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1/31

# REPORT OF RECEIPTS AND DISBURSEMENTS

2000 SEP 11 P 12:00

For An Authorized Committee  
(Summary Page)

1. NAME OF COMMITTEE (in full) <b>Brad Carson for Congress</b>		2. FEC IDENTIFICATION NUMBER <b>C00343616</b>
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported P.O. Box 1962		
CITY, STATE, and ZIP CODE Claremore OK 74018	STATE / DISTRICT OK / 2	3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

## 4. TYPE OF REPORT

- April 15 Quarterly Report
- Twelfth day report preceding Runoff (election type)  
election on 09/19/2000 in the State of OK
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report on \_\_\_\_\_ in the State of \_\_\_\_\_
- July 31 Mid-Year Report (Non-election Year Only)  Termination report

This report contains activity for  Primary election  General election  Runoff election  Special election

## SUMMARY

5. Covering period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
<u>09/03/2000</u> through <u>08/30/2000</u>		
6. Net contributions (other than loans)		
(a) Total Contributions (other than loans) (from line 11(e))	80451.22	219129.22
(b) Total Contribution Refunds (from line 20(d))	0.00	1500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	80451.22	217629.22
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from line 17)	145287.44	359311.50
(b) Total Offsets to Operating Expenditures (from line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	145287.44	359311.50
8. Cash on Hand at Close of Reporting Period (from line 27)	132756.17	
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	93868.59	

For further information contact:  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-219-3420

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

Type or Print Name of Treasurer

Signature of Treasurer

*Julie K. Carson*  
*Julie K. Carson*

Date

*9/1/00*

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

## DETAILED SUMMARY PAGE of Receipts and Disbursements (Page 2, FEC Form 3)

Name of Committee (in full) Brad Carson for Congress	Report Covering the Period	
	From: 08/03/2000	To: 08/30/2000
I. RECEIPTS	COLUMN A Total This Period	COLUMN B Calendar Year-To-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees	78357.02	
(b) Itemized (Use Schedule A)	3324.00	
(c) Unitemized	79581.02	205126.02
(d) Total of contributions from individuals	0.00	500.00
(e) Political Party Committees	770.20	6720.20
(f) Other Political Committees (such as PACs)	0.00	5783.00
(g) The Candidate	80451.22	218129.22
(h) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(i)-(g), (b), (c) and (d))	0.00	0.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate	93663.59	128663.59
(b) All Other Loans	0.00	0.00
(c) TOTAL LOANS (add 13(a) and (b))	93663.59	128663.59
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.)</b>	8.75	23.75
<b>16. TOTAL RECEIPTS (add 11(c), 12, 13(c), 14 and 15)</b>	174323.55	348016.57
II. DISBURSEMENTS		
<b>17. OPERATING EXPENDITURES</b>	145287.44	359311.50
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES</b>	0.00	0.00
<b>19. LOAN REPAYMENTS:</b>		
(a) Of Loans Made or Guaranteed by the Candidate	35000.00	35000.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))	35000.00	35000.00
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>		
(a) Individuals/Persons Other Than Political Committees	0.00	1500.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	0.00	1500.00
<b>21. OTHER DISBURSEMENTS</b>	0.00	0.00
<b>22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)</b>	180287.44	304811.50
III. CASH SUMMARY		
<b>23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD</b>		135720.05
<b>24. TOTAL RECEIPTS THIS PERIOD (from Line 16)</b>		174323.55
<b>25. SUBTOTAL (add Line 23 and Line 24)</b>		310043.61
<b>26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)</b>		180287.44
<b>27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)</b>		132756.17

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		Use separate schedule(s) for each category of the Detailed Summary Page	3 / 31
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.					
<b>NAME OF COMMITTEE (In Full)</b> Brad Carson for Congress					
Full Name, Mailing Address, and ZIP Code John R. Barber  3008 East 75th St.  Tulsa OK	Name of Employer Self-employed	Date (month, day, year) 08/03/2000	Amount of Each Receipt this Period 500.00		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 500.00			
Full Name, Mailing Address, and ZIP Code Gery L. Getow  1856 E. 42nd St.  Tulsa OK 74105	Name of Employer Crowe & Dunlevy	Date (month, day, year) 08/03/2000	Amount of Each Receipt this Period 500.00		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 750.00			
Full Name, Mailing Address, and ZIP Code Tom J. Carson  P.O. Box 71  Stoney OK 74960	Name of Employer Self-employed	Date (month, day, year) 08/03/2000	Amount of Each Receipt this Period 400.00		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Investments	Aggregate Year-to-Date > \$ 800.00			
Full Name, Mailing Address, and ZIP Code Tom J. Carson  P.O. Box 71  Stoney OK 74960	Name of Employer Self-employed	Date (month, day, year) 08/03/2000	Amount of Each Receipt this Period 100.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff	Occupation Investments	Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Jack E. Gordon  P.O. Box 1167  Claremore OK 74018	Name of Employer Self-employed	Date (month, day, year) 08/03/2000	Amount of Each Receipt this Period 250.00		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code J. Lance Hopkins  P.O. Box 1508  Tahlequah OK 74464	Name of Employer Self-employed	Date (month, day, year) 08/03/2000	Amount of Each Receipt this Period 600.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff	Occupation Attorney	Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Jim Hopkins  P.O. Box 1709  Tahlequah OK 74465	Name of Employer Jim Hopkins Ford, Inc.	Date (month, day, year) 08/03/2000	Amount of Each Receipt this Period 250.00		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Auto Dealer	Aggregate Year-to-Date > \$ 250.00			
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....					
<b>TOTALS</b> This Period (last page this line number only) .....					

SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	4 / 31
					FOR LINE NUMBER 11A1
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) Brad Carson for Congress					
Full Name, Mailing Address, and ZIP Code Richard Ogden  204 N. Robinson, Ste. 9100 Oklahoma City OK 73103		Name of Employer Gooding & Mullnix  Occupation Attorney		Date (month, day, year) 08/03/2000	Amount of Each Receipt this Period 300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 300.00			
Full Name, Mailing Address, and ZIP Code Marvin Wright  741 N. Ross St. Sapulpa OK 74086		Name of Employer  Occupation Retired		Date (month, day, year) 08/03/2000	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code Katherine Caldwell  823 W. Elm St. Stillwell OK 74960		Name of Employer  Occupation Retired		Date (month, day, year) 08/04/2000	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 350.00			
Full Name, Mailing Address, and ZIP Code T. Jack Graves  P.O. Box 784 Claremore OK 74017		Name of Employer  Occupation Retired-D.A.		Date (month, day, year) 08/05/2000	Amount of Each Receipt this Period 600.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 600.00			
Full Name, Mailing Address, and ZIP Code J.D. Metcalf  P.O. Box 1913 Tulsa OK 74101		Name of Employer  Occupation Retired		Date (month, day, year) 08/05/2000	Amount of Each Receipt this Period 100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 100.00			
Full Name, Mailing Address, and ZIP Code Richard N. Wornack  P.O. Box 1278 Bristow OK 74010		Name of Employer Self-employed  Occupation CPA		Date (month, day, year) 08/07/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 500.00			
Full Name, Mailing Address, and ZIP Code Drew T. Carson  P.O. Box 639 Stillwell OK 74960		Name of Employer Bank of Commerce  Occupation Bank President		Date (month, day, year) 08/08/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 500.00			
SUBTOTALS of Receipts This Page (Optional) .....					
TOTALS This Period (last page this line number only) .....					

SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	5 / 31
					FOR LINE NUMBER 11A1
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<b>NAME OF COMMITTEE (in Full)</b> Brad Carson for Congress					
<b>Full Name, Mailing Address, and ZIP Code</b> David W. Stewart 7448 S. 98th E. Ave. Tulsa OK 74133		<b>Name of Employer</b> Trans Data Occupation National Acct. Exec.		<b>Date (month, day, year)</b> 08/10/2000	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 250.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Steve Bentley 409 Chimney Creek Dr. Lawton OK		<b>Name of Employer</b> Lawton Constitution Occupation Publisher		<b>Date (month, day, year)</b> 08/10/2000	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 500.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Gerald E. Durbin, II 820 N. Harvey Oklahoma City OK 73102		<b>Name of Employer</b> Durbin, Larimore & Bladick Occupation Attorney		<b>Date (month, day, year)</b> 08/10/2000	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 250.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Harland Stonecipher Rt. 1, Box 39 Centerville OK 74534		<b>Name of Employer</b> Pre Paid Legal Services Occupation Attorney		<b>Date (month, day, year)</b> 08/10/2000	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 500.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Tom E. Love 6824 NW Grand Blvd. Oklahoma City OK 73118		<b>Name of Employer</b> Love's Country Stores Occupation Owner		<b>Date (month, day, year)</b> 08/11/2000	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 500.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Judy Adair 1612 W. Gallatin St. Broken Arrow OK		<b>Name of Employer</b> Occupation Teacher		<b>Date (month, day, year)</b> 08/14/2000	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 500.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Mark McCullough P.O. Box 715 Pryor OK 74351		<b>Name of Employer</b> Self-employed Occupation Investments		<b>Date (month, day, year)</b> 08/14/2000	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 500.00			
<b>SUBTOTALS of Receipts This Page (Optional)</b> .....					
<b>TOTALS This Period (last page this line number only)</b> .....					

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		Use separate schedule(s) for each category of the Detailed Summary Page	6 / 31
				FOR LINE NUMBER 11A1	
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<b>NAME OF COMMITTEE (in Full)</b> Brad Carson for Congress					
<b>Full Name, Mailing Address, and ZIP Code</b> Harland B. Wells  P.O. Box 399  Parkersburg OK 74058		<b>Name of Employer</b> Self-employed  <b>Occupation</b> Real Estate		<b>Date (month, day, year)</b> 08/14/2008	<b>Amount of Each Receipt this Period</b> 250.00
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		<b>Aggregate Year-to-Date</b> > \$ 250.00			
<b>Full Name, Mailing Address, and ZIP Code</b> William Higgins  P.O. Box 309  Claremore OK 74016		<b>Name of Employer</b> Taylor, Burnage, Foster, et al		<b>Date (month, day, year)</b> 08/15/2008	<b>Amount of Each Receipt this Period</b> 250.00
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		<b>Aggregate Year-to-Date</b> > \$ 250.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Sean Burnage  1510 Oak Ridge Dr.  Claremore OK 74017		<b>Name of Employer</b> Taylor, Burnage, Foster, et al		<b>Date (month, day, year)</b> 08/15/2008	<b>Amount of Each Receipt this Period</b> 100.00
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		<b>Aggregate Year-to-Date</b> > \$ 500.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Sean Burnage  1510 Oak Ridge Dr.  Claremore OK 74017		<b>Name of Employer</b> Taylor, Burnage, Foster, et al		<b>Date (month, day, year)</b> 08/15/2008	<b>Amount of Each Receipt this Period</b> 100.00
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		<b>Aggregate Year-to-Date</b> > \$ 700.00			
<b>Full Name, Mailing Address, and ZIP Code</b> John R. Carle  1406 N. Choctaw Pl.  Claremore OK 74017		<b>Name of Employer</b> Carle, Mosier, et al		<b>Date (month, day, year)</b> 08/15/2008	<b>Amount of Each Receipt this Period</b> 500.00
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		<b>Aggregate Year-to-Date</b> > \$ 750.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Dallas E. Ferguson  1225 East 25th St.  Tulsa OK 74114		<b>Name of Employer</b> Doerner, Stuart, Saunders, et al		<b>Date (month, day, year)</b> 08/15/2008	<b>Amount of Each Receipt this Period</b> 100.00
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		<b>Aggregate Year-to-Date</b> > \$ 350.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Jenica Fritour  3721 E. 56th St.  Tulsa OK 74133		<b>Name of Employer</b> Information requested		<b>Date (month, day, year)</b> 08/15/2008	<b>Amount of Each Receipt this Period</b> 1000.00
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		<b>Aggregate Year-to-Date</b> > \$ 1000.00			
<b>SUBTOTALS of Receipts This Page (Optional)</b> .....					
<b>TOTALS This Period (last page this line number only)</b> .....					

SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	7 / 31
					FOR LINE NUMBER 11A1
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NAME OF COMMITTEE (in Full) Brad Carson for Congress					
Full Name, Mailing Address, and ZIP Code Mike Filson 3721 E. 55th St Tulsa OK 74135		Name of Employer Information requested Occupation		Date (month, day, year) 08/16/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Donald Hamel 144 Fairway Ok City OK 73544		Name of Employer Bank of Western Oklahoma Occupation Banker		Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 166.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 166.00			
Full Name, Mailing Address, and ZIP Code Jimmy Dean Hamel P.O. Box 70 Leach OK 73854		Name of Employer Bank of Western Oklahoma Occupation Chairman/CEO		Date (month, day, year) 08/16/2000	Amount of Each Receipt this Period 168.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 168.00			
Full Name, Mailing Address, and ZIP Code Mike Cantrell P.O. Box 1808 Ada OK 74820		Name of Employer Self-employed Occupation Oil & Gas Production		Date (month, day, year) 08/17/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 500.00			
Full Name, Mailing Address, and ZIP Code Fred A. Gibson Rt. 4, Box 108 Tehlequah OK 74464		Name of Employer Occupation Retired		Date (month, day, year) 08/18/2000	Amount of Each Receipt this Period 673.02 <small>incl. cont. radio spots</small>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 673.02			
Full Name, Mailing Address, and ZIP Code Paul Orbison 8855 S. Florence Tulsa OK 74105		Name of Employer Information requested Occupation		Date (month, day, year) 08/16/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 500.00			
Full Name, Mailing Address, and ZIP Code Philip Tholen 4203 East 75th Place Tulsa OK 74135		Name of Employer Sanson Investment Co. Occupation Executive		Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1000.00			
SUBTOTALS of Receipts This Page (Optional) .....					
TOTALS This Period (last page this line number only) .....					

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		8 / 31
Use separate schedule(s) for each category of the Detailed Summary Page			FOR LINE NUMBER 11A1	
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<b>NAME OF COMMITTEE (in Full)</b> Brad Carson for Congress				
<b>Full Name, Mailing Address, and ZIP Code</b> Philp Tholen  4203 East 78th Place  Tulsa OK 74136  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Sanson Investment Co.  <b>Occupation</b> Executive  <b>Aggregate Year-to-Date</b> > \$ 2000.00	<b>Date (month, day, year)</b> 08/18/2000	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Philp Tholen  4203 East 75th Place  Tulsa OK 74136  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff	<b>Name of Employer</b> Sanson Investment Co.  <b>Occupation</b> Executive  <b>Aggregate Year-to-Date</b> > \$ 3000.00	<b>Date (month, day, year)</b> 08/18/2000	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Paul R. Esserman  2400 Cherry Creek South Dr.  Denver CO 80209  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Information requested  <b>Occupation</b>   <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 08/22/2000	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Paul R. Esserman  2400 Cherry Creek South Dr.  Denver CO 80209  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Information requested  <b>Occupation</b>   <b>Aggregate Year-to-Date</b> > \$ 2000.00	<b>Date (month, day, year)</b> 08/22/2000	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Paul R. Esserman  2400 Cherry Creek South Dr.  Denver CO 80209  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff	<b>Name of Employer</b> Information requested  <b>Occupation</b>   <b>Aggregate Year-to-Date</b> > \$ 3000.00	<b>Date (month, day, year)</b> 08/22/2000	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Paul Mitchell  14 Eustis Parkway  Waterville ME 04901  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Information requested  <b>Occupation</b>   <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 08/22/2000	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Paul Mitchell  14 Eustis Parkway  Waterville ME 04901  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff	<b>Name of Employer</b> Information requested  <b>Occupation</b>   <b>Aggregate Year-to-Date</b> > \$ 2000.00	<b>Date (month, day, year)</b> 08/22/2000	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>SUBTOTALS of Receipts This Page (Optional)</b> .....				
<b>TOTALS This Period (last page this line number only)</b> .....				



SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	9 / 31
					FOR LINE NUMBER 11A1
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) Brad Carson for Congress					
Full Name, Mailing Address, and ZIP Code Paul Mitchell 14 Eustis Parkway Waterville ME 04901		Name of Employer Information requested Occupation		Date (month, day, year) 08/22/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 3000.00			
Full Name, Mailing Address, and ZIP Code Yvette Mitchell 14 Eustis Parkway Waterville ME 04901		Name of Employer Information requested Occupation		Date (month, day, year) 08/22/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Yvette Mitchell 14 Eustis Parkway Waterville ME 04901		Name of Employer Information requested Occupation		Date (month, day, year) 08/22/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Aggregate Year-to-Date > \$ 2000.00			
Full Name, Mailing Address, and ZIP Code Yvette Mitchell 14 Eustis Parkway Waterville ME 04901		Name of Employer Information requested Occupation		Date (month, day, year) 08/22/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 3000.00			
Full Name, Mailing Address, and ZIP Code Joseph L. Parker 2021 S. Lewis, Ste. 470 Tulsa OK 74104		Name of Employer Anchor Stone Co. Occupation Executive		Date (month, day, year) 08/22/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 2000.00			
Full Name, Mailing Address, and ZIP Code Joseph L. Parker 2021 S. Lewis, Ste. 470 Tulsa OK 74104		Name of Employer Anchor Stone Co. Occupation Executive		Date (month, day, year) 08/22/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Aggregate Year-to-Date > \$ 3000.00			
Full Name, Mailing Address, and ZIP Code Sandra Parker 2021 S. Lewis, Ste. 470 Tulsa OK 74104		Name of Employer Occupation Housewife		Date (month, day, year) 08/22/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1000.00			
SUBTOTALS of Receipts This Page (Optional)					
TOTALS This Period (last page this line number only)					

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		Use separate schedule(s) for each category of the Detailed Summary Page	10 / 31
				FOR LINE NUMBER 11A1	
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.					
<b>NAME OF COMMITTEE (in Full)</b> Brad Carson for Congress					
Full Name, Mailing Address, and ZIP Code Sandra Parker  2021 S. Lewis, Ste. 470  Tulsa OK 74104	Name of Employer  Occupation Housewife	Date (month, day, year) 08/22/2000	Amount of Each Receipt this Period 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff	Aggregate Year-to-Date > \$ 2000.00				
Full Name, Mailing Address, and ZIP Code Jean E. Price  1545 Locust St.  Denver CO 80220	Name of Employer Information requested  Occupation	Date (month, day, year) 08/22/2000	Amount of Each Receipt this Period 1000.00		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00				
Full Name, Mailing Address, and ZIP Code Jean E. Price  1545 Locust St.  Denver CO 80220	Name of Employer Information requested  Occupation	Date (month, day, year) 08/22/2000	Amount of Each Receipt this Period 1000.00		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2000.00				
Full Name, Mailing Address, and ZIP Code Jean E. Price  1545 Locust St.  Denver CO 80220	Name of Employer Information requested  Occupation	Date (month, day, year) 08/22/2000	Amount of Each Receipt this Period 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff	Aggregate Year-to-Date > \$ 3000.00				
Full Name, Mailing Address, and ZIP Code Michelle Price  1515 East 35th Pl.  Tulsa OK 74105	Name of Employer  Occupation Homemaker	Date (month, day, year) 08/23/2000	Amount of Each Receipt this Period 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff	Aggregate Year-to-Date > \$ 3000.00				
Full Name, Mailing Address, and ZIP Code Robert Price  1515 East 35th Place  Tulsa OK 74105	Name of Employer Self-employed  Occupation Attorney	Date (month, day, year) 08/23/2000	Amount of Each Receipt this Period 1000.00		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2000.00				
Full Name, Mailing Address, and ZIP Code Robert Price  1515 East 35th Place  Tulsa OK 74105	Name of Employer Self-employed  Occupation Attorney	Date (month, day, year) 08/23/2000	Amount of Each Receipt this Period 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff	Aggregate Year-to-Date > \$ 3000.00				
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....					
<b>TOTALS</b> This Period (last page this line number only) .....					

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
11A1

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**NAME OF COMMITTEE (in Full)**  
Brad Carson for Congress

Full Name, Mailing Address, and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Scott Zarrow Mid-Continent Tower, Ste. 900 Tulsa OK 74103 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff	Foreman Investment Corp. Occupation: President Aggregate Year-to-Date > \$ 1000.00	08/23/2000	1000.00
Joe Hoover 107 W. Main Stillwater OK 74462 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff	Hoover Drug Occupation: Pharmaceutical Aggregate Year-to-Date > \$ 400.00	08/24/2000	200.00
Ken Lott 4516 Cortland Rd. Chevy Chase MD 20815 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff	CIA Occupation: Special Assistant Aggregate Year-to-Date > \$ 450.00	08/24/2000	250.00
Leonard Liebman One Gateway Center, Ste. 106 Newark NJ 07102 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff	Self-employed Occupation: Investments Aggregate Year-to-Date > \$ 2000.00	08/24/2000	1000.00
Barry G. Reynolds 1913 East 36th Pl. Tulsa OK 74106 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff	Barkley, Tibus, Mills & Reynolds Occupation: Attorney Aggregate Year-to-Date > \$ 250.00	08/24/2000	250.00
Dr. Barbara Sanise 5519-B E. 51st St. Tulsa OK 74136 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff	RWJ Project Administrator Occupation: Executive Director Aggregate Year-to-Date > \$ 700.00	08/24/2000	400.00
Charles Schusterman 2142 Forest Blvd. Tulsa OK 74114 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff	Samson Resources Occupation: CEO Aggregate Year-to-Date > \$ 1000.00	08/24/2000	1000.00
<b>SUBTOTALS of Receipts This Page (Optional)</b> .....			
<b>TOTALS This Period (last page this line number only)</b> .....			

SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	12/31
					FOR LINE NUMBER 14A1
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) Brad Carson for Congress					
Full Name, Mailing Address, and ZIP Code Lynn Schuster 2142 Forest Blvd. Tulsa OK 74114		Name of Employer Occupation Volunteer		Date (month, day, year) 08/24/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Edmond Syon 503 N. 15th Muskogee OK 74401		Name of Employer Eastern Okla Land & Cattle Co.		Date (month, day, year) 08/24/2000	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Occupation Passident			
		Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code Mike Cantrell P.O. Box 1808 Ada OK 74820		Name of Employer Self-employed		Date (month, day, year) 08/25/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Occupation Oil & Gas Production			
		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Eddie Harper P.O. Box 1366 McAlester OK 74501		Name of Employer Self-employed		Date (month, day, year) 08/25/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Occupation Attorney			
		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Charlie L. King 3300 W. 9th St. Tulsa OK 74132		Name of Employer		Date (month, day, year) 08/25/2000	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Occupation Retired			
		Aggregate Year-to-Date > \$ 300.00			
Full Name, Mailing Address, and ZIP Code Tom Kahner Rt. 2, Box 228 Sperry OK 74073		Name of Employer Kahner Enterprises		Date (month, day, year) 08/25/2000	Amount of Each Receipt this Period 400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Occupation Auto Recreation			
		Aggregate Year-to-Date > \$ 400.00			
Full Name, Mailing Address, and ZIP Code Delphia C. Lee 723 Country Club Dr. Nowata OK 74048		Name of Employer Information requested		Date (month, day, year) 08/25/2000	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Occupation			
		Aggregate Year-to-Date > \$ 250.00			
SUBTOTALS of Receipts This Page (Optional) .....					
TOTALS This Period (last page this line number only) .....					

SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	13 / 31
					FOR LINE NUMBER 11A9
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) Brad Carson for Congress					
Full Name, Mailing Address, and ZIP Code Paul Orblson 3885 S. Florence Tulsa OK 74105		Name of Employer Information requested  Occupation		Date (month, day, year) 08/25/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Aggregate Year-to-Date > \$ 1600.00			
Full Name, Mailing Address, and ZIP Code Peter M. Waller 1319 E. 35th St. Tulsa OK 74105		Name of Employer Waller & Associates  Occupation Executive		Date (month, day, year) 08/25/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1250.00			
Full Name, Mailing Address, and ZIP Code Peter M. Waller 1319 E. 35th St. Tulsa OK 74105		Name of Employer Waller & Associates  Occupation Executive		Date (month, day, year) 08/25/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Aggregate Year-to-Date > \$ 2250.00			
Full Name, Mailing Address, and ZIP Code Laura W. Boyd 2601 Castewood Dr. Norman OK		Name of Employer Self-employed  Occupation Consultant		Date (month, day, year) 08/26/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Aggregate Year-to-Date > \$ 500.00			
Full Name, Mailing Address, and ZIP Code John Henry Rule 1122 E. 20th St. Tulsa OK 74120		Name of Employer Information requested  Occupation Attorney		Date (month, day, year) 08/28/2000	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code Elizabeth Baez 16 S. Peters, Ste. 210 Norman OK		Name of Employer Self-employed  Occupation Attorney		Date (month, day, year) 08/28/2000	Amount of Each Receipt this Period 150.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Aggregate Year-to-Date > \$ 300.00			
Full Name, Mailing Address, and ZIP Code June Edmondson 219 N. 14th Muskogee OK 74401		Name of Employer   Occupation Retired		Date (month, day, year) 08/28/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Aggregate Year-to-Date > \$ 1000.00			
SUBTOTALS of Receipts This Page (Optional) .....					
TOTALS This Period (last page this line number only) .....					

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		14 / 31
Use a separate schedule(s) for each category of the Detailed Summary Page			FOR LINE NUMBER 11A1	
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.				
<b>NAME OF COMMITTEE (In Full)</b> Brad Carson for Congress				
<b>Full Name, Mailing Address, and ZIP Code</b> C.V. Elliott  105 Jennie Lane, Rt. 5 Vinita, OK 74301	<b>Name of Employer</b> Elliott Truckline  <b>Occupation</b> Owner	<b>Date (month, day, year)</b> 08/28/2000	<b>Amount of Each Receipt this Period</b> 300.00	
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff	<b>Aggregate Year-to-Date</b> > \$ 300.00			
<b>Full Name, Mailing Address, and ZIP Code</b> John Hannah  Box 417 Muskogee, OK 74402	<b>Name of Employer</b> Citizens Bank  <b>Occupation</b> Banker	<b>Date (month, day, year)</b> 08/28/2000	<b>Amount of Each Receipt this Period</b> 250.00	
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff	<b>Aggregate Year-to-Date</b> > \$ 250.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Carol Jankowsky  1021 Basil Rd. McLean, VA 22101	<b>Name of Employer</b>  <b>Occupation</b> Community volunteer	<b>Date (month, day, year)</b> 08/28/2000	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff	<b>Aggregate Year-to-Date</b> > \$ 3000.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Joel Jankowsky  1021 Basil Rd. McLean, VA 22101	<b>Name of Employer</b> Akin, Gump, Strauss, et al	<b>Date (month, day, year)</b> 08/28/2000	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff	<b>Aggregate Year-to-Date</b> > \$ 2000.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Robert S. Kerr  12501 N. May Ave. Oklahoma City, OK 73120	<b>Name of Employer</b> Kerr Foundation  <b>Occupation</b> Chairman	<b>Date (month, day, year)</b> 08/28/2000	<b>Amount of Each Receipt this Period</b> 500.00	
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff	<b>Aggregate Year-to-Date</b> > \$ 500.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Dr. Gregory Mein  8517 NW 95th Oklahoma City, OK 73162	<b>Name of Employer</b> Intersouth Advisors  <b>Occupation</b> Partner	<b>Date (month, day, year)</b> 08/28/2000	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff	<b>Aggregate Year-to-Date</b> > \$ 1000.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Brian L. Matthews  2208 Park Circle Muskogee, OK 74403	<b>Name of Employer</b> Self-employed  <b>Occupation</b> Information requested	<b>Date (month, day, year)</b> 08/28/2000	<b>Amount of Each Receipt this Period</b> 500.00	
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff	<b>Aggregate Year-to-Date</b> > \$ 500.00			
<b>SUBTOTALS of Receipts This Page (Optional)</b> .....				
<b>TOTALS This Period (last page this line number only)</b> .....				

SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	15 / 31
					FOR LINE NUMBER 11A1
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) Brad Carson for Congress					
Full Name, Mailing Address, and ZIP Code Alex Singer P.O. Box 755 Tulsa OK 74101		Name of Employer Occupation Retired-Oil Producer		Date (month, day, year) 08/28/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Gene Stipe 304 Saunter Way McAlester OK 74501		Name of Employer Occupation Stipe Law Firm Attorney		Date (month, day, year) 08/28/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code John Wylie, II P.O. Box 480 Oklahoma OK 74063		Name of Employer Occupation Information requested		Date (month, day, year) 08/28/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Aggregate Year-to-Date > \$ 500.00			
Full Name, Mailing Address, and ZIP Code Jacqueline Blumenthal 6806 Sixth St., NW Washington DC 20012		Name of Employer Occupation White House Fellows Director		Date (month, day, year) 08/29/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Aggregate Year-to-Date > \$ 500.00			
Full Name, Mailing Address, and ZIP Code Stan Burnstein P.O. Box 582527 Tulsa OK 74158		Name of Employer Occupation Information requested		Date (month, day, year) 08/29/2000	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code J. Donald Capra 108 Lake Alma Dr. Oklahoma City OK		Name of Employer Occupation OMRF President		Date (month, day, year) 08/29/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code William Fahran 704 Sunny Meadows Dr. Durant OK 74701		Name of Employer Occupation First United Bank Bankier		Date (month, day, year) 08/29/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Aggregate Year-to-Date > \$ 1000.00			
SUBTOTALS of Receipts This Page (Optional) .....					
TOTALS This Period (last page this line number only) .....					

SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	16 / 31
					FOR LINE NUMBER 11A1
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NAME OF COMMITTEE (In Full) Brad Carson for Congress					
Full Name, Mailing Address, and ZIP Code Ken Ferguson  Box 598 Altus OK 73522		Name of Employer Self-employed  Occupation Banker		Date (month, day, year) 08/29/2000	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Aggregate Year-to-Date > \$ 500.00			
Full Name, Mailing Address, and ZIP Code Donald Herel  144 Fairway Ekl Crk OK 73644		Name of Employer Bank of Western Oklahoma  Occupation Banker		Date (month, day, year) 08/29/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Aggregate Year-to-Date > \$ 666.00			
Full Name, Mailing Address, and ZIP Code Jimmy Dean Herel  P.O. Box 70 Leedy OK 73554		Name of Employer Bank of Western Oklahoma  Occupation Chairman/CEO		Date (month, day, year) 08/29/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Aggregate Year-to-Date > \$ 666.00			
Full Name, Mailing Address, and ZIP Code Rhonda Healy  15325 Stony Springs Rd. Edmond OK 73013		Name of Employer National Loan Investors  Occupation Managing General Partner		Date (month, day, year) 08/29/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Rhonda Healy  15325 Stony Springs Rd. Edmond OK 73013		Name of Employer National Loan Investors  Occupation Managing General Partner		Date (month, day, year) 08/29/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Aggregate Year-to-Date > \$ 2000.00			
Full Name, Mailing Address, and ZIP Code Henry G. Keemeler  10820 S. Richmond Ave. Tulsa OK 74137		Name of Employer Kessler-Francis Oil Co.  Occupation Executive/Petroleum Engineer		Date (month, day, year) 08/29/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Darwin Massey  P.O. Box 888 Oklahoma City OK 73101		Name of Employer GIT, Inc.  Occupation Executive		Date (month, day, year) 08/29/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Aggregate Year-to-Date > \$ 500.00			
SUBTOTALS of Receipts This Page (Optional) .....					
TOTALS This Period (last page this line number only) .....					



SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	17 / 31
					FOR LINE NUMBER 11A1
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) Brad Carson for Congress					
Full Name, Mailing Address, and ZIP Code Vicky Smith Rt. 2, Box 177 Wellston OK 74881		Name of Employer Duck Smith Farms Occupation Executive		Date (month, day, year) 08/29/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Aggregate Year-to-Date \$ 700.00			
Full Name, Mailing Address, and ZIP Code Samuel Stone 320 S. Boston, 18th Floor Tulsa OK 74103		Name of Employer Stone, Jessup, PC Occupation Attorney		Date (month, day, year) 08/29/2000	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Aggregate Year-to-Date \$ 250.00			
Full Name, Mailing Address, and ZIP Code David Albert 801 NW 40th St. Oklahoma City OK		Name of Employer Occupation		Date (month, day, year) 08/30/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Aggregate Year-to-Date \$ 500.00			
Full Name, Mailing Address, and ZIP Code LeRoy Bridges 11613 SW 3rd Terr. Yukon OK 73099		Name of Employer Oklahoma University Occupation Director-Dept. Political Communication		Date (month, day, year) 08/30/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Aggregate Year-to-Date \$ 500.00			
Full Name, Mailing Address, and ZIP Code Ron Crosby 519 Sunset Ardmore OK 73401		Name of Employer Information requested Occupation		Date (month, day, year) 08/30/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Aggregate Year-to-Date \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Dr. J. Don Harris 3821 NW 83rd St. Oklahoma City OK 73116		Name of Employer Information requested Occupation		Date (month, day, year) 08/30/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Aggregate Year-to-Date \$ 500.00			
Full Name, Mailing Address, and ZIP Code David F. James 2423 E 37th St. Tulsa OK 74105		Name of Employer James, Potts & Wolfers Occupation Attorney		Date (month, day, year) 08/30/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Aggregate Year-to-Date \$ 1000.00			
SUBTOTALS of Receipts This Page (Optional) .....					
TOTALS This Period (last page this line number only) .....					

SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	18 / 31
					FOR LINE NUMBER 11A1
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) Brad Carson for Congress					
Full Name, Mailing Address, and ZIP Code Edwyrne Krumm 2300 Riverside Dr., #16E Tulsa OK 74114		Name of Employer Occupation Community Volunteer		Date (month, day, year) 08/30/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Aggregate Year-to-Date > \$ 1500.00			
Full Name, Mailing Address, and ZIP Code J.D. Malcoffe P.O. Box 1913 Tulsa OK 74101		Name of Employer Occupation Retired		Date (month, day, year) 08/30/2000	Amount of Each Receipt this Period 150.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code Frank Morrison 812 NW 63rd Oklahoma City OK 73116		Name of Employer Morrison Fence Co. Occupation Owner		Date (month, day, year) 08/30/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Kim Rainbolt 8226 Rivers Dr. Oklahoma City OK 73112		Name of Employer Information requested Occupation		Date (month, day, year) 08/30/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code John Stephens 8516 S. Shields Moore OK 73160		Name of Employer Information requested Occupation		Date (month, day, year) 08/30/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Mary Sidham 606 SW 2nd Cherokee OK 74428		Name of Employer People's National Bank Occupation Banker		Date (month, day, year) 08/30/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Helen Vorfelt 1510 Dorchester Dr. Oklahoma City OK 73120		Name of Employer Information requested Occupation		Date (month, day, year) 08/30/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Aggregate Year-to-Date > \$ 1000.00			
SUBTOTALS of Receipts This Page (Optional) .....					
TOTALS This Period (last page this line number only) .....					

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		Use separate schedule(s) for each category of the Detailed Summary Page	19 / 31
				FOR LINE NUMBER 11A1	
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.					
<b>NAME OF COMMITTEE (In Full)</b> Brad Carson for Congress					
Full Name, Mailing Address, and ZIP Code David Wallers  6218 Riviera Dr.  Oklahoma City OK 73112	Name of Employer Waters Power International  Occupation President	Date (month, day, year) 08/30/2000	Amount of Each Receipt this Period 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff	Aggregate Year-to-Date > \$ 700.00				
Full Name, Mailing Address, and ZIP Code Rhonda Wallers  6218 Riviera Dr.  Oklahoma City OK 73112	Name of Employer Waters Power International  Occupation Executive	Date (month, day, year) 08/30/2000	Amount of Each Receipt this Period 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff	Aggregate Year-to-Date > \$ 600.00				
Full Name, Mailing Address, and ZIP Code Marvin Weiss  2212 NW 45th  Oklahoma City OK 73112	Name of Employer Unarco Commercial Products  Occupation President	Date (month, day, year) 08/30/2000	Amount of Each Receipt this Period 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff	Aggregate Year-to-Date > \$ 500.00				
Full Name, Mailing Address, and ZIP Code Douglas L. Young  3311 E. Murdock  Wichita KS 67208	Name of Employer Information requested  Occupation	Date (month, day, year) 08/30/2000	Amount of Each Receipt this Period 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff	Aggregate Year-to-Date > \$ 1000.00				
Full Name, Mailing Address, and ZIP Code Sharilyn Young  5507 Fairway Dr.  Edmond OK 73003	Name of Employer Oklahoma Lumberman's Assc.  Occupation Executive V.P.	Date (month, day, year) 08/30/2000	Amount of Each Receipt this Period 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff	Aggregate Year-to-Date > \$ 1000.00				
Full Name, Mailing Address, and ZIP Code Sharilyn Young  5507 Fairway Dr.  Edmond OK 73003	Name of Employer Oklahoma Lumberman's Assc.  Occupation Executive V.P.	Date (month, day, year) 08/30/2000	Amount of Each Receipt this Period 500.00		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1500.00				
<b>SUBTOTALS of Receipts This Page (Optional)</b> .....					
<b>TOTALS This Period (last page this line number only)</b> .....					<b>76357.02</b>

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	20 / 31
			FOR LINE NUMBER 11C
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 committees.			
<b>NAME OF COMMITTEE (In Full)</b> Brad Carson for Congress			
Full Name, Mailing Address, and ZIP Code BUSINESS INDUSTRY POLITICAL ACTION COMMITTEE 888 SIXTEENTH STREET NW SUITE 305 WASHINGTON DC 20005	Name of Employer  Occupation	Date (month, day, year) 08/08/2008	Amount of Each Receipt this Period 20.20 (Include contrib. newsletter)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 20.20		
Full Name, Mailing Address, and ZIP Code NATIONAL ELECTRICAL MANUFACTURERS ASSOCIATION POLITICAL ACTION COMMITTEE (NEMAPAC) 1300 NORTH 17TH STREET SUITE 1847 ROSSLYN VA 22208	Name of Employer  Occupation	Date (month, day, year) 08/15/2008	Amount of Each Receipt this Period 750.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 750.00		
<b>SUBTOTALS of Receipts This Page (Optional)</b> .....			
<b>TOTALS This Period (last page this line number only)</b> .....			770.20

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		Use separate schedule(s) for each category of the Detailed Summary Page	21 / 31
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.					
<b>NAME OF COMMITTEE (in Full)</b> Brad Carson for Congress					
Full Name, Mailing Address, and ZIP Code Brad Carson  1023 N. Rutler Rd.  Clarence OK 74017	Name of Employer  Occupation Candidate  Aggregate Year-to-Date > \$ 66600.00	Date (month, day, year) 08/04/2000  This loan received from candidate who borrowed on line of credit from Bank One	Amount of Each Receipt this Period 31800.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):					
Full Name, Mailing Address, and ZIP Code Brad Carson  1023 N. Rutler Rd.  Clarence OK 74017	Name of Employer  Occupation Candidate  Aggregate Year-to-Date > \$ 120150.00	Date (month, day, year) 08/14/2000  This loan received from candidate who borrowed on line of credit from Bank One	Amount of Each Receipt this Period 53360.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):					
Full Name, Mailing Address, and ZIP Code Brad Carson  1023 N. Rutler Rd.  Clarence OK 74017	Name of Employer  Occupation Candidate  Aggregate Year-to-Date > \$ 128863.58	Date (month, day, year) 08/25/2000  This loan received from candidate who borrowed on line credit from Bank One	Amount of Each Receipt this Period 8713.58		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):					
<b>SUBTOTALS of Receipts This Page (Optional)</b> .....					93863.58
<b>TOTALS This Period (last page this line number only)</b> .....					93863.58

SCHEDULE B		ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the Detailed Summary Page	22 / 31
					FOR LINE NUMBER 17
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) Brad Carson for Congress					
Full Name, Mailing Address, and ZIP Code Cedars Apartments 120 E. 17th St. Tulsa OK 74119	Purpose of Disbursement Rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08/03/2000	Amount of Each Disbursement This Period 475.00		
Full Name, Mailing Address, and ZIP Code Nita Jacobs 214 S. Elliott Pryor OK 74361	Purpose of Disbursement Rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08/03/2000	Amount of Each Disbursement This Period 915.00		
Full Name, Mailing Address, and ZIP Code Video Revolution 7030 S. Lewis, Bldg. 1 Tulsa OK 74138	Purpose of Disbursement Rental of video equipment Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08/03/2000	Amount of Each Disbursement This Period 108.85		
Full Name, Mailing Address, and ZIP Code Mailboxes, Etc. 8210 E. 71st Tulsa OK 74135	Purpose of Disbursement Shipping Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08/04/2000	Amount of Each Disbursement This Period 50.30		
Full Name, Mailing Address, and ZIP Code Pebble Lumber 715 W. Will Rogers Blvd. Claremore OK 74017	Purpose of Disbursement Supplies for signs Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08/04/2000	Amount of Each Disbursement This Period 304.11		
Full Name, Mailing Address, and ZIP Code Shrum, Devine & Danton 2141 Wisconsin Ave., Ste. H Washington DC 20007	Purpose of Disbursement Multimedia services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08/04/2000	Amount of Each Disbursement This Period 31800.00		
Full Name, Mailing Address, and ZIP Code Mailboxes, Etc. 8210 E. 71st Tulsa OK 74138	Purpose of Disbursement Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08/05/2000	Amount of Each Disbursement This Period 28.05		
Full Name, Mailing Address, and ZIP Code City of Claremore P.O. Box 248 Claremore OK 74018	Purpose of Disbursement Utilities Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08/08/2000	Amount of Each Disbursement This Period 330.85		
Full Name, Mailing Address, and ZIP Code Claremore Progress 315 W. Will Rogers Blvd. Claremore OK 74017	Purpose of Disbursement Ad Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08/08/2000	Amount of Each Disbursement This Period 487.50		
SUBTOTALS of Disbursements This Page (Optional)					
TOTALS This Period (last page this line number only)					

SCHEDULE B		ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the Detailed Summary Page	23 / 31 FOR LINE NUMBER 17
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) Brad Carson for Congress					
Full Name, Mailing Address, and ZIP Code Mailboxes, Etc. 8210 E. 71st Tulsa OK 74133	Purpose of Disbursement Shipping charges Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08/05/2000	Amount of Each Disbursement This Period 47.99		
Full Name, Mailing Address, and ZIP Code Newcourt, Inc. P.O. Box 627 Parsippany NJ 07054	Purpose of Disbursement Computer rental Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08/05/2000	Amount of Each Disbursement This Period 87.28		
Full Name, Mailing Address, and ZIP Code Richard Riggs 333 E. Will Rogers Blvd. Claremore OK 74017	Purpose of Disbursement Lawn maintenance Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08/05/2000	Amount of Each Disbursement This Period 50.00		
Full Name, Mailing Address, and ZIP Code Scanner Printing P.O. Box 550 Miami OK 74358	Purpose of Disbursement Printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08/06/2000	Amount of Each Disbursement This Period 1629.32		
Full Name, Mailing Address, and ZIP Code Craig Williams 2200 N. 16th Boise ID 83702	Purpose of Disbursement Voter file Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08/06/2000	Amount of Each Disbursement This Period 1400.00		
Full Name, Mailing Address, and ZIP Code AT&T P.O. Box 16720 Mesa AZ 85211-6720	Purpose of Disbursement Monthly mobile phone expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08/07/2000	Amount of Each Disbursement This Period 238.28		
Full Name, Mailing Address, and ZIP Code Mailboxes, Etc. 8210 E. 71st Tulsa OK 74133	Purpose of Disbursement Shipping Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08/08/2000	Amount of Each Disbursement This Period 16.93		
Full Name, Mailing Address, and ZIP Code Mailboxes, Etc. 8210 E. 71st Tulsa OK 74133	Purpose of Disbursement Shipping Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08/09/2000	Amount of Each Disbursement This Period 12.47		
Full Name, Mailing Address, and ZIP Code Wal-Mart 3400 W. Main Norman OK 73072	Purpose of Disbursement Office supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08/08/2000	Amount of Each Disbursement This Period 71.30		
SUBTOTALS of Disbursements This Page (Optional) .....					
TOTALS This Period (last page this line number only) .....					

<b>SCHEDULE B</b>		<b>ITEMIZED DISBURSEMENTS</b>		Use separate schedule(s) for each category of the Detailed Summary Page	24 / 31 FOR LINE NUMBER 17
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 committees.					
<b>NAME OF COMMITTEE (In Full)</b> Brad Carson for Congress					
Full Name, Mailing Address, and ZIP Code Sooner Printing P.O. Box 550 Miami OK 74355		Purpose of Disbursement Printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 08/10/2000	Amount of Each Disbursement This Period 576.00
Full Name, Mailing Address, and ZIP Code Jeff Jaynes P.O. Box 565 Ocala OK 74015-0565		Purpose of Disbursement Reimburse mileage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 08/11/2000	Amount of Each Disbursement This Period 392.99
Full Name, Mailing Address, and ZIP Code Michelle Whitaker Rt. 2, Box 298 Wagoner OK 74467		Purpose of Disbursement Reimburse supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 08/11/2000	Amount of Each Disbursement This Period 51.19
Full Name, Mailing Address, and ZIP Code Campaign Technology Professionals 2601 NW Expressway, Ste. 200W Oklahoma City OK 73112		Purpose of Disbursement Accounting services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 08/14/2000	Amount of Each Disbursement This Period 865.00
Full Name, Mailing Address, and ZIP Code Richard Riggs 333 E. Will Rogers Blvd. Claremore OK 74017		Purpose of Disbursement Lawn maintenance Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 08/14/2000	Amount of Each Disbursement This Period 35.00
Full Name, Mailing Address, and ZIP Code Shrum, Devine & Doster 2141 Wisconsin Ave., Ste. H Washington DC 20007		Purpose of Disbursement Multimedia services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 08/14/2000	Amount of Each Disbursement This Period 53350.00
Full Name, Mailing Address, and ZIP Code Tulsa Machine 1503 E. Admiral Pl Tulsa OK 74120		Purpose of Disbursement Printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 08/14/2000	Amount of Each Disbursement This Period 487.50
Full Name, Mailing Address, and ZIP Code Angie Cox P.O. Box 216 Fort Gibson OK 74434		Purpose of Disbursement Contract labor Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 08/16/2000	Amount of Each Disbursement This Period 100.00
Full Name, Mailing Address, and ZIP Code MCE Communications 302 E. 10th St Tulsa OK 74120		Purpose of Disbursement Computer services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 08/15/2000	Amount of Each Disbursement This Period 921.35
<b>SUBTOTALS of Disbursements This Page (Optional)</b> .....					
<b>TOTALS This Period (last page this line number only)</b> .....					



<b>SCHEDULE B</b>		<b>ITEMIZED DISBURSEMENTS</b>		Use separate schedule(s) for each category of the Detailed Summary Page	25 / 31
					FOR LINE NUMBER 17
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.					
<b>NAME OF COMMITTEE (in Full)</b> Brad Carson for Congress					
Full Name, Mailing Address, and ZIP Code U.S. Postmaster 320 SW 5th Oklahoma City OK 73102		Purpose of Disbursement Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 08/15/2000	Amount of Each Disbursement This Period 73.00
Full Name, Mailing Address, and ZIP Code Jeff Jaynes P.O. Box 595 Catoosa OK 74016-0595		Purpose of Disbursement Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 08/16/2000	Amount of Each Disbursement This Period 567.62
Full Name, Mailing Address, and ZIP Code Brad Luna Rt. 2, Box 298 Wagoner OK 74467		Purpose of Disbursement Campaign consulting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 08/16/2000	Amount of Each Disbursement This Period 850.00
Full Name, Mailing Address, and ZIP Code Brad Luna Rt. 2, Box 298 Wagoner OK 74467		Purpose of Disbursement Reimburse mileage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 08/16/2000	Amount of Each Disbursement This Period 123.25
Full Name, Mailing Address, and ZIP Code Mailboxes, Etc. 8210 E. 71st Tulsa OK 74133		Purpose of Disbursement Copies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 08/16/2000	Amount of Each Disbursement This Period 27.25
Full Name, Mailing Address, and ZIP Code Chebon Marshall P.O. Box 465 Norman OK 73070		Purpose of Disbursement Campaign consulting-Management Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 08/16/2000	Amount of Each Disbursement This Period 675.00
Full Name, Mailing Address, and ZIP Code Chebon Marshall P.O. Box 485 Norman OK 73070		Purpose of Disbursement Reimburse mileage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 08/16/2000	Amount of Each Disbursement This Period 1600.00
Full Name, Mailing Address, and ZIP Code NICE Communications 302 E. 10th St. Tulsa OK 74120		Purpose of Disbursement Phone rental Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 08/16/2000	Amount of Each Disbursement This Period 75.54
Full Name, Mailing Address, and ZIP Code U.S. Postmaster 320 SW 5th Oklahoma City OK 73102		Purpose of Disbursement Postage stamps Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 08/17/2000	Amount of Each Disbursement This Period 165.00
<b>SUBTOTALS</b> of Disbursements This Page (Optional) .....					
<b>TOTALS</b> This Period (last page this line number only) .....					

<b>SCHEDULE B</b>		<b>ITEMIZED DISBURSEMENTS</b>		Use separate schedule(s) for each category of the Detailed Summary Page	26 / 31
				FOR LINE NUMBER 17	
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.					
<b>NAME OF COMMITTEE (In Full)</b> Brad Carson for Congress					
Full Name, Mailing Address, and ZIP Code Michelle Whitaker Rt. 2, Box 298 Wagoner OK 74467		Purpose of Disbursement Reimburse supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 06/17/2000	Amount of Each Disbursement This Period 23.07
Full Name, Mailing Address, and ZIP Code Computerized Data Systems 3200 S. Ann Arbor Oklahoma City OK 73138		Purpose of Disbursement Direct Mail Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 08/16/2000	Amount of Each Disbursement This Period 10867.72
Full Name, Mailing Address, and ZIP Code Fred A. Gibson Rt. 4, Box 108 Tahlequah OK 74464		Purpose of Disbursement In-kind cont. radio spots Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 08/18/2000	Amount of Each Disbursement This Period 673.02
Full Name, Mailing Address, and ZIP Code Chebon Marshall P.O. Box 485 Norman OK 73070		Purpose of Disbursement Reimburse Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 08/18/2000	Amount of Each Disbursement This Period 300.00
Full Name, Mailing Address, and ZIP Code Kinko's 4014 S. Yale Tulsa OK 74135		Purpose of Disbursement Copies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 08/20/2000	Amount of Each Disbursement This Period 121.00
Full Name, Mailing Address, and ZIP Code Mathross, Etc. 8210 E. 71st Tulsa OK 74133		Purpose of Disbursement Copies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 08/20/2000	Amount of Each Disbursement This Period 3.00
Full Name, Mailing Address, and ZIP Code Billy Collins P.O. Box 1327 Claremore OK 74018		Purpose of Disbursement Music for event Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 08/23/2000	Amount of Each Disbursement This Period 300.00
Full Name, Mailing Address, and ZIP Code Office Depot 2010 S. Sheridan Tulsa OK 74112		Purpose of Disbursement Toner cartridge Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 08/23/2000	Amount of Each Disbursement This Period 105.74
Full Name, Mailing Address, and ZIP Code Office Depot 2010 S. Sheridan Tulsa OK 74112		Purpose of Disbursement Office supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 08/23/2000	Amount of Each Disbursement This Period 29.88
<b>SUBTOTALS</b> of Disbursements This Page (Optional) .....					
<b>TOTALS</b> This Period (last page this line number only) .....					



<b>SCHEDULE B</b>		<b>ITEMIZED DISBURSEMENTS</b>		Use separate schedule(s) for each category of the Detailed Summary Page	28 / 31
					FOR LINE NUMBER 17
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 contributors from such committee.					
<b>NAME OF COMMITTEE (In Full)</b> Brad Carson for Congress					
Full Name, Mailing Address, and ZIP Code AJY Design P.O. Box 202 Newcastle OK 73065		Purpose of Disbursement Website design Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 08/30/2008	Amount of Each Disbursement This Period 325.00
Full Name, Mailing Address, and ZIP Code AT&T P.O. Box 16720 Mesa AZ 85211-6720		Purpose of Disbursement Monthly mobile phone expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 08/30/2008	Amount of Each Disbursement This Period 1008.61
Full Name, Mailing Address, and ZIP Code Hamilton, Beattie & Staff, In- c. 306 1/2 Center St. 2nd Floor Fernandina Beach FL 32034		Purpose of Disbursement Survey research Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 08/30/2008	Amount of Each Disbursement This Period 4175.00
Full Name, Mailing Address, and ZIP Code Internal Revenue Service Service Center Austin TX 73301		Purpose of Disbursement Payroll taxes Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 08/30/2008	Amount of Each Disbursement This Period 210.76
Full Name, Mailing Address, and ZIP Code MCE Communications 302 E. 10th St. Tulsa OK 74120		Purpose of Disbursement Computer services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 08/30/2008	Amount of Each Disbursement This Period 75.54
Full Name, Mailing Address, and ZIP Code Newcourt, Inc. P.O. Box 827 Parippany NJ 07054		Purpose of Disbursement Computer rental Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 08/30/2008	Amount of Each Disbursement This Period 97.28
Full Name, Mailing Address, and ZIP Code Oklahoma Natural Gas P.O. Box 288828 Oklahoma City OK 73128		Purpose of Disbursement Utilities Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 08/30/2008	Amount of Each Disbursement This Period 13.70
Full Name, Mailing Address, and ZIP Code Suttons Mill 442 New Jersey Ave., SE, #250 Washington DC 20003		Purpose of Disbursement Consulting-Strategy Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 08/30/2008	Amount of Each Disbursement This Period 1500.00
<b>SUBTOTALS of Disbursements This Page (Optional)</b>					
<b>TOTALS This Period (last page this line number only)</b>					<b>144785.03</b>

<b>SCHEDULE B</b>	<b>ITEMIZED DISBURSEMENTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	29 / 31
			FOR LINE NUMBER 19A

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)**  
**Brad Carson for Congress**

<b>Full Name, Mailing Address, and ZIP Code</b> Brad Carson  1029 N. Rutter Rd.  Claremore OK 74017	<b>Purpose of Disbursement</b> Loan paid in full	<b>Date (month, day, year)</b> 08/03/2000	<b>Amount of Each Disbursement This Period</b> 35000.00
	<b>Disbursement for:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		

Empty area for additional disbursement entries
--

<b>SUBTOTALS of Disbursements This Page (Optional)</b> .....	
<b>TOTALS This Period (last page this line number only)</b> .....	<b>35000.00</b>

<b>SCHEDULE C</b>		<b>LOANS</b>		30 / 31
(Revised 3/00)		Use separate schedule(s) for each numbered line		FOR LINE NUMBER 10
<b>NAME OF COMMITTEE (in Full)</b> Brad Carson for Congress				
Full Name, Mailing Address, and ZIP Code of Loan Source Brad Carson 1023 N. Rutter Rd.  Claremore OK 74017 Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Original Amount of Loan  93863.59  REF-ID: SC/10.2551	Cumulative Payment to Date  0.00	Balance Outstanding at Close of This Period  93863.59
TERMS: Date incurred: 06/04/2000 Date Due: 11/14/00 Interest Rate(%) = 10% <input checked="" type="checkbox"/> Secured				
Full Name, Mailing Address, and ZIP Code of Loan Source Brad Carson 1023 N. Rutter Rd.  Claremore OK 74017 Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Original Amount of Loan  35000.00  REF-ID: SC/10.2042	Cumulative Payment to Date  35000.00	Balance Outstanding at Close of This Period  0.00
TERMS: Date incurred: 06/29/2000 Date Due: 12/31/00 Interest Rate(%) = 0% <input type="checkbox"/> Secured				
<b>SUBTOTALS</b> This Period This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				<b>93863.59</b>

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-1  
Federal Election Commission  
Washington, D.C. 20463

Supplementary for information  
found on Page 31 of Schedule C

LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

31 | 31

NAME OF COMMITTEE (IN FULL) <b>Brad Carson For Congress</b>	REC IDENTIFICATION NUMBER <b>C00343616</b>	
FULL NAME, MAILING ADDRESS AND ZIP CODE OF LENDING INSTITUTION (LENDER) <b>Bank One, Oklahoma, N.A. 5307 E. 41st Street Tulsa, OK 74135</b>	AMOUNT OF LOAN <b>\$100,000</b>	INTEREST RATE (APR) <b>10%</b>
	DATE INCURRED OR ESTABLISHED <b>August 3, 2000</b>	DATE DUE <b>Nov. 14, 2000</b>

A. Has loan been restructured?  No  Yes If yes, date originally incurred: \_\_\_\_\_

B. If line of credit, amount of this draw: **\$93,863.59**; total outstanding balance: **\$93,863.59**

C. Are other parties secondarily liable for the debt incurred?  
 No  Yes (Endorsers and guarantors must be reported on Schedule C.) **Julia Carson**

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?  
 No  Yes If yes, specify: **CD, Real Estate (221 E. 4th St.)**

What is the value of this collateral? **\$30,000 (CD); \$195,000 (Real Estate)**

Does the lender have a perfected security interest in it?  No  Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan?

No  Yes If yes, specify: \_\_\_\_\_ What is the estimated value? \_\_\_\_\_

A depository account must be established pursuant to 11 CFR 100.7(b)(11)(i)(B) and 100.8(b)(12)(i)(B). Date account established: **8/3/2000** Location of account: **Bank One, OK, N.A.**

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.

G. COMMITTEE TREASURER	DATE
TYPED NAME <b>Julie K. Carson</b>	<b>9/1/2000</b>
SIGNATURE <b>Julie K. Carson</b>	

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:

- To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.
- The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.
- This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.7(b)(11) and 100.8(b)(12) in making this loan.

AUTHORIZED REPRESENTATIVE	TITLE	DATE
<b>Laurissa J. Anderson</b>	<b>Sr. Vice President Private Banking Bank One, Oklahoma, N.A.</b>	<b>9/1/2000</b>
TYPED NAME	SIGNATURE <b>Laurissa J. Anderson</b>	

**BANK ONE PRESTIGE LINE OF CREDIT <sup>SM</sup>  
AGREEMENT AND DISCLOSURE STATEMENT**

Principal	Loan Date	Maturity	Loan No	Call	Collateral	Account	Office	Initials
\$100,000.00	08-02-2000						0197	

References in the shaded area are for Lender's use only and do not limit the applicability of this document to any particular loan or item.

**Borrower:** BRAD R. CARSON  
JULIE K. CARSON  
221 E. 4TH STREET  
CLAREMORE, OK 74017

**Lender:** Bank One, Oklahoma, N.A.  
Private Banking Group/Second Floor  
5307 East 41st Street  
Tulsa, OK 74135

**CREDIT LIMIT: \$100,000.00**
**Date of Agreement: August 2, 2000**

**Introduction.** This BANK ONE PRESTIGE LINE OF CREDIT AGREEMENT AND DISCLOSURE STATEMENT ("Agreement") governs your line of credit (the "Credit Line" or the "Credit Line Account") issued through Bank One, Oklahoma, N.A.. In this Agreement, the words "Borrower," "you," "your," and "Applicant" mean each and every person who signs this Agreement, or any person using the Credit Line or related cards with the express or implied permission of any Borrower, including all Borrowers named above. The words "we," "us," "our," and "Lender" mean Bank One, Oklahoma, N.A.. The word "Checks" means access checks issued and "Card" means the VISA card that may be issued to you in connection with this Credit Line Account. NOTE: Not all Bank One banks issue Cards. You agree to the following terms and conditions:

**Promise to Pay.** You promise to pay Bank One, Oklahoma, N.A., or order, the total of all credit advances and FINANCE CHARGES and other charges, together with all costs and expenses for which you are responsible under this Agreement or under the "Assignment of Deposit Account" which secures your Credit Line. You will pay your Credit Line according to the payment terms set forth below. You promise to pay for all purchases and advances made by you or any authorized person, even if that person exceeds your authority. If there is more than one Borrower, each is jointly and severally liable on this Agreement. This means we can require any one of you to pay all amounts due under this Agreement, including credit advances made to any of you. Each Borrower authorizes any other Borrower, on his or her signature alone, to cancel the Credit Line, to request and receive credit advances, and to do all other things necessary to carry out the terms of this Agreement. We can release any of you from responsibility under this Agreement, and the others will remain responsible.

**Minimum Payment.** Your "Regular Payment" will be unpaid FINANCE CHARGES plus fees and charges. Your "Minimum Payment" will be your Regular Payment plus all amounts past due, any voluntary credit life and disability insurance premiums, and all other charges. You agree to pay not less than the Minimum Payment on or before the due date indicated on your periodic billing statement. This monthly payment will not fully repay the principal that is outstanding on this account and you will be required to pay the entire outstanding balance in a single payment upon termination of this account.

**Application of Payments.** Unless otherwise agreed or required by applicable law, payments and other credits will be applied in the following order: to (a) FINANCE CHARGES; and (b) unpaid principal.

**Term.** The term of your Credit Line will begin as of the date of this Agreement ("Opening Date") and will continue until one year from the Opening Date. Unless renewed by us for additional one year term(s), this Agreement and any obligations of Lender to extend additional credit hereunder shall terminate one year from the Opening Date, at which time the entire principal balance outstanding together with all unpaid FINANCE CHARGES shall be due and payable in full.

**Receipt of Payments.** All payments must be made by a check, money order, or other instrument in U.S. dollars and must be mailed to us at the remittance address shown on your periodic billing statement. Payments received at that address on any business day will be credited to your Credit Line as of the date received. If we receive payments at other locations, such payments will be credited promptly to your Credit Line, but crediting may be delayed for up to five (5) days after receipt.

**Credit Limit.** This Agreement covers a revolving line of credit for One Hundred Thousand & 00/100 Dollars (\$100,000.00), which will be your initial "Credit Limit" under this Agreement. We may, at our option, adjust the Credit Limit from time to time. You may borrow against the Credit Line, repay any portion of the amount borrowed, and re-borrow up to the amount of the Credit Limit. Your Credit Limit is the maximum amount you may have outstanding at any one time. Our obligation to make credit advances under this Agreement is obligatory and the Assignment of Deposit Account will secure your obligation to pay, up to your Credit Limit plus any overage, your outstanding balance from time to time. The balance on your Credit Line may go up to your Credit Limit and down to zero, and fluctuate in between, as credit advances are made and payments are received, and at all times be secured by the Assignment of Deposit Account. The Assignment of Deposit Account will be initially limited to the Credit Limit (plus FINANCE CHARGES, any overage, and charges), but if your Credit Limit is changed, the Assignment of Deposit Account will secure your obligation to pay the amended Credit Limit. For the purpose of our obligation to make advances under this Agreement, for an event to be considered as modifying that obligation, it must constitute a significant threat to the prospect of payment, to the security, or the feasibility of this Agreement, and we must notify you of that determination, which determination will be final, or we must demand payment in full of all amounts you then owe. If we waive our right to and our obligation under this Agreement or to demand immediate payment in full for a particular default, this Agreement shall be considered to continue and the obligation to make credit advances shall be obligatory in accordance with its terms. You agree not to attempt, request, or obtain a credit advance that will make your Credit Line Account balance exceed your Credit Limit. Your Credit Limit will not be increased should you overdraw your Credit Line Account. If you exceed your Credit Limit, you agree to repay immediately the amount by which your Credit Line Account exceeds your Credit Limit, even if we have not yet billed you. We may at our option refuse credit advances for so long as the balance due exceeds your Credit Limit. Any amount greater than the Credit Limit will be secured by the Assignment of Deposit Account covering your property.

**Charges to Your Credit Line.** We may charge your Credit Line to pay fees and costs that you are obligated to pay under this Agreement or under any other document related to your Credit Line. Any amount so charged to your Credit Line will be a credit advance and will decrease the funds available, if any, under the Credit Line. However, we have no obligation to provide any of the credit advances referred to in this paragraph. If you have elected to purchase credit life insurance, we may charge your Credit Line each month for credit life insurance premiums as they become due. Each month the insurance charge that will be added to the principal balance on your Account will be calculated by multiplying the average daily balance by the premium option you have selected. The premium will be included as a regular purchase and will be added to the principal balance upon which we will earn interest at the rate set forth herein. We have the right to charge the premium rate by giving you notice of this action sixty (60) days prior to the effective date. The new rate will apply only to the charges for insurance made after the date of the rate change.

**Credit Advances.** You may obtain credit advances under your Credit Line as follows:

- Writing a preprinted "Credit Line Check" that we will supply to you.
- Requesting a credit advance in person at any of our authorized locations.
- Using your Card to make purchases of goods and services from businesses that accept the Card, to obtain cash advances from all financial institutions and automated teller machines that accept the Card.

If your Credit Line Account is a joint account, you and the joint holder agree that each is the agent for the other account holder for purposes of requesting Credit Line increases.

**Prestige Line of Credit Checks.** Your Credit Line Account may be accessed by special Checks provided by us. You will receive these Credit Line Checks imprinted with your account number and may use them in the same manner as a regular checking account. The amount of each Check will be treated as credit advances when posted to your Credit Line Account. Except as otherwise provided in this Agreement, checks will be subject to all laws normally applicable to negotiable instruments governed by the Oklahoma Uniform Commercial Code.

**Limitations on the Use of Credit Line Checks.** We reserve the right not to honor Credit Line Checks in the following circumstances:

- Your Credit Limit has been or would be exceeded by paying the Credit Line Check.
- Your Credit Line Check is post-dated. If a post-dated Credit Line Check is paid and as a result any other check is returned or not paid, we are not responsible.
- Your Credit Line Checks or Card have been reported lost or stolen.



choose not to return Credit Line Checks along with your periodic billing statements; however, we will make available to you, upon request, any paid Credit Line Check or a copy thereof for at least six years after the date of the statement reflecting payment of the Credit Line Check. We do not "certify" Credit Line Checks drawn on your Credit Line. We have no responsibility for the refusal of any merchants, banks or others to honor the Credit Line Checks or other access devices, or for any goods or services purchased through the use of your Credit Line Account.

**Loan Credit Line Checks or Card.** If you lose your Credit Line Checks and/or Card(s) or someone is using them without your permission, you agree to let us know immediately by calling us at 18001 793-8276. You can also notify us at our address shown at the beginning of this Agreement.

**Prohibited Uses.** You agree not to use any Credit Line credit advances to make payments on your Credit Line or to obtain advances when you are insolvent. You further agree not to use any Credit Line credit advances to finance or refinance the purchase of a one-to-four family dwelling, if the advances are secured by a lien on that dwelling.

**Future Credit Line Features.** Your application for this Credit Line also serves as a request to receive any new services (such as access devices) which may be available at some future time as one of our services in connection with this Credit Line. You understand that this request is voluntary and that you may refuse any of these new services at the time they are offered. You further understand that the terms and conditions of this Agreement, together with any specific terms covering the new service, will govern any transactions made pursuant to any of these new services.

**Security Requirements.** For this Credit Line, we require security in the form of a Assignment of Deposit Account on OUR CD. You agree to the terms of the Assignment of Deposit Account, all of the terms and conditions of which are incorporated by reference in this Agreement.

**Periodic Statements.** If you have a balance owing on your Credit Line Account or have any account activity, we will send you a periodic statement. It will show, among other things, credit advances, FINANCE CHARGES, other charges, payments made, other credits, your "Previous Balance," and your "New Balance." Your statement also will identify the Minimum Payment you must make for that billing period and the date it is due.

**When FINANCE CHARGES Begin to Accrue.** Periodic FINANCE CHARGES for credit advances under your Credit Line will begin to accrue on the date credit advances are posted to your Credit Line. There is no "free ride period" which would allow you to avoid a FINANCE CHARGE on your Credit Line credit advances.

**Method Used to Determine the Balance on Which the FINANCE CHARGE Will Be Computed.** FINANCE CHARGES will be incurred on the Daily Principal Balances of all credit advances made hereunder from the date such transactions are posted to the Credit Line Account until payment in full is entered to the Account. FINANCE CHARGES are determined by multiplying your Daily Principal Balances during the statement period by the daily Periodic Rate as described below. The Daily Principal Balance is the amount of principal (excluding unpaid FINANCE CHARGES and fees) outstanding at the end of each day during the statement period.

**Method of Determining the Amount of FINANCE CHARGE.** Any FINANCE CHARGE is determined by applying the "Periodic Rate" to the balance described above. Then we add the periodic FINANCE CHARGES for each day in the billing cycle. This is your FINANCE CHARGE calculated by applying a Periodic Rate. You also agree to pay FINANCE CHARGES, not calculated by applying a Periodic Rate, as set forth below:

**Additional Finance Charges.** The following additional FINANCE CHARGES will be charged to your Credit Line or paid in cash:

**ORIGINATION:**

In Cash \$75.00

**Periodic Rate and Corresponding ANNUAL PERCENTAGE RATE.** The Periodic Rate and the corresponding ANNUAL PERCENTAGE RATE on your Credit Line are subject to change from time to time based on changes in an index which is the BANK PRIME LOAN RATE as published by Board of Governors of the Federal Reserve System (the "Index"). The interest rate on this Note is subject to change from time to time based on changes in an index which is the BANK PRIME LOAN RATE as published by the Board of Governors of the Federal Reserve System (the "Index"). BANK PRIME LOAN RATE means the average weekly Bank Prime Loan Rate as published by the Board of Governors of the Federal Reserve System for the week which includes the 15th of the month. The ANNUAL PERCENTAGE RATE on your Credit Line is based upon the Index and the margin described below ("Margin").

The Periodic Rate and the corresponding ANNUAL PERCENTAGE RATE on your Credit Line will increase or decrease as the Index increases or decreases from time to time. We will determine the Periodic Rate and the corresponding ANNUAL PERCENTAGE RATE as follows: We start with the current Index and then add a certain Margin as disclosed below. To obtain the Periodic Rate, we divide that sum by the number of days in a year (daily). To obtain the ANNUAL PERCENTAGE RATE we multiply the Periodic Rate by the number of days in a year (daily). This rate is subject, however, to the following maximum rate. In no event will the ANNUAL PERCENTAGE RATE be more than the lesser of 21.000% per annum or the maximum rate allowed by applicable law. Adjustments to the Periodic Rate and the corresponding ANNUAL PERCENTAGE RATE resulting from changes in the Index will take effect month to month. Today the Index is 9.500% per annum, and therefore the initial ANNUAL PERCENTAGE RATE and the corresponding Periodic Rate on your Credit Line are as stated below:

Range of Balances or Conditions	Margin Added to Index	ANNUAL PERCENTAGE RATE	Daily Periodic Rate
All Balances	0.500 %	10.000 %	0.02740 %

Notwithstanding any other provision of this Agreement, we will not charge interest on any unadvanced portion of the Credit Line. It is understood that under no circumstances will the total amount of FINANCE CHARGES computed over the entire term of this Agreement exceed any applicable statutory maximum.

**Conditions Under Which Other Charges May be Imposed.** To the extent permitted by applicable law, we will charge and you agree to pay all the other fees and charges related to your Credit Line as set forth below:

**Returned Items.** You may be charged \$10.00 if you pay your Credit Line obligations with a check, draft, or other item that is dishonored for any reason, unless applicable law requires a lower charge or prohibits any charge.

**Credit Line Check Printing Charge.** Your Credit Line Account may be charged for check printing. This charge may vary.

**Other Charges.** Your Credit Line Account may be charged the following other charges: Late Charges. Your payment will be late if it is not received by us within 11 days of the "Payment Due Date" shown on your periodic statement. If your payment is late we may charge you 5.000% of the payment amount or \$16.00, whichever is greater.

**Right to Credit Advances.** We will honor your requests for credit advances up to your Credit Limit so long as: (a) you are not in default under the terms of this Agreement; (b) this Agreement has not been terminated or suspended; and (c) your Credit Line has not been cancelled as provided above in the section of this Agreement titled "Term."

**Default.** We may declare you to be in default if any one or more of the following events occur: (a) any of you fail to pay any payment when due; (b) an event of default occurs under the Assignment of Deposit Account; (c) the Property is further encumbered in any way, voluntarily or involuntarily; (d) any of you die; (e) any of you make any false or misleading statements on your Credit Line application; (f) any of you violate any provision of this Agreement or any other agreement with us; (g) any garnishment, attachment, or execution is issued against any material asset owned by any of you; (h) any of you exceed your Credit Limit; (i) any of you file for bankruptcy or other insolvency relief, or an involuntary petition under the provisions of the Federal Bankruptcy Act is filed against any of you; or (j) any of you fail to furnish us within thirty (30) days after written request current financial statements in form satisfactory to us.

**Lender's Rights.** If you are in default, we may terminate or suspend your Credit Line Account without prior notice. However, subject to limitations because our obligation to make advances is obligatory, we will notify you in writing of our action as soon as practicable.

(a) **Suspension.** If we suspend your Credit Line, you will lose the right to obtain further credit advances. However, all other terms of this Agreement will remain in effect and be binding upon you, including your liability for any further unauthorized use of any Credit Line access devices.

(b) **Termination.** If we terminate your Credit Line, your Credit Line will be suspended and the entire unpaid balance of your Credit Line Account will be immediately due and payable, without prior notice except as may be required by law, and you agree to pay that amount plus all FINANCE CHARGES and other amounts due under this Agreement.

(c) **Collection Costs.** We may hire or pay someone else who is not our salaried employee to help collect your Credit Line Account. If you co-

access devices. Any use of Credit Line Checks or other access devices following suspension or termination may be considered fraudulent. You will also remain liable for any further use of Credit Line Checks or other Credit Line access devices not returned to us.

**Delay in Enforcement.** We may accept late payments, partial payments or payments marked "payment in full" without losing any of our rights under this Agreement. The waiver of any of our rights and remedies at any time will not mean that we have given up or lost the right to exercise any of our rights and remedies at any later time. We may delay in enforcing any of our rights and remedies under this Agreement without losing them. Failure by us to assert any of our rights shall not waive such rights. We may also take any collection action allowed by law.

**Termination.** If you terminate this Agreement, you must notify us in writing upon termination, and you must return all Credit Line Checks and any other access devices to us. Merely paying your Credit Line in full, without an accompanying written notice, will not be a termination. Despite termination, your obligations under this Agreement will remain in full force and effect until you have paid us all amounts due under this Agreement. If more than one person has signed this Agreement, cancellation of the Credit Line Account by one signor of the Agreement shall cancel the Credit Line Account for all persons on the Account. Use of the Credit Line Account after termination or notice of cancellation is fraudulent and you may be subject to legal proceedings.

**Prepayment.** You may prepay all or any amount owing under this Credit Line at any time without penalty except as provided in this Agreement and except that we will be entitled to receive all accrued FINANCE CHARGES, and other charges, if any. Payments in excess of your Minimum Payment will not release you of your obligation to continue to make your Minimum Payments. Instead, they will reduce the principal balance owed on the Credit Line.

**Notices.** All notices will be sent to your address as shown in your Credit Line application. Notices will be mailed to you at a different address if you give us written notice of a different address. You agree to advise us promptly if you change your mailing address. If we are required to give you notice before or after performing certain duties that are your responsibility under this Agreement and that we may and did perform because of your failure to do so, you agree that notice mailed to you by regular mail (us 15) days before or delivered to you two (2) days before we take action is sufficient and that notice given within two (2) billing cycles after we take action is reasonable.

**Annual Review.** You agree that you will provide us with a current financial statement, a new credit application, or both, annually, on forms provided by us. Based upon this information we will conduct an annual review of your Credit Line Account. You also agree we may obtain credit reports on you at any time, at our sole option for any reason, including but not limited to determining whether there has been an adverse change in your financial condition. We may require a new appraisal of the Property which secures your Credit Line at any time, including an internal inspection, at our sole option. You agree to reimburse us for any costs we incur in connection with the annual review. You authorize us to release information to others (such as credit bureaus, merchants, and other financial institutions) about the status and history of your Credit Line Account. Based upon a material adverse change in your financial condition (such as termination of employment or loss of income), we may suspend your Credit Line.

**Transfer or Assignment.** Without prior notice or approval from you, we reserve the right to sell or transfer your Credit Line Account to another lender, entity, or person, and to assign our rights under this Agreement and the Assignment of Deposit Account. Your rights under this Agreement belong to you only and may not be transferred or assigned. Your obligations, however, are binding on your heirs and legal representatives.

**Foreign Transactions.** Bank One will charge the Borrower with pay, in U.S. dollars for all foreign transactions at the exchange rate in effect at the time the transaction is entered on Borrower's Bank One Credit Line Account, including any special currency exchange charges.

**Governing Law.** This Agreement will be governed by federal law and by the laws of the State of Oklahoma. The Credit Line which is the subject of this Agreement has been applied for, considered, approved, and made in the State of Oklahoma.

**Interpretation.** The names given to paragraphs or sections in this Agreement are for convenience purposes only. They are not to be used to interpret or define the provisions of this Agreement. You agree that this Agreement, together with the Assignment of Deposit Account, is the best evidence of your agreements with us. If a court finds that any provision of this Agreement is not valid or should not be enforced, that fact by itself will not mean that the rest of this Agreement may be found to be invalid or unenforceable. If we go to court for any reason, we can use this Agreement even if a provision of this Agreement may be found to be invalid or unenforceable. If we go to court for any reason, we can use a copy, filmed or electronic, of any periodic statement, this Agreement, the Assignment of Deposit Account, or any other documents to prove what you owe us or that a transaction has taken place. The copy, microfilm, microfiche, or optical image will have the same validity as the original. You agree that, except to the extent you can show there is a billing error, your most current periodic billing statement is the best evidence of your obligation to pay.

**IMPORTANT INFORMATION SHARING NOTICE.** Lender shares information regarding transactions and experiences about you and your account with other BANK ONE CORPORATION ("BANK ONE") companies. We may also share other information such as employment and credit history, information on your applications, information involving other BANK ONE relationships and any other information among BANK ONE companies. You have the right to prohibit sharing this other information to the extent permitted by the Fair Credit Reporting Act ("FCRA"). If you would like to exercise this right, please write to us at BANK ONE, FCRA Opt-Out, P.O. Box 102793, Columbus, Ohio 43218-2793, and include your name, social security number, account number, telephone number, and sign and date your correspondence. If your account is a joint account, each joint account owner that desires to opt out must provide the above information including their signature. You may receive additional notices of your right to opt out, but you only need to respond once to exercise this right.

**Acknowledgment and Amendments.** You understand and agree to the terms and conditions in this Agreement. You acknowledge that, subject to applicable laws, we have the right to change the terms and conditions of the Credit Line program, including without limitation the Margin. If we change the Periodic Rate and subsequent new credit advances are made under this Agreement, the entire balance will be subject to the new rates. You also understand and agree that you may be subject to other agreements with us regarding transfer instruments or access devices which may access your Credit Line. Any person signing below may request a modification to this Agreement, and, if granted, the modification will be binding upon all signers. By signing this Agreement, you acknowledge that you have read this Agreement. You also acknowledge receipt of a copy of this Agreement, including the Fair Credit Billing Notice.

**Entire Agreement.** This Agreement is intended by Lender and you as a final expression of this Agreement and as a complete and exclusive statement of its terms, there being no conditions to the enforceability of this Agreement. This Agreement may not be supplemented or modified except in writing.

This Agreement is dated August 2, 2000.

**BORROWER:**  
X COPY \_\_\_\_\_ X \_\_\_\_\_  
BRAD R. CARSON JULIE K. CARSON

**NOTICE TO COSIGNER**

You are being asked to guarantee this debt. Think carefully before you do. If the borrower doesn't pay the debt, you will have to. Be sure you can afford to pay if you have to, and that you want to accept this responsibility. You may have to pay up to the full amount of the debt if the borrower does not pay. You may also have to pay late fees or collection costs, which increase this amount. The creditor can collect this debt from you without first trying to collect from the borrower. The creditor can use the same collection methods against you that can be used against the borrower, such as suing you, garnishing your wages, etc. If this debt is ever in default, that fact may become a part of YOUR credit record.

## YOUR BILLING RIGHTS

## KEEP THIS NOTICE FOR FUTURE USE

This notice contains important information about your rights and our responsibilities under the Fair Credit Billing Act.

**Notify us in case of errors or questions about your bill.**

If you think your bill is wrong, or if you need more information about a transaction on your bill, write us on a separate sheet at 6302 East 41st Street, Tulsa, OK 74135 or at the address listed on your bill. Write to us as soon as possible. We must hear from you no later than sixty (60) days after we send you the first bill on which the error or problem occurs. You can telephone us, but doing so will not preserve your rights.

In your letter, give us the following information:

Your name and account number.

The dollar amount of the suspected error.

Describe the error and explain, if you can, why you believe there is an error. If you need more information, describe the item you are not sure about.

If you have authorized us to pay your bill automatically from your savings or checking account, you can stop the payment on any amount you think is wrong. To stop the payment, your letter must reach us three (3) business days before the automatic payment is scheduled to occur.

**Your rights and our responsibilities after we receive your written notice.**

We must acknowledge your letter within thirty (30) days unless we have corrected the error by then. Within ninety (90) days, we must either correct the error or explain why we believe the bill was correct.

After we receive your letter, we cannot try to collect any amount you question, or report you as delinquent. We can continue to bill you for the amount you question, including finance charges, and we can apply any unpaid amount against your Credit Limit. You do not have to pay any questioned amount while we are investigating, but you are still obligated to pay the parts of your bill that we are not in question.

If we find that we made a mistake on your bill, you will not have to pay any finance charges related to any questioned amount. If we didn't make a mistake, you may have to pay finance charges and you may have to make up any missed payments on the questioned amount. In either case, we will send you a statement of the amount you owe and the date on which it is due.

If you fail to pay the amount that we think you owe, we may report you as delinquent. However, if our explanation does not satisfy you and you write to us within ten (10) days telling us that you still refuse to pay, we must tell anyone we report you to that you have a question about your bill. And, we must tell you the name of anyone we reported you to. We must tell anyone we report you to that the matter has been settled between us when it finally is.

**Special rules for credit account card purchases.**

If you have a problem with the quality of property or services that you purchased with a Credit Card, and you have tried in good faith to contact the problem with the merchant, you may have the right not to pay the remaining amount due on the property or services. There are two limitations on this right:

- (a) You must have made the purchases in your home state or, if not within your home state, within 100 miles of your current mailing address;
- (b) The purchase price must have been more than \$50.

These limitations do not apply if we own or operate the merchant, or if we mailed you the advertisement for the property or services.

If we don't follow these rules, we can't collect the first \$50 of the questioned amount, even if your bill was correct.

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other ( Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>JMU</i> PREPARER	<i>9-11-02</i> DATE PREPARED