

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

WILDCATTERS PAC OF THE OKLAHOMA INDEPENDENT PETROLEUM ASSOCIATION

Full Name (Last, First, Middle Initial)

A. COLE FOR CONGRESS

Mailing Address P.O. Box 722256

City
Norman

State
OK

Zip Code
73070

Purpose of Disbursement
Contribution

010

Category/
Type

Candidate Name

COLE, TOM, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: OK District: 04

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	8		2	0	1	7

FEC Identification Number

C C00379735

Transaction ID : SB23.6033

Amount of Each Disbursement this Period

1	0	0	0	0	0
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Memo Item

Full Name (Last, First, Middle Initial)

B. Majority Committee PAC

Mailing Address P.O. Box 10134

City
Bakersfield

State
CA

Zip Code
93389

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2017
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	1		2	0	1	7

FEC Identification Number

C

Transaction ID : SB23.6127

Amount of Each Disbursement this Period

2	5	0	0	0	0
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Memo Item

Full Name (Last, First, Middle Initial)

C. Ryan for Congress, Inc.

Mailing Address P.O. Box 1488

City
Janesville

State
WI

Zip Code
53547

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Ryan, Paul, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	6		2	0	1	7

FEC Identification Number

C

Transaction ID : SB23.6040

Amount of Each Disbursement this Period

2	5	0	0	0	0
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Memo Item

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

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

6	0	0	0	0	0
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6	0	0	0	0	0
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