

# 48-HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |             |                                                             |                                  |                                                                                                                                                                |         |  |                                  |                         |        |                                                             |  |  |                              |            |         |                         |             |                   |                            |  |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------------------------------------------------------|----------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|--|----------------------------------|-------------------------|--------|-------------------------------------------------------------|--|--|------------------------------|------------|---------|-------------------------|-------------|-------------------|----------------------------|--|--|
| <b>1. NAME OF COMMITTEE IN FULL</b><br>Cole for Congress                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |             |                                                             |                                  |                                                                                                                                                                |         |  |                                  |                         |        |                                                             |  |  |                              |            |         |                         |             |                   |                            |  |  |
| ADDRESS (number and street) P.O. Box 722256                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |             |                                                             |                                  |                                                                                                                                                                |         |  |                                  |                         |        |                                                             |  |  |                              |            |         |                         |             |                   |                            |  |  |
| CITY<br>Norman                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | STATE<br>OK | ZIP CODE<br>73070                                           |                                  |                                                                                                                                                                |         |  |                                  |                         |        |                                                             |  |  |                              |            |         |                         |             |                   |                            |  |  |
| <b>2. NAME OF CANDIDATE</b><br>Cole, Tom, , ,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |             | <b>3. OFFICE SOUGHT</b> (State and District)<br>House OK 04 |                                  |                                                                                                                                                                |         |  |                                  |                         |        |                                                             |  |  |                              |            |         |                         |             |                   |                            |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |             | <b>4. FEC IDENTIFICATION NUMBER</b><br>C00379735            |                                  |                                                                                                                                                                |         |  |                                  |                         |        |                                                             |  |  |                              |            |         |                         |             |                   |                            |  |  |
| <b>5. IS THIS AN AMENDMENT?</b> <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON ____ / ____ / ____                                                                                                                                                                                                                                                                                                                                                                                                 |             |                                                             |                                  |                                                                                                                                                                |         |  |                                  |                         |        |                                                             |  |  |                              |            |         |                         |             |                   |                            |  |  |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3"><b>A. FULL NAME</b><br/>Management and Training Corp PAC</td> <td>Name of Employer</td> <td>Date (month, day, year)</td> <td>Amount</td> </tr> <tr> <td colspan="3">MAILING ADDRESS<br/>500 North Marketplace Drive<br/>PO Box 10</td> <td>Transaction ID : F65-CN32776</td> <td>10/28/2022</td> <td>2500.00</td> </tr> <tr> <td>CITY<br/>Centerville</td> <td>STATE<br/>UT</td> <td>ZIP CODE<br/>84014</td> <td>Occupation</td> <td></td> <td></td> </tr> </table>                 |             |                                                             |                                  | <b>A. FULL NAME</b><br>Management and Training Corp PAC                                                                                                        |         |  | Name of Employer                 | Date (month, day, year) | Amount | MAILING ADDRESS<br>500 North Marketplace Drive<br>PO Box 10 |  |  | Transaction ID : F65-CN32776 | 10/28/2022 | 2500.00 | CITY<br>Centerville     | STATE<br>UT | ZIP CODE<br>84014 | Occupation                 |  |  |
| <b>A. FULL NAME</b><br>Management and Training Corp PAC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |             |                                                             | Name of Employer                 | Date (month, day, year)                                                                                                                                        | Amount  |  |                                  |                         |        |                                                             |  |  |                              |            |         |                         |             |                   |                            |  |  |
| MAILING ADDRESS<br>500 North Marketplace Drive<br>PO Box 10                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |             |                                                             | Transaction ID : F65-CN32776     | 10/28/2022                                                                                                                                                     | 2500.00 |  |                                  |                         |        |                                                             |  |  |                              |            |         |                         |             |                   |                            |  |  |
| CITY<br>Centerville                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | STATE<br>UT | ZIP CODE<br>84014                                           | Occupation                       |                                                                                                                                                                |         |  |                                  |                         |        |                                                             |  |  |                              |            |         |                         |             |                   |                            |  |  |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3"><b>B. FULL NAME</b><br/>National Automobile Dealers Assoc PAC</td> <td>Name of Employer</td> <td>Date (month, day, year)</td> <td>Amount</td> </tr> <tr> <td colspan="3">MAILING ADDRESS<br/>412 First Street SE</td> <td>Transaction ID : F65-CN32773</td> <td>10/28/2022</td> <td>5000.00</td> </tr> <tr> <td>CITY<br/>Washington</td> <td>STATE<br/>DC</td> <td>ZIP CODE<br/>20003</td> <td>Occupation</td> <td></td> <td></td> </tr> </table>                                   |             |                                                             |                                  | <b>B. FULL NAME</b><br>National Automobile Dealers Assoc PAC                                                                                                   |         |  | Name of Employer                 | Date (month, day, year) | Amount | MAILING ADDRESS<br>412 First Street SE                      |  |  | Transaction ID : F65-CN32773 | 10/28/2022 | 5000.00 | CITY<br>Washington      | STATE<br>DC | ZIP CODE<br>20003 | Occupation                 |  |  |
| <b>B. FULL NAME</b><br>National Automobile Dealers Assoc PAC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |             |                                                             | Name of Employer                 | Date (month, day, year)                                                                                                                                        | Amount  |  |                                  |                         |        |                                                             |  |  |                              |            |         |                         |             |                   |                            |  |  |
| MAILING ADDRESS<br>412 First Street SE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |             |                                                             | Transaction ID : F65-CN32773     | 10/28/2022                                                                                                                                                     | 5000.00 |  |                                  |                         |        |                                                             |  |  |                              |            |         |                         |             |                   |                            |  |  |
| CITY<br>Washington                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | STATE<br>DC | ZIP CODE<br>20003                                           | Occupation                       |                                                                                                                                                                |         |  |                                  |                         |        |                                                             |  |  |                              |            |         |                         |             |                   |                            |  |  |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3"><b>C. FULL NAME</b><br/>Miwok Indians, Shingle Springs Band, , ,</td> <td>Name of Employer<br/>Indian Tribe</td> <td>Date (month, day, year)</td> <td>Amount</td> </tr> <tr> <td colspan="3">MAILING ADDRESS<br/>PO Box 1340</td> <td>Transaction ID : F65-CN32775</td> <td>10/28/2022</td> <td>2900.00</td> </tr> <tr> <td>CITY<br/>Shingle Springs</td> <td>STATE<br/>CA</td> <td>ZIP CODE<br/>95682</td> <td>Occupation<br/>Indian Tribe</td> <td></td> <td></td> </tr> </table> |             |                                                             |                                  | <b>C. FULL NAME</b><br>Miwok Indians, Shingle Springs Band, , ,                                                                                                |         |  | Name of Employer<br>Indian Tribe | Date (month, day, year) | Amount | MAILING ADDRESS<br>PO Box 1340                              |  |  | Transaction ID : F65-CN32775 | 10/28/2022 | 2900.00 | CITY<br>Shingle Springs | STATE<br>CA | ZIP CODE<br>95682 | Occupation<br>Indian Tribe |  |  |
| <b>C. FULL NAME</b><br>Miwok Indians, Shingle Springs Band, , ,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |             |                                                             | Name of Employer<br>Indian Tribe | Date (month, day, year)                                                                                                                                        | Amount  |  |                                  |                         |        |                                                             |  |  |                              |            |         |                         |             |                   |                            |  |  |
| MAILING ADDRESS<br>PO Box 1340                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |             |                                                             | Transaction ID : F65-CN32775     | 10/28/2022                                                                                                                                                     | 2900.00 |  |                                  |                         |        |                                                             |  |  |                              |            |         |                         |             |                   |                            |  |  |
| CITY<br>Shingle Springs                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | STATE<br>CA | ZIP CODE<br>95682                                           | Occupation<br>Indian Tribe       |                                                                                                                                                                |         |  |                                  |                         |        |                                                             |  |  |                              |            |         |                         |             |                   |                            |  |  |
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| <b>D. FULL NAME</b><br>Potawatomi Nation, Prairie Band, , ,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |             |                                                             | Name of Employer<br>Indian Tribe | Date (month, day, year)                                                                                                                                        | Amount  |  |                                  |                         |        |                                                             |  |  |                              |            |         |                         |             |                   |                            |  |  |
| MAILING ADDRESS<br>16281 Q Rd                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |             |                                                             | Transaction ID : F65-CN32774     | 10/28/2022                                                                                                                                                     | 2000.00 |  |                                  |                         |        |                                                             |  |  |                              |            |         |                         |             |                   |                            |  |  |
| CITY<br>Mayetta                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | STATE<br>KS | ZIP CODE<br>66509                                           | Occupation<br>Indian Tribe       |                                                                                                                                                                |         |  |                                  |                         |        |                                                             |  |  |                              |            |         |                         |             |                   |                            |  |  |
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| <b>E. FULL NAME</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |             |                                                             | Name of Employer                 | Date (month, day, year)                                                                                                                                        | Amount  |  |                                  |                         |        |                                                             |  |  |                              |            |         |                         |             |                   |                            |  |  |
| MAILING ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |             |                                                             |                                  |                                                                                                                                                                |         |  |                                  |                         |        |                                                             |  |  |                              |            |         |                         |             |                   |                            |  |  |
| CITY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | STATE       | ZIP CODE                                                    | Occupation                       |                                                                                                                                                                |         |  |                                  |                         |        |                                                             |  |  |                              |            |         |                         |             |                   |                            |  |  |
| SIGNATURE (optional)<br>Nagel, Rick, , Mr.,<br><br><div style="text-align: right;">[Electronically Filed]</div>                                                                                                                                                                                                                                                                                                                                                                                                                                                             |             |                                                             | DATE<br>10/29/2022               | <b>For further information contact:</b><br>Federal Election Commission<br>999 E Street, NW, Washington, DC 20463<br>Toll Free 800-424-9530, Local 202-694-1100 |         |  |                                  |                         |        |                                                             |  |  |                              |            |         |                         |             |                   |                            |  |  |

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Any information copied from reports and statements filed under the Federal Election Campaign Act 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.

**FEC FORM 6**  
(Revised 03/2016)