: District:

Date of Disbursement: 04 / 05 / 2013

Amount of Each Disbursement this Period: 233.00

Transaction ID : SB17-EX1071

Legal Services

Category/Type: 001

Full Name (Last, First, Middle Initial)  
**C. Holtzman Vogel Josefiak Pllc**

Mailing Address 45 N. Hill Dr.

City Warrenton State VA Zip Code 20186

Purpose of Disbursement Legal Services

Candidate Name

Office Sought:  House  Senate  President

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

State: District:

Date of Disbursement: 04 / 16 / 2013

Amount of Each Disbursement this Period: 350.00

Transaction ID : SB17-EX1095

Legal Services

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional)..... 12382.40

**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 35 OF 52	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**Mullin For Congress**

Full Name (Last, First, Middle Initial)

**A. Key & Associates**

Mailing Address 12176 Chancery Station Circle

City Reston State VA Zip Code 20190

Purpose of Disbursement Fundraising Commission

Candidate Name

Office Sought:  House  Senate  President

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

State: District:

Date of Disbursement: 04 / 11 / 2013

Amount of Each Disbursement this Period: 15041.14

Transaction ID : SB17-EX1093

Category/Type: 003

Fundraising Commission

Full Name (Last, First, Middle Initial)

**B. Key & Associates**

Mailing Address 12176 Chancery Station Circle

City Reston State VA Zip Code 20190

Purpose of Disbursement PAYMENT: SEE BELOW

Candidate Name

Office Sought:  House  Senate  President

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

State: District:

Date of Disbursement: 06 / 20 / 2013

Amount of Each Disbursement this Period: 14517.27

Transaction ID : SB17-EX1126

Category/Type: 003

PAYMENT: SEE BELOW

Full Name (Last, First, Middle Initial)

**C. Key & Associates**

Mailing Address 12176 Chancery Station Circle

City Reston State VA Zip Code 20190

Purpose of Disbursement Fundraising Retainer

Candidate Name

Office Sought:  House  Senate  President

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

State: District:

Date of Disbursement: 06 / 20 / 2013

Amount of Each Disbursement this Period: 3750.00

Transaction ID : SB17-EX1127

Category/Type: 003

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... 29558.41

**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 36 OF 52			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)  
**Mullin For Congress**

Full Name (Last, First, Middle Initial)

**A. Key & Associates**

Mailing Address 12176 Chancery Station Circle

City Reston State VA Zip Code 20190

Purpose of Disbursement Fundraising Commission

Candidate Name

Office Sought:  House  Senate  President

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

State: District:

Date of Disbursement: 06 / 20 / 2013

Amount of Each Disbursement this Period: 8700.00

Transaction ID : SB17-EX1128

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Capitol Hill Club**

Mailing Address 300 1st St SE

City Washington State DC Zip Code 20003

Purpose of Disbursement Food and Beverage

Candidate Name

Office Sought:  House  Senate  President

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

State: District:

Date of Disbursement: 06 / 20 / 2013

Amount of Each Disbursement this Period: 1318.09

Transaction ID : SB17-EX1129

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. DC Taste**

Mailing Address 1602 Fitzgerald Ln

City Alexandria State VA Zip Code 22302

Purpose of Disbursement Catering

Candidate Name

Office Sought:  House  Senate  President

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

State: District:

Date of Disbursement: 06 / 20 / 2013

Amount of Each Disbursement this Period: 574.69

Transaction ID : SB17-EX1130

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 52			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)  
**Mullin For Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>A. Key &amp; Associates</b>		M M / D D / Y Y Y Y 06 / 20 / 2013	
Mailing Address 12176 Chancery Station Circle		Amount of Each Disbursement this Period	
City Reston State VA Zip Code 20190		89.50	
Purpose of Disbursement Parking Reimbursement		Transaction ID : SB17-EX1131	
Candidate Name		[MEMO ITEM]	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014	
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
Category/Type		003	

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>B. Key &amp; Associates</b>		M M / D D / Y Y Y Y 06 / 20 / 2013	
Mailing Address 12176 Chancery Station Circle		Amount of Each Disbursement this Period	
City Reston State VA Zip Code 20190		19.00	
Purpose of Disbursement Taxi Fare Reimbursement		Transaction ID : SB17-EX1132	
Candidate Name		[MEMO ITEM]	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014	
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
Category/Type		003	

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>c. Usps</b>		M M / D D / Y Y Y Y 06 / 20 / 2013	
Mailing Address 2801 E. Kenosha St.		Amount of Each Disbursement this Period	
City Broken Arrow State OK Zip Code 74014		13.50	
Purpose of Disbursement Postage Reimbursement		Transaction ID : SB17-EX1133	
Candidate Name		[MEMO ITEM]	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014	
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
Category/Type		003	

<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 38 OF 52			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)  
**Mullin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2013
Mailing Address 11001 E. 71st St. South		Amount of Each Disbursement this Period ..... 52.49
City Tulsa	State OK	
Zip Code 74133	Purpose of Disbursement Nametags	<b>Transaction ID : SB17-EX1134</b>
Candidate Name	003 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. Majority Designs Invoicing</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2013
Mailing Address 4020 N. Lincoln Ste. 100		Amount of Each Disbursement this Period ..... 1737.25
City Oklahoma City	State OK	
Zip Code 73105	Purpose of Disbursement Letterhead & Envelope Printing	<b>Transaction ID : SB17-EX1094</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	Letterhead & Envelope Printing
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Majority Designs Invoicing</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2013
Mailing Address 4020 N. Lincoln Ste. 100		Amount of Each Disbursement this Period ..... 90.00
City Oklahoma City	State OK	
Zip Code 73105	Purpose of Disbursement Email Service	<b>Transaction ID : SB17-EX1101</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	Email Service
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	..... 1827.25
<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 39 OF 52			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)  
**Mullin For Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>A. Majority Designs Invoicing</b>		M M / D D / Y Y Y Y 04 / 25 / 2013	
Mailing Address 4020 N. Lincoln Ste. 100		Amount of Each Disbursement this Period	
City Oklahoma City State OK Zip Code 73105		146.57	
Purpose of Disbursement Postage Reimbursement		Transaction ID : SB17-EX1102	
Candidate Name		Postage Reimbursement	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Category/Type	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		001	
State: District:			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>B. Majority Designs Invoicing</b>		M M / D D / Y Y Y Y 05 / 03 / 2013	
Mailing Address 4020 N. Lincoln Ste. 100		Amount of Each Disbursement this Period	
City Oklahoma City State OK Zip Code 73105		53.05	
Purpose of Disbursement Postage Reimbursement		Transaction ID : SB17-EX1104	
Candidate Name		Postage Reimbursement	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Category/Type	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		001	
State: District:			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>C. Majority Designs Invoicing</b>		M M / D D / Y Y Y Y 06 / 12 / 2013	
Mailing Address 4020 N. Lincoln Ste. 100		Amount of Each Disbursement this Period	
City Oklahoma City State OK Zip Code 73105		54.00	
Purpose of Disbursement Website Renewal		Transaction ID : SB17-EX1118	
Candidate Name		Website Renewal	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Category/Type	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		001	
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	146.57
<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 40 OF 52			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)  
**Mullin For Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>A. Paypal</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>04</td> <td></td> <td>30</td> <td></td> <td>2013</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	04		30		2013
M M	/	D D	/	Y Y Y Y									
04		30		2013									
Mailing Address 1840 Embarcadero Rd.		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Palo Alto</td> <td>CA</td> <td>94303</td> </tr> </table>		City	State	Zip Code	Palo Alto	CA	94303	<table border="1"> <tr> <td>54.25</td> </tr> </table>		54.25			
City	State	Zip Code											
Palo Alto	CA	94303											
54.25													
Purpose of Disbursement Credit Card Service Fee		Transaction ID : SB17-EX1123											
Candidate Name		Credit Card Service Fee											
<table border="1"> <tr> <td>Office Sought:</td> <td>House</td> <td rowspan="3">Disbursement For: 2014</td> </tr> <tr> <td></td> <td>Senate</td> </tr> <tr> <td></td> <td>President</td> </tr> <tr> <td>State:</td> <td>District:</td> <td> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) Primary 2014                 </td> </tr> </table>		Office Sought:	House	Disbursement For: 2014		Senate		President	State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
Office Sought:	House	Disbursement For: 2014											
	Senate												
	President												
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>B. Paypal</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>05</td> <td></td> <td>31</td> <td></td> <td>2013</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	05		31		2013
M M	/	D D	/	Y Y Y Y									
05		31		2013									
Mailing Address 1840 Embarcadero Rd.		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Palo Alto</td> <td>CA</td> <td>94303</td> </tr> </table>		City	State	Zip Code	Palo Alto	CA	94303	<table border="1"> <tr> <td>117.60</td> </tr> </table>		117.60			
City	State	Zip Code											
Palo Alto	CA	94303											
117.60													
Purpose of Disbursement Credit Card Service Fee		Transaction ID : SB17-EX1124											
Candidate Name		Credit Card Service Fee											
<table border="1"> <tr> <td>Office Sought:</td> <td>House</td> <td rowspan="3">Disbursement For: 2014</td> </tr> <tr> <td></td> <td>Senate</td> </tr> <tr> <td></td> <td>President</td> </tr> <tr> <td>State:</td> <td>District:</td> <td> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) Primary 2014                 </td> </tr> </table>		Office Sought:	House	Disbursement For: 2014		Senate		President	State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
Office Sought:	House	Disbursement For: 2014											
	Senate												
	President												
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>C. Paypal</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>30</td> <td></td> <td>2013</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	06		30		2013
M M	/	D D	/	Y Y Y Y									
06		30		2013									
Mailing Address 1840 Embarcadero Rd.		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Palo Alto</td> <td>CA</td> <td>94303</td> </tr> </table>		City	State	Zip Code	Palo Alto	CA	94303	<table border="1"> <tr> <td>364.80</td> </tr> </table>		364.80			
City	State	Zip Code											
Palo Alto	CA	94303											
364.80													
Purpose of Disbursement Credit Card Service Fee		Transaction ID : SB17-EX1125											
Candidate Name		Credit Card Service Fee											
<table border="1"> <tr> <td>Office Sought:</td> <td>House</td> <td rowspan="3">Disbursement For: 2014</td> </tr> <tr> <td></td> <td>Senate</td> </tr> <tr> <td></td> <td>President</td> </tr> <tr> <td>State:</td> <td>District:</td> <td> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) Primary 2014                 </td> </tr> </table>		Office Sought:	House	Disbursement For: 2014		Senate		President	State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
Office Sought:	House	Disbursement For: 2014											
	Senate												
	President												
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014											

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	536.65
<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 41 OF 52			
	<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	

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)  
**Mullin For Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement														
<b>A. Polaction</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>18</td> <td></td> <td>2013</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	06		18		2013			
M M	/	D D	/	Y Y Y Y												
06		18		2013												
Mailing Address 15556 Plantation Way		Amount of Each Disbursement this Period														
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>El Cajon</td> <td>CA</td> <td>92019</td> </tr> </table>		City	State	Zip Code	El Cajon	CA	92019	<table border="1"> <tr> <td>400.00</td> </tr> </table>		400.00						
City	State	Zip Code														
El Cajon	CA	92019														
400.00																
Purpose of Disbursement Website Hosting		Transaction ID : SB17-EX1122														
Candidate Name		Website Hosting														
<table border="1"> <tr> <td>Office Sought:</td> <td>House</td> <td rowspan="3">Disbursement For: 2014</td> </tr> <tr> <td></td> <td>Senate</td> </tr> <tr> <td></td> <td>President</td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/> Primary</td> <td><input type="checkbox"/> General</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Other (specify) Primary 2014</td> <td></td> </tr> </table>		Office Sought:	House	Disbursement For: 2014		Senate		President		<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General		<input type="checkbox"/> Other (specify) Primary 2014		Category/Type 001	
Office Sought:	House	Disbursement For: 2014														
	Senate															
	President															
	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General														
	<input type="checkbox"/> Other (specify) Primary 2014															
State: District:																

Full Name (Last, First, Middle Initial)		Date of Disbursement														
<b>B. FEC Financial</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>04</td> <td></td> <td>08</td> <td></td> <td>2013</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	04		08		2013			
M M	/	D D	/	Y Y Y Y												
04		08		2013												
Mailing Address PO Box 651374		Amount of Each Disbursement this Period														
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Potomac Falls</td> <td>VA</td> <td>20165</td> </tr> </table>		City	State	Zip Code	Potomac Falls	VA	20165	<table border="1"> <tr> <td>1588.75</td> </tr> </table>		1588.75						
City	State	Zip Code														
Potomac Falls	VA	20165														
1588.75																
Purpose of Disbursement PAYMENT: SEE BELOW		Transaction ID : SB17-EX1081														
Candidate Name		PAYMENT: SEE BELOW														
<table border="1"> <tr> <td>Office Sought:</td> <td>House</td> <td rowspan="3">Disbursement For: 2014</td> </tr> <tr> <td></td> <td>Senate</td> </tr> <tr> <td></td> <td>President</td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/> Primary</td> <td><input type="checkbox"/> General</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Other (specify) Primary 2014</td> <td></td> </tr> </table>		Office Sought:	House	Disbursement For: 2014		Senate		President		<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General		<input type="checkbox"/> Other (specify) Primary 2014		Category/Type 001	
Office Sought:	House	Disbursement For: 2014														
	Senate															
	President															
	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General														
	<input type="checkbox"/> Other (specify) Primary 2014															
State: District:																

Full Name (Last, First, Middle Initial)		Date of Disbursement														
<b>C. FEC Financial</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>04</td> <td></td> <td>08</td> <td></td> <td>2013</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	04		08		2013			
M M	/	D D	/	Y Y Y Y												
04		08		2013												
Mailing Address PO Box 651374		Amount of Each Disbursement this Period														
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Potomac Falls</td> <td>VA</td> <td>20165</td> </tr> </table>		City	State	Zip Code	Potomac Falls	VA	20165	<table border="1"> <tr> <td>1550.00</td> </tr> </table>		1550.00						
City	State	Zip Code														
Potomac Falls	VA	20165														
1550.00																
Purpose of Disbursement Accounting Services		Transaction ID : SB17-EX1082														
Candidate Name		[MEMO ITEM]														
<table border="1"> <tr> <td>Office Sought:</td> <td>House</td> <td rowspan="3">Disbursement For: 2014</td> </tr> <tr> <td></td> <td>Senate</td> </tr> <tr> <td></td> <td>President</td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/> Primary</td> <td><input type="checkbox"/> General</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Other (specify) Primary 2014</td> <td></td> </tr> </table>		Office Sought:	House	Disbursement For: 2014		Senate		President		<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General		<input type="checkbox"/> Other (specify) Primary 2014		Category/Type 001	
Office Sought:	House	Disbursement For: 2014														
	Senate															
	President															
	<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).....	1988.75
<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 42 OF 52	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**Mullin For Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement	
A. <b>FEC Financial</b>		M M / D D / Y Y Y Y 04 / 08 / 2013	
Mailing Address PO Box 651374		Amount of Each Disbursement this Period	
City Potomac Falls State VA Zip Code 20165		1000.00	
Purpose of Disbursement Postage Reimbursement		Transaction ID : SB17-EX1083	
Candidate Name		[MEMO ITEM]	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014	
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Other (specify) Primary 2014	

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B. <b>FEC Financial</b>		M M / D D / Y Y Y Y 05 / 08 / 2013	
Mailing Address PO Box 651374		Amount of Each Disbursement this Period	
City Potomac Falls State VA Zip Code 20165		1009.20	
Purpose of Disbursement PAYMENT: SEE BELOW		Transaction ID : SB17-EX1106	
Candidate Name		PAYMENT: SEE BELOW	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014	
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Other (specify) Primary 2014	

Full Name (Last, First, Middle Initial)		Date of Disbursement	
C. <b>FEC Financial</b>		M M / D D / Y Y Y Y 05 / 08 / 2013	
Mailing Address PO Box 651374		Amount of Each Disbursement this Period	
City Potomac Falls State VA Zip Code 20165		1000.00	
Purpose of Disbursement Accounting Services		Transaction ID : SB17-EX1107	
Candidate Name		[MEMO ITEM]	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014	
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Other (specify) Primary 2014	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1009.20
<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 43 OF 52			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)  
**Mullin For Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement								
A. <b>FEC Financial</b>		<table border="1"> <tr> <td>M M / D D / Y Y Y Y</td> <td></td> </tr> <tr> <td>05 / 08 / 2013</td> <td></td> </tr> </table>		M M / D D / Y Y Y Y		05 / 08 / 2013				
M M / D D / Y Y Y Y										
05 / 08 / 2013										
Mailing Address PO Box 651374		Amount of Each Disbursement this Period								
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Potomac Falls</td> <td>VA</td> <td>20165</td> </tr> </table>		City	State	Zip Code	Potomac Falls	VA	20165	<table border="1"> <tr> <td>9.20</td> </tr> </table>		9.20
City	State	Zip Code								
Potomac Falls	VA	20165								
9.20										
Purpose of Disbursement Postage Reimbursement		Transaction ID : SB17-EX1108								
Candidate Name		[MEMO ITEM]								
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014								
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014								
Category/Type										
001										

Full Name (Last, First, Middle Initial)		Date of Disbursement								
B. <b>FEC Financial</b>		<table border="1"> <tr> <td>M M / D D / Y Y Y Y</td> <td></td> </tr> <tr> <td>06 / 06 / 2013</td> <td></td> </tr> </table>		M M / D D / Y Y Y Y		06 / 06 / 2013				
M M / D D / Y Y Y Y										
06 / 06 / 2013										
Mailing Address PO Box 651374		Amount of Each Disbursement this Period								
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Potomac Falls</td> <td>VA</td> <td>20165</td> </tr> </table>		City	State	Zip Code	Potomac Falls	VA	20165	<table border="1"> <tr> <td>1535.16</td> </tr> </table>		1535.16
City	State	Zip Code								
Potomac Falls	VA	20165								
1535.16										
Purpose of Disbursement PAYMENT: SEE BELOW		Transaction ID : SB17-EX1114								
Candidate Name		PAYMENT: SEE BELOW								
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014								
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014								
Category/Type										
001										

Full Name (Last, First, Middle Initial)		Date of Disbursement								
C. <b>FEC Financial</b>		<table border="1"> <tr> <td>M M / D D / Y Y Y Y</td> <td></td> </tr> <tr> <td>06 / 06 / 2013</td> <td></td> </tr> </table>		M M / D D / Y Y Y Y		06 / 06 / 2013				
M M / D D / Y Y Y Y										
06 / 06 / 2013										
Mailing Address PO Box 651374		Amount of Each Disbursement this Period								
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Potomac Falls</td> <td>VA</td> <td>20165</td> </tr> </table>		City	State	Zip Code	Potomac Falls	VA	20165	<table border="1"> <tr> <td>1000.00</td> </tr> </table>		1000.00
City	State	Zip Code								
Potomac Falls	VA	20165								
1000.00										
Purpose of Disbursement Accounting Services		Transaction ID : SB17-EX1115								
Candidate Name		[MEMO ITEM]								
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014								
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014								
Category/Type										
001										

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1535.16
<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 44 OF 52			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)  
**Mullin For Congress**

Full Name (Last, First, Middle Initial) <b>A. PrintRunner</b>			Date of Disbursement MM / DD / YYYY 06 / 06 / 2013	
Mailing Address 9673 Topanga Canyon PI			Amount of Each Disbursement this Period 502.78	
City Chatsworth	State CA	Zip Code 91311	Transaction ID : SB17-EX1116	
Purpose of Disbursement Postcard Printing		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>B. FEC Financial</b>			Date of Disbursement MM / DD / YYYY 06 / 06 / 2013	
Mailing Address PO Box 651374			Amount of Each Disbursement this Period 32.38	
City Potomac Falls	State VA	Zip Code 20165	Transaction ID : SB17-EX1117	
Purpose of Disbursement Postage 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. AT&amp;T Mobility</b>			Date of Disbursement MM / DD / YYYY 04 / 08 / 2013	
Mailing Address PO Box 537104			Amount of Each Disbursement this Period 129.00	
City Atlanta	State GA	Zip Code 30353	Transaction ID : SB17-EX1080	
Purpose of Disbursement Telephone Expense		Category/ Type 001	Telephone Expense	
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).....	129.00
<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 45 OF 52	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**Mullin For Congress**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2013
Mailing Address PO Box 537104		Amount of Each Disbursement this Period 113.94
City Atlanta	State GA	Zip Code 30353
Purpose of Disbursement Telephone Expense	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX1097	
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:		

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2013
Mailing Address PO Box 537104		Amount of Each Disbursement this Period 100.20
City Atlanta	State GA	Zip Code 30353
Purpose of Disbursement Telephone Expense	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX1109	
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:		

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 / 03 / 2013
Mailing Address PO Box 537104		Amount of Each Disbursement this Period 119.52
City Atlanta	State GA	Zip Code 30353
Purpose of Disbursement Telephone Expense	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX1110	
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).....	333.66
<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 46 OF 52	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**Mullin For Congress**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2013
Mailing Address PO Box 537104		Amount of Each Disbursement this Period 31.30
City Atlanta	State GA Zip Code 30353	
Purpose of Disbursement Telephone Expense	Category/Type 001	<b>Transaction ID : SB17-EX1119</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	Telephone Expense
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Shapard Research</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2013
Mailing Address 620 NE 63rd St		Amount of Each Disbursement this Period 1476.96
City Oklahoma City	State OK Zip Code 73105	
Purpose of Disbursement Robo Calls	Category/Type 005	<b>Transaction ID : SB17-EX1096</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	Robo Calls
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Connect Strategic Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2013
Mailing Address PO Box 141251		Amount of Each Disbursement this Period 3371.35
City Dallas	State TX Zip Code 75214	
Purpose of Disbursement Online Advertising	Category/Type 004	<b>Transaction ID : SB17-EX1105</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	Online Advertising
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4879.61
<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 47 OF 52	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**Mullin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Honeywell International PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2013
Mailing Address 101 Constitution Ave. Nw Ste 500		Amount of Each Disbursement this Period 51.48
City Washington State DC Zip Code 20001	Purpose of Disbursement IN-KIND RECEIVED Catering	
Candidate Name <b>Honeywell International PAC</b>		Transaction ID : <b>SB17-CN2412</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:	Category/Type In-Kind Received Catering	

Full Name (Last, First, Middle Initial) <b>B. Honeywell International PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2013
Mailing Address 101 Constitution Ave. Nw Ste 500		Amount of Each Disbursement this Period 4.35
City Washington State DC Zip Code 20001	Purpose of Disbursement IN-KIND RECEIVED Room Rental	
Candidate Name <b>Honeywell International PAC</b>		Transaction ID : <b>SB17-CN2413</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:	Category/Type In-Kind Received Room Rental	

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	
Candidate Name		Transaction ID
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:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	55.83
<b>TOTAL</b> This Period (last page this line number only).....	54382.49

**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 48 OF 52	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**Mullin For Congress**

Full Name (Last, First, Middle Initial) <b>A. American Bankers PAC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 02 / 2013</b>
Mailing Address 1120 Connecticut Ave. N.w.		Amount of Each Disbursement this Period <b>2500.00</b>
City Washington State DC Zip Code 20036	Category/Type	
Purpose of Disbursement Contribution Refund to MCPC	Candidate Name	<b>Transaction ID : SB20c-CR1</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2012	
State: District:	Refund of 09/27/12 Contribution	

Full Name (Last, First, Middle Initial) <b>B.</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:		

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).....	<b>2500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>2500.00</b>



**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Mullin For Congress**

Transaction ID : **SC10-LN1**

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

**[PERSONAL FUNDS]**

Election: 2012

**Markwayne Mullin**

Primary

General

Other (specify) ▼

Mailing Address  
Rt 1 Box 8255

City State ZIP Code  
Westville OK 74965

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
100000 27750.00 72250.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

06

21

2011

01

01

2014

0.00

% (apr)

Yes

No

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

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

**SUBTOTALS** This Period This Page (optional)..... ▶ 72250.00

**TOTALS** This Period (last page in this line only)..... ▶

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Mullin For Congress**

Transaction ID : **SC10-LN2**

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

**[PERSONAL FUNDS]**

Election: 2012

**Markwayne Mullin**

Primary

General

Other (specify) ▼

Mailing Address  
Rt 1 Box 8255

City State ZIP Code  
Westville OK 74965

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
100000 .00 100000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M 12 M / D 30 D / Y 2011 Y

M 01 M / D 01 D / Y 2014 Y

01 M / D 01 D / Y 2014 Y

0.00 % (apr)

Yes  No

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

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

**SUBTOTALS** This Period This Page (optional)..... 100000.00

**TOTALS** This Period (last page in this line only).....

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Mullin For Congress**

Transaction ID : **SC10-LN3**

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

**[PERSONAL FUNDS]**

Election: 2012

**Markwayne Mullin**

Primary

General

Other (specify) ▼

Mailing Address  
Rt 1 Box 8255

City State ZIP Code  
Westville OK 74965

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
35000 .00 35000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

06

06

2012

01

01

2014

0.00

% (apr)

Yes  No

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

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

**SUBTOTALS** This Period This Page (optional)..... 35000.00

**TOTALS** This Period (last page in this line only).....

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Mullin For Congress**

Transaction ID : **SC10-LN4**

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

**[PERSONAL FUNDS]**

Election: 2012

**Markwayne Mullin**

Primary  
 General  
 Other (specify) ▼

Mailing Address  
Rt 1 Box 8255

City State ZIP Code  
Westville OK 74965

Original Amount of Loan 20750	Cumulative Payment To Date .00	Balance Outstanding at Close of This Period 20750.00
----------------------------------	-----------------------------------	---

**TERMS**

Date Incurred: M 06 / D 21 / Y 2012  
Date Due: M 01 / D 01 / Y 2014  
Interest Rate: 0.00 % (apr)  
Secured:  Yes  No

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

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

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	20750.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	228000.00

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