

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

SECRETARY OF THE SENATE

14 JUL 18 AM 10:39 Office Use Only

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

Brogdon for U.S. Senate

12FE4M5

ADDRESS (number and street)

5103 S Sheridan Rd #270

Check if different than previously reported. (ACC)

Tulsa

OK

74145

2. FEC IDENTIFICATION NUMBER

C00557132

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT NEW OR AMENDED

X

NEW (N)

OR

AMENDED (A)

OK

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

X July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

MM/DD/YYYY

in the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

MM/DD/YYYY

in the State of

5. Covering Period

06/05/2014

through

06/30/2014

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 Lindsey Lewis

Signature of Treasurer

[Handwritten Signature]

Date

07/15/2014

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

14020620469

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Brogdon for U.S. Senate**

Report Covering the Period: From:

MM / DD / YYYY  
06 / 05 / 2014

To:

MM / DD / YYYY  
06 / 30 / 2014

**COLUMN A**  
**This Period**

**COLUMN B**  
**Election Cycle-to-Date**

**6. Net Contributions (other than loans)**

(a) Total Contributions  
(other than loans) (from Line 11(e)) ..

3045

161953.5

(b) Total Contribution Refunds  
(from Line 20(d)) ..

49000

50000

(c) Net Contributions (other than loans)  
(subtract Line 6(b) from Line 6(a))...

-45955

111953.5

**7. Net Operating Expenditures**

(a) Total Operating Expenditures  
(from Line 17) ..

18319.08

102876.4

(b) Total Offsets to Operating  
Expenditures (from Line 14)...

27.05

(c) Net Operating Expenditures  
(subtract Line 7(b) from Line 7(a))...

18319.08

102849.35

**8. Cash on Hand at Close of  
Reporting Period (from Line 27)...**

9104.15

**9. Debts and Obligations Owed TO  
the Committee (Itemize all on  
Schedule C and/or Schedule D)...**

**10. Debts and Obligations Owed BY  
the Committee (Itemize all on  
Schedule C and/or Schedule D)...**

9335.47

**For further information contact:**

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

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

14020620470

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 26

Write or Type Committee Name  
**Brogdon for U.S. Senate**

Report Covering the Period: From: 

M	M	/	D	D	/	Y	Y	Y	Y
06	05	/			/	2014			

 To: 

M	M	/	D	D	/	Y	Y	Y	Y
06	30	/			/	2014			

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)...	1050	144455
(ii) Unitemized .....	1995	17498.5
(iii) TOTAL of contributions from individuals .	3045	161953.5
(b) Political Party Committees...		
(c) Other Political Committees (such as PACs)...		
(d) The Candidate .....		
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	3045	161953.5
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..</b>		
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate...		
(b) All Other Loans...		
(c) TOTAL LOANS (add Lines 13(a) and (b))...		
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) ..</b>		
		27.05
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>		
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...</b>	3045	161980.55

14020620471

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES...	18319.08	102876.4
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...		
(b) Of All Other Loans .....		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees ...	49000	50000
(b) Political Party Committees...		
(c) Other Political Committees (such as PACs)...		
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))...	49000	50000
21. OTHER DISBURSEMENTS ...		
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	67319.08 ✓	152876.4

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	73378.23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	3045
25. SUBTOTAL (add Line 23 and Line 24)...	76423.23
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	67319.08
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	9104.15

14020620472

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 5 OF 26

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Brogdon for U.S. Senate**

<b>A.</b> Full Name (Last, First, Middle Initial) Rex H Eagan			Date of Receipt MM / DD / YYYY 06 / 06 / 2014		
Mailing Address 9816 N 2220 Rd			Transaction ID : SA11AI-CN18019		
City	State	Zip Code	Amount of Each Receipt this Period		
Arapaho	OK	73620	250		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period		
Name of Employer Self-Employed			Occupation Farmer - Rancher		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			Election Cycle-to-Date 650		
<b>B.</b> Full Name (Last, First, Middle Initial) Connie Garrett			Date of Receipt MM / DD / YYYY 06 / 08 / 2014		
Mailing Address 14505 Valley View Dr			Transaction ID : SA11AI-CN18000		
City	State	Zip Code	Amount of Each Receipt this Period		
Skiatook	OK	74070	100		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period		
Name of Employer WSA Sales Company Inc.			Occupation General Manager		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			Election Cycle-to-Date 1100		
<b>C.</b> Full Name (Last, First, Middle Initial) Lowell L Lefebvre			Date of Receipt MM / DD / YYYY 06 / 14 / 2014		
Mailing Address 1275 S Enterprise Rd			Transaction ID : SA11AI-CN18025		
City	State	Zip Code	Amount of Each Receipt this Period		
Ponca City	OK	74604	200		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period		
Name of Employer Mertz Manufacturing LLC			Occupation Manager		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			Election Cycle-to-Date 400		
SUBTOTAL of Receipts This Page (optional).....			550.00		
TOTAL This Period (last page this line number only).....			550.00		

14020620473

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

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

FOR LINE NUMBER: PAGE 6 OF 26  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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NAME OF COMMITTEE (In Full)  
**Brogdon for U.S. Senate**

**A.** Full Name (Last, First, Middle Initial)  
**Hugh Haugherty Smith**

Mailing Address 1025 SW 22nd St

City Oklahoma City State OK Zip Code 73109

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

Name of Employer Self employed Occupation Self employed

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt [M M] / [D D] / [Y Y] [Y Y]  
06 / 14 / 2014

Transaction ID : SA11AI-CN18015

Amount of Each Receipt this Period  
500

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt [M M] / [D D] / [Y Y] [Y Y]

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt [M M] / [D D] / [Y Y] [Y Y]

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... 500.00

**TOTAL** This Period (last page this line number only)..... 1050.00

14020620474

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 26			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Brogdon for U.S. Senate**

Full Name (Last, First, Middle Initial) <b>A. MoreInformation.NET</b>		Date of Disbursement MM / DD / YYYY 06 / 05 / 2014
Mailing Address P.O. Box 1198		Amount of Each Disbursement this Period 1450.00 Transaction ID : SB17-EX166
City Forest	State VA	
Purpose of Disbursement Communication Consulting	Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Communication Consulting
State: District:		

Full Name (Last, First, Middle Initial) <b>B. MoreInformation.NET</b>		Date of Disbursement MM / DD / YYYY 06 / 25 / 2014
Mailing Address P.O. Box 1198		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17-EX202
City Forest	State VA	
Purpose of Disbursement Communication Consulting	Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Communication Consulting
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Vanco Services</b>		Date of Disbursement MM / DD / YYYY 06 / 05 / 2014
Mailing Address 12600 Whitewater Drive Suite 200		Amount of Each Disbursement this Period 14.20 Transaction ID : SB17-EX162
City Minnetonka	State MN	
Purpose of Disbursement Credit card/merchant fee	Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit card/merchant fee
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1964.20
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 26
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b
	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Brogdon for U.S. Senate**

Full Name (Last, First, Middle Initial) <b>A. Vanco Services</b>		Date of Disbursement MM / DD / YYYY 06 / 09 / 2014
Mailing Address 12600 Whitewater Drive Suite 200		Amount of Each Disbursement this Period 1.83 Transaction ID : SB17-EX163
City Minnetonka	State MN	
Purpose of Disbursement Credit card/merchant fee	Zip Code 55343	Credit card/merchant fee
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Vanco Services</b>		Date of Disbursement MM / DD / YYYY 06 / 10 / 2014
Mailing Address 12600 Whitewater Drive Suite 200		Amount of Each Disbursement this Period 6.40 Transaction ID : SB17-EX181
City Minnetonka	State MN	
Purpose of Disbursement Merchant/credit card fees	Zip Code 55343	Merchant/credit card fees
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Vanco Services</b>		Date of Disbursement MM / DD / YYYY 06 / 11 / 2014
Mailing Address 12600 Whitewater Drive Suite 200		Amount of Each Disbursement this Period 3.20 Transaction ID : SB17-EX182
City Minnetonka	State MN	
Purpose of Disbursement Merchant/Credit card fees	Zip Code 55343	Merchant/Credit card fees
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	11.43
<b>TOTAL</b> This Period (last page this line number only).....	

14020620476



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 26			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Brogdon for U.S. Senate**

Full Name (Last, First, Middle Initial) <b>A. Vanco Services</b>		Date of Disbursement MM / DD / YYYY 06 / 12 / 2014
Mailing Address 12600 Whitewater Drive Suite 200		Amount of Each Disbursement this Period 1.14 Transaction ID : SB17-EX173
City Minnetonka	State MN	
Purpose of Disbursement Merchant/credit card fees		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: _____	District: _____	Merchant/credit card fees

Full Name (Last, First, Middle Initial) <b>B. Vanco Services</b>		Date of Disbursement MM / DD / YYYY 06 / 14 / 2014
Mailing Address 12600 Whitewater Drive Suite 200		Amount of Each Disbursement this Period 7.78 Transaction ID : SB17-EX174
City Minnetonka	State MN	
Purpose of Disbursement Merchant/credit card fees		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: _____	District: _____	Merchant/credit card fees

Full Name (Last, First, Middle Initial) <b>c. Vanco Services</b>		Date of Disbursement MM / DD / YYYY 06 / 16 / 2014
Mailing Address 12600 Whitewater Drive Suite 200		Amount of Each Disbursement this Period 16.00 Transaction ID : SB17-EX187
City Minnetonka	State MN	
Purpose of Disbursement Merchant Fees		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: _____	District: _____	Merchant Fees

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	24.92
<b>TOTAL</b> This Period (last page this line number only).....	

14020620477

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 26			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Brogdon for U.S. Senate**

Full Name (Last, First, Middle Initial) <b>A. Vanco Services</b>		Date of Disbursement MM / DD / YYYY 06 / 17 / 2014
Mailing Address 12600 Whitewater Drive Suite 200		Amount of Each Disbursement this Period 15.34 Transaction ID : SB17-EX191
City Minnetonka	State MN	
Purpose of Disbursement Merchant/credit card fees		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State:	District:	Merchant/credit card fees

Full Name (Last, First, Middle Initial) <b>B. Vanco Services</b>		Date of Disbursement MM / DD / YYYY 06 / 23 / 2014
Mailing Address 12600 Whitewater Drive Suite 200		Amount of Each Disbursement this Period 4.84 Transaction ID : SB17-EX193
City Minnetonka	State MN	
Purpose of Disbursement Credit card/merchant fees		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State:	District:	Credit card/merchant fees

Full Name (Last, First, Middle Initial) <b>c. Vanco Services</b>		Date of Disbursement MM / DD / YYYY 06 / 24 / 2014
Mailing Address 12600 Whitewater Drive Suite 200		Amount of Each Disbursement this Period 5.95 Transaction ID : SB17-EX194
City Minnetonka	State MN	
Purpose of Disbursement Credit card/merchant fees		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State:	District:	Credit card/merchant fees

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	26.13
<b>TOTAL</b> This Period (last page this line number only).....	

14020620478

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 26

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

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NAME OF COMMITTEE (In Full)  
**Brogdon for U.S. Senate**

Full Name (Last, First, Middle Initial)

**A. Verizon Wireless**

Mailing Address PO Box 660108

City Dallas TX State TX Zip Code 75266

Purpose of Disbursement  
Cell phone service

Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President

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

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 13 / 2014

Amount of Each Disbursement this Period

158.77

Transaction ID : SB17-EX185

Cell phone service

**B. 5 Out LLC**

Mailing Address 4607 S Irvington Ave

City Tulsa State OK Zip Code 74135

Purpose of Disbursement  
See memo items below

Candidate Name

007  
Category/  
Type

Office Sought:  House  Senate  President

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

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 11 / 2014

Amount of Each Disbursement this Period

200.00

Transaction ID : SB17-EX179

See memo items below

**C. Oklahoma Federation Of Republican Women**

Mailing Address 11000 Friendly Ln

City Midwest City State OK Zip Code 73130

Purpose of Disbursement  
Event Fee

Candidate Name

007  
Category/  
Type

Office Sought:  House  Senate  President

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

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 11 / 2014

Amount of Each Disbursement this Period

200.00

Transaction ID : SB17-EX180

[MEMO ITEM]

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

358.77

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

14020620479

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 26			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Brogdon for U.S. Senate**

Full Name (Last, First, Middle Initial) <b>A. 5 Out LLC</b>		Date of Disbursement MM / DD / YYYY 06 / 13 / 2014
Mailing Address 4607 S Irvington Ave		Amount of Each Disbursement this Period 300.00 Transaction ID : SB17-EX176
City Tulsa	State OK	
Purpose of Disbursement See Memo Items Below		Category/ Type 007
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State:	District:	See Memo Items Below

Full Name (Last, First, Middle Initial) <b>B. William Sexauer</b>		Date of Disbursement MM / DD / YYYY 05 / 30 / 2014
Mailing Address 7721 South Memorial Dr #1102		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17-EX177
City Tulsa	State OK	
Purpose of Disbursement Speaker Rental for Event		Category/ Type 007
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State:	District:	[MEMO ITEM] Reimbursement reported on earlier filing: Speaker Rental for Event

Full Name (Last, First, Middle Initial) <b>c. Oklahoma County Republicans</b>		Date of Disbursement MM / DD / YYYY 06 / 13 / 2014
Mailing Address 4031 N. Lincoln Blvd.		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17-EX178
City Oklahoma City	State OK	
Purpose of Disbursement Event Tickets		Category/ Type 007
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State:	District:	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	300.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020620480

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 26			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Brogdon for U.S. Senate**

Full Name (Last, First, Middle Initial) <b>A. 5 Out LLC</b>		Date of Disbursement MM / DD / YYYY 06 / 18 / 2014
Mailing Address 4607 S Irvington Ave		Amount of Each Disbursement this Period 300.00 Transaction ID : SB17-EX195
City Tulsa	State OK	
Purpose of Disbursement See memo items below		Category/ Type 007
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State:	District:	See memo items below

Full Name (Last, First, Middle Initial) <b>B. Susan Landers</b>		Date of Disbursement MM / DD / YYYY 06 / 18 / 2014
Mailing Address 1021 W 7th Street		Amount of Each Disbursement this Period 300.00 Transaction ID : SB17-EX207
City Tulsa	State OK	
Purpose of Disbursement Catering		Category/ Type 007
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State:	District:	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. 5 Out LLC</b>		Date of Disbursement MM / DD / YYYY 06 / 25 / 2014
Mailing Address 4607 S Irvington Ave		Amount of Each Disbursement this Period 5000.00 Transaction ID : SB17-EX201
City Tulsa	State OK	
Purpose of Disbursement Management Consulting		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State:	District:	Management Consulting

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5300.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020620481

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 26			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Brogdon for U.S. Senate**

Full Name (Last, First, Middle Initial) <b>A. Strategic Compliance Resources LLC</b>		Date of Disbursement MM / DD / YYYY 06 / 06 / 2014
Mailing Address 2100 E Katella Ave #408		Amount of Each Disbursement this Period 1163.75 Transaction ID : SB17-EX161
City Anaheim State CA Zip Code 92806	Purpose of Disbursement Administrative Consulting	
Candidate Name	001 Category/Type	Administrative Consulting
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Strategic Compliance Resources LLC</b>		Date of Disbursement MM / DD / YYYY 06 / 24 / 2014
Mailing Address 2100 E Katella Ave #408		Amount of Each Disbursement this Period 1723.75 Transaction ID : SB17-EX196
City Anaheim State CA Zip Code 92806	Purpose of Disbursement Administrative Consulting	
Candidate Name	001 Category/Type	Administrative Consulting
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Scott Pendergrass</b>		Date of Disbursement MM / DD / YYYY 06 / 06 / 2014
Mailing Address 1317 W Quantico Pt		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17-EX160
City Broken Arrow State OK Zip Code 74011	Purpose of Disbursement Website design and services	
Candidate Name	001 Category/Type	Website design and services
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3387.50
<b>TOTAL</b> This Period (last page this line number only).....	

14020620482

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 15 OF 26

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

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NAME OF COMMITTEE (In Full)  
**Brogdon for U.S. Senate**

Full Name (Last, First, Middle Initial)

**A. The UPS Store**

Mailing Address 5103 S Sheridan

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
06			10			2014			

City Tulsa State OK Zip Code 74145

Amount of Each Disbursement this Period

Purpose of Disbursement  
Postage

001

8.76

Transaction ID : SB17-EX175

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

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

Postage

State: District:

**B. The UPS Store**

Mailing Address 5103 S Sheridan

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
06			16			2014			

City Tulsa State OK Zip Code 74145

Amount of Each Disbursement this Period

Purpose of Disbursement  
Postage

001

5.96

Transaction ID : SB17-EX189

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

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

Postage

State: District:

**C. The UPS Store**

Mailing Address 5103 S Sheridan

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2014			

City Tulsa State OK Zip Code 74145

Amount of Each Disbursement this Period

Purpose of Disbursement  
Postage

001

4.71

Transaction ID : SB17-EX200

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

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

Postage

State: District:

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

19.43

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

14020620483

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 26
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b
	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Brogdon for U.S. Senate**

Full Name (Last, First, Middle Initial) <b>A. Michael Stopp</b>		Date of Disbursement MM / DD / YYYY 06 / 11 / 2014
Mailing Address 1003 Francis Ave		Amount of Each Disbursement this Period 688.91 Transaction ID : SB17-EX184
City Tahlequah	State OK	
Purpose of Disbursement Mileage Reimbursement	Zip Code 74464	Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Mileage Reimbursement
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Michael Stopp</b>		Date of Disbursement MM / DD / YYYY 06 / 19 / 2014
Mailing Address 1003 Francis Ave		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17-EX192
City Tahlequah	State OK	
Purpose of Disbursement Field Strategy Consulting	Zip Code 74464	Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Field Strategy Consulting
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Richard Carpenter</b>		Date of Disbursement MM / DD / YYYY 06 / 11 / 2014
Mailing Address 5053 S. 79th E. Ave		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17-EX183
City Tulsa	State OK	
Purpose of Disbursement Political Strategy Consultant	Zip Code 74135	Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Political Strategy Consultant
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3688.91
<b>TOTAL</b> This Period (last page this line number only).....	

14020620484



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 17 OF 26

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

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NAME OF COMMITTEE (In Full)  
**Brogdon for U.S. Senate**

Full Name (Last, First, Middle Initial) <b>A. Marlene Lynch</b>		Date of Disbursement MM / DD / YYYY 06 / 16 / 2014
Mailing Address 2701 John Deer Ave		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17-EX190
City Edmond	State OK	
Purpose of Disbursement Administrative Consulting		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Administrative Consulting
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>B. Marlene Lynch</b>		Date of Disbursement MM / DD / YYYY 06 / 24 / 2014
Mailing Address 2701 John Deer Ave		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17-EX197
City Edmond	State OK	
Purpose of Disbursement Administrative Consulting		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Administrative Consulting
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>c. Phame Marketing Inc.</b>		Date of Disbursement MM / DD / YYYY 06 / 05 / 2014
Mailing Address 5053 S 79th E Ave		Amount of Each Disbursement this Period 1200.00 Transaction ID : SB17-EX167
City Tulsa	State OK	
Purpose of Disbursement Media		Category/ Type 004
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Media
State: _____ District: _____		

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

3200.00

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

18281.29

14020620485

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 18 OF 26

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

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NAME OF COMMITTEE (In Full)  
**Brogdon for U.S. Senate**

Full Name (Last, First, Middle Initial)

**A. Gary Bennett**

Date of Disbursement

M	M	D	D	Y	Y	Y	Y
06		24		2014			

Mailing Address 6613 Rochester Ave

City Lubbock State TX Zip Code 79424

Amount of Each Disbursement this Period

Purpose of Disbursement  
Contribution Ref to Individual

2600.00

Transaction ID : SB20a-CR16

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

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

Runoff Election Refund

State: District:

Full Name (Last, First, Middle Initial)

**B. Gary Bennett**

Date of Disbursement

M	M	D	D	Y	Y	Y	Y
06		24		2014			

Mailing Address 6613 Rochester Ave

City Lubbock State TX Zip Code 79424

Amount of Each Disbursement this Period

Purpose of Disbursement  
Contribution Ref to Individual

2300.00

Transaction ID : SB20a-CR17

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

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

General Election Refund

State: District:

Full Name (Last, First, Middle Initial)

**c. David L Hamlin**

Date of Disbursement

M	M	D	D	Y	Y	Y	Y
06		24		2014			

Mailing Address PO Box 1684

City Owasso State OK Zip Code 74055

Amount of Each Disbursement this Period

Purpose of Disbursement  
Contribution Ref to Individual

400.00

Transaction ID : SB20a-CR18

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

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

Runoff Election Refund

State: District:

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

5300.00

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

14020620486

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 26			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**Brogdon for U.S. Senate**

Full Name (Last, First, Middle Initial) <b>A. Bonnie Latshaw</b>		Date of Disbursement MM / DD / YYYY 06 / 24 / 2014
Mailing Address PO Box 691017		Amount of Each Disbursement this Period 2600.00 Transaction ID : SB20a-CR19
City Tulsa	State OK	
Purpose of Disbursement Contribution Ref to Individual		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff 2014	Runoff Election Refund
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>B. Bonnie Latshaw</b>		Date of Disbursement MM / DD / YYYY 06 / 24 / 2014
Mailing Address PO Box 691017		Amount of Each Disbursement this Period 2600.00 Transaction ID : SB20a-CR20
City Tulsa	State OK	
Purpose of Disbursement Contribution Ref to Individual		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014	General Election Refund
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>c. Trent B Latshaw</b>		Date of Disbursement MM / DD / YYYY 06 / 24 / 2014
Mailing Address PO Box 691017		Amount of Each Disbursement this Period 2600.00 Transaction ID : SB20a-CR21
City Tulsa	State OK	
Purpose of Disbursement Contribution Ref to Individual		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014	General Election Refund
State: _____ District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7800.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020620487

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 20 OF 26

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

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NAME OF COMMITTEE (In Full)  
**Brogdon for U.S. Senate**

Full Name (Last, First, Middle Initial)

**A. Trent B Latshaw**

Mailing Address PO Box 691017

City Tulsa State OK Zip Code 74169

Purpose of Disbursement  
Contribution Ref to Individual

Candidate Name

Office Sought:  House  Senate  President

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

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 24 / 2014

Amount of Each Disbursement this Period

2600.00

Transaction ID : SB20a-CR22

Runoff Election Refund

**B. Cindy Porter**

Mailing Address PO Box 128

City Woodward State OK Zip Code 73802

Purpose of Disbursement  
Contribution Ref to Individual

Candidate Name

Office Sought:  House  Senate  President

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

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 24 / 2014

Amount of Each Disbursement this Period

2400.00

Transaction ID : SB20a-CR35

Runoff Election Refund

**c. Manley Porter**

Mailing Address PO Box 128

City Woodward State OK Zip Code 73802

Purpose of Disbursement  
Contribution Ref to Individual

Candidate Name

Office Sought:  House  Senate  President

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

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 24 / 2014

Amount of Each Disbursement this Period

2400.00

Transaction ID : SB20a-CR36

Runoff Election Refund

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

7400.00

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

14020620488

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 21 OF 26

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

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NAME OF COMMITTEE (In Full)  
**Brogdon for U.S. Senate**

Full Name (Last, First, Middle Initial)

**A. Bradley Leon Ragains**

Mailing Address PO Box 237

City Kingfisher State OK Zip Code 73750

Purpose of Disbursement  
Contribution Ref to Individual

Candidate Name

Office Sought:  House  Senate  President

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

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 24 / 2014

Amount of Each Disbursement this Period

100.00

Transaction ID : SB20a-CR34

Runoff Election Refund

**B. Marcus Lee Robinson**

Mailing Address 4109 Frisco Bridge Blvd

City Edmond State OK Zip Code 73034

Purpose of Disbursement  
Contribution Ref to Individual

Candidate Name

Office Sought:  House  Senate  President

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

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 24 / 2014

Amount of Each Disbursement this Period

2400.00

Transaction ID : SB20a-CR33

Runoff Election Refund

**C. Kenneth Sellers**

Mailing Address 2400 S Chestnut Ave

City Broken Arrow State OK Zip Code 74012

Purpose of Disbursement  
Contribution Ref to Individual

Candidate Name

Office Sought:  House  Senate  President

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

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 24 / 2014

Amount of Each Disbursement this Period

2600.00

Transaction ID : SB20a-CR31

Runoff Election Refund

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

5100.00

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

14020620489

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 26
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Brogdon for U.S. Senate**

Full Name (Last, First, Middle Initial) <b>A. Kenneth Sellers</b>		Date of Disbursement MM / DD / YYYY 06 / 24 / 2014
Mailing Address 2400 S Chestnut Ave		Amount of Each Disbursement this Period 2600.00 Transaction ID : SB20a-CR32
City Broken Arrow	State OK	
Zip Code 74012	Purpose of Disbursement Contribution Ref to Individual	Category/ Type General Election Refund
Candidate Name	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff 2014	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Carie White</b>		Date of Disbursement MM / DD / YYYY 06 / 24 / 2014
Mailing Address 4201 NW 149th St		Amount of Each Disbursement this Period 2600.00 Transaction ID : SB20a-CR27
City Oklahoma City	State OK	
Zip Code 73134	Purpose of Disbursement Contribution Ref to Individual	Category/ Type General Election Refund
Candidate Name	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Carie White</b>		Date of Disbursement MM / DD / YYYY 06 / 24 / 2014
Mailing Address 4201 NW 149th St		Amount of Each Disbursement this Period 2600.00 Transaction ID : SB20a-CR28
City Oklahoma City	State OK	
Zip Code 73134	Purpose of Disbursement Contribution Ref to Individual	Category/ Type Runoff Election Refund
Candidate Name	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff 2014	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	7800.00
TOTAL This Period (last page this line number only).....	

14020620490

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 26			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Brogdon for U.S. Senate**

Full Name (Last, First, Middle Initial) <b>A. Dr. Damon Bryon White</b>		Date of Disbursement MM / DD / YYYY 06 / 24 / 2014
Mailing Address 4201 NW 149th St		Amount of Each Disbursement this Period 2600.00 Transaction ID : SB20a-CR29
City Oklahoma City	State OK	
Purpose of Disbursement Contribution Ref to Individual		Category/ Type Runoff Election Refund
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff 2014	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Dr. Damon Bryon White</b>		Date of Disbursement MM / DD / YYYY 06 / 24 / 2014
Mailing Address 4201 NW 149th St		Amount of Each Disbursement this Period 2600.00 Transaction ID : SB20a-CR30
City Oklahoma City	State OK	
Purpose of Disbursement Contribution Ref to Individual		Category/ Type General Election Refund
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. Carrie Jean Zoellner</b>		Date of Disbursement MM / DD / YYYY 06 / 24 / 2014
Mailing Address 9711 S Marion Ave		Amount of Each Disbursement this Period 2600.00 Transaction ID : SB20a-CR23
City Tulsa	State OK	
Purpose of Disbursement Contribution Ref to Individual		Category/ Type Runoff Election Refund
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff 2014	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7800.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020620491

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 24 OF 26

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

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NAME OF COMMITTEE (In Full)  
**Brogdon for U.S. Senate**

Full Name (Last, First, Middle Initial) <b>A. Carrie Jean Zoellner</b>		Date of Disbursement MM / DD / YYYY 06 / 24 / 2014
Mailing Address 9711 S Marion Ave		Amount of Each Disbursement this Period 2600.00 Transaction ID : SB20a-CR24
City Tulsa	State OK	
Purpose of Disbursement Contribution Ref to Individual		Category/ Type General Election Refund
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Dr. Robert H Zoellner</b>		Date of Disbursement MM / DD / YYYY 06 / 24 / 2014
Mailing Address 9711 S Marion Ave		Amount of Each Disbursement this Period 2600.00 Transaction ID : SB20a-CR25
City Tulsa	State OK	
Purpose of Disbursement Contribution Ref to Individual		Category/ Type General Election Refund
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. Dr. Robert H Zoellner</b>		Date of Disbursement MM / DD / YYYY 06 / 24 / 2014
Mailing Address 9711 S Marion Ave		Amount of Each Disbursement this Period 2600.00 Transaction ID : SB20a-CR26
City Tulsa	State OK	
Purpose of Disbursement Contribution Ref to Individual		Category/ Type Runoff Election Refund
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff 2014	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7800.00
<b>TOTAL</b> This Period (last page this line number only).....	49000.00

14020620492



**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Brogdon for U.S. Senate**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Randall Brogdon**

Nature of Debt (Purpose):  
 Invoice: Prorated Value of Campaign Software License

Mailing Address 9015 N 100th East Ave

City State Zip Code  
 Owasso OK OK 74055

Outstanding Balance Beginning This Period 9247.92  
 Transaction ID : SD10-INV65

Amount Incurred This Period .00  
 Payment This Period .00  
 Outstanding Balance at Close of This Period 9247.92

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Randall Brogdon**

Nature of Debt (Purpose):  
 Invoice: Reimbursement for Campaign Cell Phone

Mailing Address 9015 N 100th East Ave

City State Zip Code  
 Owasso OK OK 74055

Outstanding Balance Beginning This Period 87.55  
 Transaction ID : SD10-INV66

Amount Incurred This Period .00  
 Payment This Period .00  
 Outstanding Balance at Close of This Period 87.55

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Verizon Wireless**

Nature of Debt (Purpose):  
 Invoice: Cell phone service

Mailing Address PO Box 660108

City State Zip Code  
 Dallas TX TX 75266-0108

Outstanding Balance Beginning This Period 158.77  
 Transaction ID : SD10-INV167

Amount Incurred This Period .00  
 Payment This Period 158.77  
 Outstanding Balance at Close of This Period .00

1) SUBTOTALS This Period This Page (optional) ...	9335.47
2) TOTALS This Period (last page this line number) ...	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)...	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

14020620493

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Brogdon for U.S. Senate**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Vanco Services</b>		Nature of Debt (Purpose): Invoice: Credit card/merchant fee
Mailing Address 12600 Whitewater Drive Suite 200		
City State	Zip Code	
Minnetonka MN	55343	
Outstanding Balance Beginning This Period 14.20		Transaction ID : SD10-INV150
Amount Incurred This Period .00	Payment This Period 14.20	Outstanding Balance at Close of This Period .00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State	Zip Code	
Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

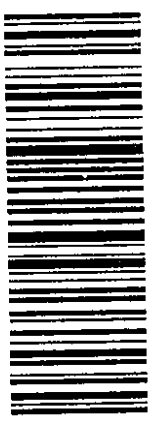
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State	Zip Code	
Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional) ...	0.00
2) TOTALS This Period (last page this line number only) ...	9335.47
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)...	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	9335.47

14020620494

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POST OFFICE*

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USPS PRIORITY MAIL \_\_\_\_\_  
Postmark  
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USPS EXPRESS MAIL \_\_\_\_\_  
Postmark

<u>OVERNIGHT DELIVERY SERVICE:</u>		SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
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UPS	_____	_____	<input type="checkbox"/>
DHL	_____	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	_____	<input type="checkbox"/>

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Date of Receipt

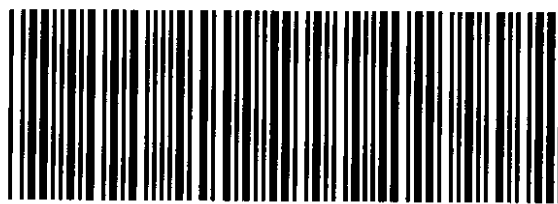
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FAX \_\_\_\_\_  
Date of Receipt

OTHER \_\_\_\_\_  
Date of Receipt or Postmark

PREPARER **MN** DATE PREPARED **7/18/14**

14020620496



SEN PATCH



SEN PATCH

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