1. **NAME OF COMMITTEE (in full)**
   - Guild for Congress

2. **ADDRESS (number and street)**
   - PO Box 6621
   - Edmond
   - OK
   - 73083

3. **FEC IDENTIFICATION NUMBER**
   - C00546242

4. **TYPE OF REPORT**
   - **(a) Quarterly Reports:**
     - April 15 Quarterly Report (Q1)
     - July 15 Quarterly Report (Q2)
     - October 15 Quarterly Report (Q3)
     - January 31 Year-End Report (YE)
   - **(b) 12-Day PRE-Election Report for the:**
     - Primary (12P)
     - General (12G)
     - Runoff (12R)
     - Convention (12C)
     - Special (12S)
     - Election on: 
       - Month: MM
       - Day: DD
       - Year: YYYY

5. **Covering Period**
   - From MM/DD/YYYY to MM/DD/YYYY
   - Example: April 15 Quarterly Report (Q1)

---

**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: Thomas Guild

Signature of Treasurer: Thomas Guild

Date: MM/DD/YYYY

**NOTE:** Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.
<table>
<thead>
<tr>
<th>COLUMN A</th>
<th>COLUMN B</th>
</tr>
</thead>
<tbody>
<tr>
<td>This Period</td>
<td>Election Cycle-to-Date</td>
</tr>
</tbody>
</table>

6. Net Contributions (other than loans)

(a) Total Contributions (other than loans) (from Line 11(e)) .... 5365.62 23713.78

(b) Total Contribution Refunds (from Line 20(d)) ................. 0.00 0.00

(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) ...... 5365.62 23713.78

7. Net Operating Expenditures

(a) Total Operating Expenditures (from Line 17) ................. 7858.39 21066.48

(b) Total Offsets to Operating Expenditures (from Line 14) ................. 0.00 0.00

(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) ...... 7858.39 21066.48

8. Cash on Hand at Close of Reporting Period (from Line 27) ................. 22673.80

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) ................. 19100.00

For further information contact:

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

Toll Free 800-424-9530
Local 202-694-1100
### I. RECEIPTS

<table>
<thead>
<tr>
<th>COLUMN A</th>
<th>COLUMN B</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total This Period</strong></td>
<td><strong>Election Cycle-to-Date</strong></td>
</tr>
<tr>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>(a) Individuals/Persons Other Than Political Committees</td>
<td></td>
</tr>
<tr>
<td>(i) Itemized (use Schedule A)</td>
<td>1565.00</td>
</tr>
<tr>
<td>(ii) Unitemized</td>
<td>3800.62</td>
</tr>
<tr>
<td>(iii) TOTAL of contributions from individuals</td>
<td>5365.62</td>
</tr>
<tr>
<td>(b) Political Party Committees</td>
<td>0.00</td>
</tr>
<tr>
<td>(c) Other Political Committees (such as PACs)</td>
<td>0.00</td>
</tr>
<tr>
<td>(d) The Candidate</td>
<td>0.00</td>
</tr>
<tr>
<td>(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))</td>
<td>5365.62</td>
</tr>
<tr>
<td>(12) TRANSFERS FROM OTHER AUTHORIZED COMMITTEES</td>
<td>0.00</td>
</tr>
<tr>
<td>(13) LOANS:</td>
<td></td>
</tr>
<tr>
<td>(a) Made or Guaranteed by the Candidate</td>
<td>11800.00</td>
</tr>
<tr>
<td>(b) All Other Loans</td>
<td>0.00</td>
</tr>
<tr>
<td>(c) TOTAL LOANS (add Lines 13(a) and (b))</td>
<td>11800.00</td>
</tr>
<tr>
<td>(14) OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)</td>
<td>0.00</td>
</tr>
<tr>
<td>(15) OTHER RECEIPTS (Dividends, Interest, etc.)</td>
<td>0.00</td>
</tr>
<tr>
<td>(16) TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)</td>
<td>17165.62</td>
</tr>
</tbody>
</table>
### II. DISBURSEMENTS

<table>
<thead>
<tr>
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<th>COLUMN B</th>
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</thead>
<tbody>
<tr>
<td><strong>Total This Period</strong></td>
<td><strong>Election Cycle-to-Date</strong></td>
</tr>
<tr>
<td>7858.39</td>
<td>21066.48</td>
</tr>
</tbody>
</table>

17. OPERATING EXPENDITURES..........................
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... 
   b. Political Party Committees...........................
   c. Other Political Committees
      (such as PACs)............................... 
   d. TOTAL CONTRIBUTION REFUNDS
      (add Lines 20(a), (b), and (c))..............

21. OTHER DISBURSEMENTS ..............................

22. TOTAL DISBURSEMENTS
    (add Lines 17, 18, 19(c), 20(d), and 21)    

### III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...........

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).........

25. SUBTOTAL (add Line 23 and Line 24).......................

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).......... 

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD
    (subtract Line 26 from Line 25)......................

| | 
|---|---|
| | 13366.57 |
| | 17165.62 |
| | 30532.19 |
| | 7858.39 |
| | 22673.80 |
### NAME OF COMMITTEE (In Full)

**Guild for Congress**

---

**A.**

**Barbara Bannon**

Mailing Address: 2811 E 89th St

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tulsa</td>
<td>OK</td>
<td>74137</td>
</tr>
</tbody>
</table>

FEC ID number of contributing federal political committee.

| C |  

Name of Employer: Self

Occupation: HR/OD Consultant

Receipt For: 2014

<table>
<thead>
<tr>
<th>Primary</th>
<th>General</th>
<th>Other (specify)</th>
<th>Election Cycle-to-Date</th>
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<tbody>
<tr>
<td>✔️</td>
<td></td>
<td></td>
<td>250.00</td>
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</tbody>
</table>

Date of Receipt: 02/07/2014

Transaction ID: SA11AI.5013

Contribution: 50.00

---

**B.**

**Barbara Bannon**

Mailing Address: 2811 E 89th St

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tulsa</td>
<td>OK</td>
<td>74137</td>
</tr>
</tbody>
</table>

FEC ID number of contributing federal political committee.

| C |  

Name of Employer: Self

Occupation: HR/OD Consultant

Receipt For: 2014

<table>
<thead>
<tr>
<th>Primary</th>
<th>General</th>
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<th>Election Cycle-to-Date</th>
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</thead>
<tbody>
<tr>
<td>✔️</td>
<td></td>
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<td>350.00</td>
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</tbody>
</table>

Date of Receipt: 03/31/2014

Transaction ID: SA11AI.5570

Contribution: 100.00

---

**C.**

**Patricia Carey**

Mailing Address: 2509 Kathy Ct

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oklahoma City</td>
<td>OK</td>
<td>73120</td>
</tr>
</tbody>
</table>

FEC ID number of contributing federal political committee.

| C |  

Name of Employer: Retired

Occupation: Retired

Receipt For: 2014

<table>
<thead>
<tr>
<th>Primary</th>
<th>General</th>
<th>Other (specify)</th>
<th>Election Cycle-to-Date</th>
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</thead>
<tbody>
<tr>
<td>✔️</td>
<td></td>
<td></td>
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Date of Receipt: 03/31/2014

Transaction ID: SA11AI.5606

Contribution: 15.00

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

165.00

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

165.00
### NAME OF COMMITTEE (In Full)
**Guild for Congress**

#### A.
**Full Name (Last, First, Middle Initial):** Lynda Deibel  
**Mailing Address:** 904 Pine Oak Dr  
**City:** Edmond  
**State:** OK  
**Zip Code:** 73034  
**FEC ID number of contributing federal political committee:** C  
**Name of Employer:** Retired  
**Occupation:** Retired  
**Receipt For:** 2014  
**Other (specify):**  
**Date of Receipt:** 03/18/2014  
**Transaction ID:** SA11AI.5002  
**Amount of Each Receipt this Period:** 250.00  
**Contribution:**

#### B.
**Full Name (Last, First, Middle Initial):** Michael Dover  
**Mailing Address:** 428 NW 34th  
**City:** Oklahoma City  
**State:** OK  
**Zip Code:** 73118  
**FEC ID number of contributing federal political committee:** C  
**Name of Employer:** Information  
**Occupation:** Requested  
**Receipt For:** 2014  
**Other (specify):**  
**Date of Receipt:** 03/19/2014  
**Transaction ID:** SA11AI.5003  
**Amount of Each Receipt this Period:** 25.00  
**Contribution:**

#### C.
**Full Name (Last, First, Middle Initial):** Michael Dover  
**Mailing Address:** 428 NW 34th  
**City:** Oklahoma City  
**State:** OK  
**Zip Code:** 73118  
**FEC ID number of contributing federal political committee:** C  
**Name of Employer:** Information  
**Occupation:** Requested  
**Receipt For:** 2014  
**Other (specify):**  
**Date of Receipt:** 03/19/2014  
**Transaction ID:** SA11AI.5115  
**Amount of Each Receipt this Period:** 25.00  
**Contribution:**

### SUBTOTAL of Receipts This Page (optional)................................................................. 300.00

### TOTAL This Period (last page this line number only).................................................
### SCHEDULE A (FEC Form 3)

#### ITEMIZED RECEIPTS

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)**

**Guild for Congress**

<table>
<thead>
<tr>
<th>A.</th>
<th><strong>Joel Epstein</strong></th>
</tr>
</thead>
<tbody>
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<td>02/24/2014</td>
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<td>Amount of Each Receipt this Period</td>
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<tr>
<td>Contribution</td>
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</tr>
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</table>

<table>
<thead>
<tr>
<th>B.</th>
<th><strong>Joel Epstein</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of Receipt</td>
<td>03/31/2014</td>
</tr>
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<tr>
<td>Amount of Each Receipt this Period</td>
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<tr>
<td>Contribution</td>
<td>25.00</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>C.</th>
<th><strong>Barbara Hall</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of Receipt</td>
<td>02/07/2014</td>
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<tr>
<td>Transaction ID</td>
<td>SA11AI.5012</td>
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<td>Contribution</td>
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</table>

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

**TOTAL** This Period (last page this line number only)
<table>
<thead>
<tr>
<th>Full Name (Last, First, Middle Initial)</th>
<th>Date of Receipt</th>
<th>Transaction ID</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barbara Hall</td>
<td>03/10/2014</td>
<td>SA11AI.5125</td>
</tr>
<tr>
<td>9532 Sand Hill Ct</td>
<td>03/10/2014</td>
<td>SA11AI.5133</td>
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<tr>
<td>9532 Sand Hill Ct</td>
<td>03/31/2014</td>
<td>SA11AI.5588</td>
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</tbody>
</table>

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

- A: C
- B: C
- C: C

**Name of Employer**

- A: N/A
- B: N/A
- C: N/A

**Occupation**

- A: N/A
- B: N/A
- C: N/A

**Receipt For:**

- A: Primary
- B: Primary
- C: Primary

**Election Cycle-to-Date**

- A: 425.00
- B: 450.00
- C: 475.00

**Amount of Each Receipt this Period**

- A: 25.00
- B: 25.00
- C: 25.00

**Contribution**

- A: 25.00
- B: 25.00
- C: 25.00

**City, State, Zip Code**

- A: Highlands Ranch, CO, 80126
- B: Highlands Ranch, CO, 80126
- C: Highlands Ranch, CO, 80126
**NAME OF COMMITTEE (In Full)**
Guild for Congress

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

<table>
<thead>
<tr>
<th><strong>Barbara Hall</strong></th>
<th><strong>Joe Hall</strong></th>
<th><strong>Debbie Hammons</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Mailing Address</strong></td>
<td><strong>Mailing Address</strong></td>
<td><strong>Mailing Address</strong></td>
</tr>
<tr>
<td>9532 Sand Hill Ct</td>
<td>1513 Mesa Verde</td>
<td>31408 Old Highway</td>
</tr>
<tr>
<td><strong>City</strong></td>
<td><strong>State</strong></td>
<td><strong>State</strong></td>
</tr>
<tr>
<td>Highlands Ranch</td>
<td>CO</td>
<td>80126</td>
</tr>
<tr>
<td><strong>FEC ID number of contributing federal political committee.</strong></td>
<td>C</td>
<td>C</td>
</tr>
<tr>
<td><strong>Date of Receipt</strong></td>
<td>M M / D D / Y Y Y Y</td>
<td>M M / D D / Y Y Y Y</td>
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<tr>
<td><strong>Transaction ID</strong></td>
<td>SA11AI.5607</td>
<td>SA11AI.5484</td>
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<tr>
<td><strong>Amount of Each Receipt this Period</strong></td>
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<td>100.00</td>
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<tr>
<td><strong>Contribution</strong></td>
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<td>100.00</td>
</tr>
<tr>
<td><strong>Full Name (Last, First, Middle Initial)</strong></td>
<td><strong>Mailing Address</strong></td>
<td><strong>Mailing Address</strong></td>
</tr>
<tr>
<td><strong>Highlands Ranch</strong></td>
<td>CO</td>
<td>80126</td>
</tr>
<tr>
<td><strong>Name of Employer</strong></td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td><strong>Occupation</strong></td>
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<td><strong>Receipt For:</strong></td>
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<td>2014</td>
</tr>
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<td>X</td>
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<tr>
<td><strong>General</strong></td>
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<td></td>
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<tr>
<td><strong>Other (specify)</strong></td>
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<tr>
<td><strong>Election Cycle-to-Date</strong></td>
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<td>300.00</td>
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</table>

**SUBTOTAL of Receipts This Page (optional)**
425.00

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

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.

### A. John Heisch

- **Full Name (Last, First, Middle Initial):** John Heisch
- **Mailing Address:** 823 NW 20th St
- **City:** Oklahoma City
  - **State:** OK
  - **Zip Code:** 73106
- **Date of Receipt:** 03/31/2014
- **Transaction ID:** SA11AI.5585
- **Amount of Each Receipt this Period:** 100.00

### B. Arthur Kennedy

- **Full Name (Last, First, Middle Initial):** Arthur Kennedy
- **Mailing Address:** 6788 Sueno Rd, Ste B
- **City:** Isla Vista
  - **State:** CA
  - **Zip Code:** 93117
- **Date of Receipt:** 02/07/2014
- **Transaction ID:** SA11AI.5011
- **Amount of Each Receipt this Period:** 25.00

### C. Dennis Lipsitz

- **Full Name (Last, First, Middle Initial):** Dennis Lipsitz
- **Mailing Address:** 7112 NW 119th St
- **City:** Oklahoma City
  - **State:** OK
  - **Zip Code:** 73162
- **Date of Receipt:** 01/30/2014
- **Transaction ID:** SA11AI.4976
- **Amount of Each Receipt this Period:** 50.00

---

**SUBTOTAL** of Receipts This Page (optional): 175.00

**TOTAL** This Period (last page this line number only): 175.00
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**NAME OF COMMITTEE (In Full)**

**Guild for Congress**

### A. Dennis Lipsitz

- **Mailing Address:** 7112 NW 119th St
- **City:** Oklahoma City
- **State:** OK
- **Zip Code:** 73162

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

**Name of Employer:** Unemployed

**Occupation:** Unemployed

**Receipt For:** Primary

**Date of Receipt:** 03/03/2014

**Transaction ID:** SA11AI.5305

**Amount of Each Receipt this Period:** 50.00

---

### B. Dennis Lipsitz

- **Mailing Address:** 7112 NW 119th St
- **City:** Oklahoma City
- **State:** OK
- **Zip Code:** 73162

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

**Name of Employer:** Unemployed

**Occupation:** Unemployed

**Receipt For:** Primary

**Date of Receipt:** 03/31/2014

**Transaction ID:** SA11AI.5291

**Amount of Each Receipt this Period:** 50.00

---

### C. Kenneth McMillen

- **Mailing Address:** 500 Edwards Dr
- **City:** Norman
- **State:** RI
- **Zip Code:** 73072

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

**Name of Employer:** Information Requested

**Occupation:** Unemployed

**Receipt For:** Primary

**Date of Receipt:** 02/01/2014

**Transaction ID:** SA11AI.4948

**Amount of Each Receipt this Period:** 100.00

---

**SUBTOTAL of Receipts This Page (optional):** 200.00

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**TOTAL This Period (last page this line number only):** 200.00

FEC Schedule A (Form 3) (Revised 02/2009)
### SCHEDULE A (FEC Form 3)

**ITEMIZED RECEIPTS**

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<table>
<thead>
<tr>
<th>NAME OF COMMITTEE (In Full)</th>
<th>Guild for Congress</th>
</tr>
</thead>
</table>

**A.**

**Wanda Jo Stapleton**

Mailing Address: 425 SW 51st St

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oklahoma City</td>
<td>OK</td>
<td>73109</td>
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FEC ID number of contributing federal political committee: C

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<th>Occupation</th>
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<tr>
<td>Retired</td>
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<td>2014</td>
<td>Election Cycle-to-Date</td>
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<td>Primary</td>
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<td>Other (specify)</td>
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**Transaction ID**: SA11AI.5482

**Date of Receipt**: 03/31/2014

**Contribution**: 25.00

<table>
<thead>
<tr>
<th>Full Name (Last, First, Middle Initial)</th>
<th>Rhoda Whitaker</th>
</tr>
</thead>
</table>

**B.**

**Mailing Address**: 14013 Pecan Hollow

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Edmond</td>
<td>OK</td>
<td>73013</td>
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</table>

FEC ID number of contributing federal political committee: C

<table>
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<th>Receipt For:</th>
<th>Amount of Each Receipt this Period</th>
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</thead>
<tbody>
<tr>
<td>Retired</td>
<td>Retired</td>
<td>2014</td>
<td>Election Cycle-to-Date</td>
</tr>
<tr>
<td>Primary</td>
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<td>350.00</td>
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<tr>
<td>Other (specify)</td>
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</table>

**Transaction ID**: SA11AI.5830

**Date of Receipt**: 02/24/2014

**Contribution**: 100.00

| Full Name (Last, First, Middle Initial) | | |
|----------------------------------------| | |

**C.**

**Mailing Address**

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
</table>

FEC ID number of contributing federal political committee: C

<table>
<thead>
<tr>
<th>Name of Employer</th>
<th>Occupation</th>
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**Date of Receipt**: 02/24/2014

**Contribution**: 125.00

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

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

FEC Schedule A (Form 3) (Revised 02/2009)
### NAME OF COMMITTEE

**Guild for Congress**

### A. Thomas Guild
- **Mailing Address:** PO Box 6621
- **City:** Edmond
- **State:** OK
- **Zip Code:** 73083
- **Name of Employer:** University of Central Oklahoma
- **Occupation:** Professor
- **Receipt For:** 2014
- **Date of Receipt:** 02/15/2014
- **FEC ID number:** H00K05155
- **Transaction ID:** SA13A.5057
- **Amount of Each Receipt this Period:** 7500.00
- **Transaction ID:** SA13A.5057

### B. Thomas Guild
- **Mailing Address:** PO Box 6621
- **City:** Edmond
- **State:** OK
- **Zip Code:** 73083
- **Name of Employer:** University of Central Oklahoma
- **Occupation:** Professor
- **Receipt For:** 2014
- **Date of Receipt:** 03/10/2014
- **FEC ID number:** H00K05155
- **Transaction ID:** SA13A.5116
- **Amount of Each Receipt this Period:** 4000.00
- **Transaction ID:** SA13A.5116

### C. Thomas Guild
- **Mailing Address:** PO Box 6621
- **City:** Edmond
- **State:** OK
- **Zip Code:** 73083
- **Name of Employer:** University of Central Oklahoma
- **Occupation:** Professor
- **Receipt For:** 2014
- **Date of Receipt:** 03/31/2014
- **FEC ID number:** H00K05155
- **Transaction ID:** SA13A.5163
- **Amount of Each Receipt this Period:** 300.00
- **Transaction ID:** SA13A.5163

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### NAME OF COMMITTEE (In Full)

**Guild for Congress**

#### A. ActBlue

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<td>State</td>
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<td>Zip Code</td>
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**Purpose of Disbursement**
- Merchant Service Fee

**Candidate Name**

**Office Sought:**
- House
- Senate
- President

**Disbursement For:**
- Primary
- General
- Other (specify)

**Date of Disbursement**
- M M / D D / Y Y Y Y
- 01 / 17 / 2014

**Amount of Each Disbursement this Period**
- Category/Type: 001
- Transaction ID: SB17.4931
- 0.51

#### B. ActBlue

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**Purpose of Disbursement**
- Merchant Service Fees

**Candidate Name**

**Office Sought:**
- House
- Senate
- President

**Disbursement For:**
- Primary
- General
- Other (specify)

**Date of Disbursement**
- M M / D D / Y Y Y Y
- 01 / 24 / 2014

**Amount of Each Disbursement this Period**
- Category/Type: 001
- Transaction ID: SB17.4935
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#### C. ActBlue

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**Purpose of Disbursement**
- Merchant Service Fees

**Candidate Name**

**Office Sought:**
- House
- Senate
- President

**Disbursement For:**
- Primary
- General
- Other (specify)

**Date of Disbursement**
- M M / D D / Y Y Y Y
- 01 / 27 / 2014

**Amount of Each Disbursement this Period**
- Category/Type: 001
- Transaction ID: SB17.5058
- 12.47

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

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

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

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.

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**SUBTOTAL** of Disbursements This Page: 13.75

**TOTAL** This Period: 13.75
**NAME OF COMMITTEE (In Full)**

Guild for Congress

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

**TOTAL** This Period (last page this line number only) .............................................................
### SCHEDULE B  (FEC Form 3)

#### ITEMIZED DISBURSEMENTS

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**NAME OF COMMITTEE (In Full)**

**Guild for Congress**

<table>
<thead>
<tr>
<th>Full Name (Last, First, Middle Initial)</th>
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| **B. ActBlue**                          | 03       / 2014       | 6.76                                  | SB17.5168     |
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| City: Cambridge                        | State: MA       | Zip Code: 02238                        |               |
| Purpose of Disbursement: Merchant Service Fees | Category/Type: 001 |                                         |               |
| Candidate Name                         | Disbursement For: |                                        |               |
| Office Sought: House                   | Primary         |                                        |               |
| Senate                                 | General         |                                        |               |
| President                              | Other (specify)  |                                        |               |
| State:                                 | District:       |                                        |               |

| **C. ActBlue**                          | 03       / 2014       | 8.88                                  | SB17.5299     |
| Mailing Address: PO Box 382110          |          |                                        |               |
| City: Cambridge                        | State: MA       | Zip Code: 02238                        |               |
| Purpose of Disbursement: Merchant Service Fees | Category/Type: 001 |                                         |               |
| Candidate Name                         | Disbursement For: |                                        |               |
| Office Sought: House                   | Primary         |                                        |               |
| Senate                                 | General         |                                        |               |
| President                              | Other (specify)  |                                        |               |
| State:                                 | District:       |                                        |               |

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

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

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NAME OF COMMITTEE (In Full)

Guild for Congress

Full Name (Last, First, Middle Initial)

<table>
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Transaction ID: SB17.5472

Transaction ID: SB17.4957

Transaction ID: SB17.4964

Date of Disbursement

M M / D D / Y Y Y Y

03 / 31 / 2014

01 / 13 / 2014

01 / 18 / 2014

SUBTOTAL of Disbursements This Page (optional) .......................................................... 177.73

TOTAL This Period (last page this line number only) ..........................................................
SCHEDULE B  (FEC Form 3)  
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Guild for Congress

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<th>Amount of Each Disbursement this Period</th>
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<tr>
<td>Office Sought: House</td>
<td>Disbursement For:</td>
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<tr>
<td>Senate</td>
<td>Primary</td>
<td></td>
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<tr>
<td>President</td>
<td>General</td>
<td></td>
<td></td>
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<tr>
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<td>District:</td>
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<tr>
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<td></td>
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</tr>
<tr>
<td><strong>C. Matt Caban</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mailing Address: PO Box 6621</td>
<td></td>
<td></td>
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<tr>
<td>City: Edmond</td>
<td>State: OK</td>
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<td>District:</td>
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TOTAL This Period (last page this line number only) .............................................................................

Transaction ID : SB17.5850
Transaction ID : SB17.5851
Transaction ID : SB17.4992

Image# 14960694638
### A. Campaign Technology Professionals, LLC

**Mailing Address** 2601 NW Expressway Ste. 305W  
**City** Oklahoma City  
**State** OK  
**Zip Code** 73112  

**Purpose of Disbursement** Ethics Reporting Service  
**Candidate Name**  
Office Sought: House  
**Disbursement For:** General  
**Amount of Each Disbursement this Period** 1200.00  
**Date of Disbursement** M/02/2014  
**Transaction ID** : SB17.4991

### B. El Nacional

**Mailing Address** 304 SW 25th St  
**City** Oklahoma City  
**State** OK  
**Zip Code** 73109  

**Purpose of Disbursement** Newspaper Ad  
**Candidate Name**  
Office Sought: House  
**Disbursement For:** General  
**Amount of Each Disbursement this Period** 350.00  
**Date of Disbursement** M/03/2014  
**Transaction ID** : SB17.4996

### C. Thomas Guild

**Mailing Address** PO Box 6621  
**City** Edmond  
**State** OK  
**Zip Code** 73083  

**Purpose of Disbursement** Reimbursement for Flight cost to DC  
**Candidate Name**  
Office Sought: House  
**Disbursement For:** General  
**Amount of Each Disbursement this Period** 544.60  
**Date of Disbursement** M/01/2014  
**Transaction ID** : SB17.4953

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**SUBTOTAL of Disbursements This Page (optional)** ................................................................. 2094.60

**TOTAL This Period (last page this line number only)** ..........................................................
SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

| Guild for Congress |

<table>
<thead>
<tr>
<th>FULL NAME (LAST, FIRST, MIDDLE INITIAL)</th>
<th>DATE OF DISBURSEMENT</th>
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<tbody>
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<td>L.L. James Printing Co.</td>
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<th>ZIP CODE</th>
<th>PURPOSE OF DISBURSEMENT</th>
<th>CATEGORY/TYPE</th>
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<tr>
<td>7156 Melrose Ln</td>
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<td>73127</td>
<td>Printing Expense</td>
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<td>Oklahoma County Democratic Party</td>
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<th>ZIP CODE</th>
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<th>CATEGORY/TYPE</th>
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<td>PO Box 559</td>
<td>Rush Springs</td>
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<td>73082</td>
<td>Medallion Dinner Table</td>
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<td>Pam Paul</td>
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<th>STATE</th>
<th>ZIP CODE</th>
<th>PURPOSE OF DISBURSEMENT</th>
<th>CATEGORY/TYPE</th>
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<tbody>
<tr>
<td>2632 Cashion Pl</td>
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<td>OK</td>
<td>73112</td>
<td>Consulting Services</td>
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SUBTOTAL of Disbursements This Page

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

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### NAME OF COMMITTEE (In Full)

**Guild for Congress**

### A. Pam Paul

- **Mailing Address**: 2632 Cashion Pl
- **City**: Oklahoma City
- **State**: OK
- **Zip Code**: 73112
- **Purpose of Disbursement**: Consulting Services
- **Candidate Name**: Pam Paul
- **Office Sought**: House
- **Disbursement For**: Primary
- **Amount of Each Disbursement this Period**: $100.00
- **Transaction ID**: SB17.4966
- **Date of Disbursement**: 01/31/2014

### B. Pam Paul

- **Mailing Address**: 2632 Cashion Pl
- **City**: Oklahoma City
- **State**: OK
- **Zip Code**: 73112
- **Purpose of Disbursement**: Consulting Services
- **Candidate Name**: Pam Paul
- **Office Sought**: House
- **Disbursement For**: General
- **Amount of Each Disbursement this Period**: $100.00
- **Transaction ID**: SB17.5849
- **Date of Disbursement**: 03/01/2014

### C. PCS Marketing Group, LLC

- **Mailing Address**: 2534 Commerce Blvd
- **City**: Cincinnati
- **State**: OH
- **Zip Code**: 45241
- **Purpose of Disbursement**: Print signs & frames
- **Candidate Name**: Pam Paul
- **Office Sought**: House
- **Disbursement For**: General
- **Amount of Each Disbursement this Period**: $1653.98
- **Transaction ID**: SB17.4955
- **Date of Disbursement**: 01/10/2014

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

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

1853.98
SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)  
Guild for Congress

A. RDT Media, LLC

Mailing Address  37 NE 37th St.

City  Oklahoma City  State  OK  Zip Code  73105

Purpose of Disbursement  
Advertising

Candidate Name

Office Sought:  
House  Senate  President

Disbursement For:  
Primary  General  Other (specify)

Amount of Each Disbursement this Period:  
$112.50

Transaction ID : SB17.4950

Date of Disbursement:  
01 / 01 / 2014

B. RDT Media, LLC

Mailing Address  37 NE 37th St.

City  Oklahoma City  State  OK  Zip Code  73105

Purpose of Disbursement  
Media Display

Candidate Name

Office Sought:  
House  Senate  President

Disbursement For:  
Primary  General  Other (specify)

Amount of Each Disbursement this Period:  
$225.00

Transaction ID : SB17.4965

Date of Disbursement:  
01 / 31 / 2014

C. Stoneway Office Center

Mailing Address  2401 NW 39th St

City  Oklahoma City  State  OK  Zip Code  73112

Purpose of Disbursement  
Campaign Rent Expense

Candidate Name

Office Sought:  
House  Senate  President

Disbursement For:  
Primary  General  Other (specify)

Amount of Each Disbursement this Period:  
$1544.00

Transaction ID : SB17.4993

Date of Disbursement:  
02 / 20 / 2014

SUBTOTAL of Disbursements This Page (optional):  
$1881.50

TOTAL This Period (last page this line number only):  
$1881.50
### Guild for Congress

**Full Name (Last, First, Middle Initial):** The City Sentinel  
**Date of Disbursement:** MM/DD/YYYY  
**Amount of Each Disbursement this Period:** 100.00  
**Transaction ID:** SB17.4954

City: Oklahoma City  
State: OK  
Zip Code: 73146

**Purpose of Disbursement:** Newspaper Ads  
**Candidate Name:**  
**Office Sought:** House  
**State:**  
**Disbursement For:** Primary  
**Transaction ID:** SB17.4998

**Full Name (Last, First, Middle Initial):** The City Sentinel  
**Date of Disbursement:** MM/DD/YYYY  
**Amount of Each Disbursement this Period:** 200.00  
**Transaction ID:** SB17.4998

City: Oklahoma City  
State: OK  
Zip Code: 73146

**Purpose of Disbursement:** Newspaper Ad  
**Candidate Name:**  
**Office Sought:** House  
**State:**  
**Disbursement For:** Primary  
**Transaction ID:** SB17.4954

**Full Name (Last, First, Middle Initial):**  
**Date of Disbursement:** MM/DD/YYYY  
**Amount of Each Disbursement this Period:** 300.00  
**Transaction ID:** SB17.4998

City: Oklahoma City  
State: OK  
Zip Code: 73146

**Purpose of Disbursement:**  
**Candidate Name:**  
**Office Sought:** House  
**State:**  
**Disbursement For:** Primary  

---

**SUBTOTAL of Disbursements This Page (optional):** 7463.96  
**TOTAL This Period (last page this line number only):** 7463.96
**Loan**

**Name of Committee (In Full):** Guild for Congress

**Loan Source:** Thomas Guild

<table>
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<tr>
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<th>Cumulative Payment To Date</th>
<th>Balance Outstanding at Close of This Period</th>
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<td>200.00</td>
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**Terms**

- **Date Incurred:** 01/01/2013
- **Date Due:** 4/1/2015
- **Interest Rate:** 0.00%
- **Secured:** No

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

1. **Name of Employer:**
   - **Mailing Address:** PO Box 6621
   - **City:** Edmond
   - **State:** OK
   - **ZIP Code:** 73083

2. **Name of Employer:**
   - **Mailing Address:**
   - **City:**
   - **State:**
   - **ZIP Code:**

3. **Name of Employer:**
   - **Mailing Address:**
   - **City:**
   - **State:**
   - **ZIP Code:**

4. **Name of Employer:**
   - **Mailing Address:**
   - **City:**
   - **State:**
   - **ZIP Code:**

**Subtotals**

- This Period: 200.00

**Totals**

- This Period: 200.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.
SCHEDULE C  (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full)
Guild for Congress

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

Mailing Address
PO Box 6621

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>ZIP Code</th>
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<tbody>
<tr>
<td>Edmond</td>
<td>OK</td>
<td>73083</td>
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Original Amount of Loan  Cumulative Payment To Date  Balance Outstanding at Close of This Period

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<th>Date Incurred</th>
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<td>M M / D D / Y Y Y Y</td>
<td>0.00 % (apr)</td>
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<td>06 / 11 / 2013</td>
<td>4/1/2015</td>
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)  Name of Employer
Mailing Address
City

<table>
<thead>
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<th>State</th>
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2. Full Name (Last, First, Middle Initial)  Name of Employer
Mailing Address
City

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3. Full Name (Last, First, Middle Initial)  Name of Employer
Mailing Address
City

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4. Full Name (Last, First, Middle Initial)  Name of Employer
Mailing Address
City

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

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

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</table>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.
**NAME OF COMMITTEE (In Full)**
Guild for Congress

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

**NAME OF COMMITTEE (In Full)**
Guild for Congress

**TRXNC ID:** SC/10.4393

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<th>[PERSONAL FUNDS]</th>
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<td></td>
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<td></td>
<td>Primary</td>
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<td></td>
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<td></td>
<td>General</td>
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<td>Other (specify)</td>
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**Original Amount of Loan: 300.00**

**Cumulative Payment To Date: 0.00**

**Balance Outstanding at Close of This Period: 300.00**

**TERMS**

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<tbody>
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<td>4/1/2015</td>
<td>0.00% (apr)</td>
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**Secured:**

- [ ] Yes
- [x] No

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

1. **Full Name (Last, First, Middle Initial):**
   - Name of Employer
   - Mailing Address
   - City: Edmond
   - State: OK
   - ZIP Code: 73083

2. **Full Name (Last, First, Middle Initial):**
   - Name of Employer
   - Mailing Address
   - City: Edmond
   - State: OK
   - ZIP Code: 73083

3. **Full Name (Last, First, Middle Initial):**
   - Name of Employer
   - Mailing Address
   - City: Edmond
   - State: OK
   - ZIP Code: 73083

4. **Full Name (Last, First, Middle Initial):**
   - Name of Employer
   - Mailing Address
   - City: Edmond
   - State: OK
   - ZIP Code: 73083

**SUBTOTALS** This Period This Page (optional) ................................................................. 300.00

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

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.
**NAME OF COMMITTEE (In Full)**
Guild for Congress

**LOAN SOURCE**
**Full Name (Last, First, Middle Initial)**
Thomas Guild

**Mailing Address**
PO Box 6621

<table>
<thead>
<tr>
<th>City</th>
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<th>ZIP Code</th>
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<td>73083</td>
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**Original Amount of Loan**
0.00

**Cumulative Payment To Date**
0.00

**Balance Outstanding at Close of This Period**
200.00

**TERMS**

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

1. **Full Name (Last, First, Middle Initial)**
   - **Name of Employer**
   - **Mailing Address**
   - **City**
   - **State**
   - **ZIP Code**

2. **Full Name (Last, First, Middle Initial)**
   - **Name of Employer**
   - **Mailing Address**
   - **City**
   - **State**
   - **ZIP Code**

3. **Full Name (Last, First, Middle Initial)**
   - **Name of Employer**
   - **Mailing Address**
   - **City**
   - **State**
   - **ZIP Code**

4. **Full Name (Last, First, Middle Initial)**
   - **Name of Employer**
   - **Mailing Address**
   - **City**
   - **State**
   - **ZIP Code**

**SUBTOTALS**
This Period This Page (optional).......................................................... 200.00

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

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.
**NAME OF COMMITTEE (In Full)**

Guild for Congress

---

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

**[PERSONAL FUNDS]**

**Election:** 2014

- [x] Primary
- [ ] General
- [ ] Other (specify)

---

**Original Amount of Loan**

800.00

**Cumulative Payment To Date**

0.00

**Balance Outstanding at Close of This Period**

800.00

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**TERMS**

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<td>0.00 % (apr)</td>
<td>[x] Yes</td>
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

- **Name of Employer**
- **Occupation**
  - Mailing Address
    - City
    - State
    - ZIP Code

2. Full Name (Last, First, Middle Initial)

- **Name of Employer**
- **Occupation**
  - Mailing Address
    - City
    - State
    - ZIP Code

3. Full Name (Last, First, Middle Initial)

- **Name of Employer**
- **Occupation**
  - Mailing Address
    - City
    - State
    - ZIP Code

4. Full Name (Last, First, Middle Initial)

- **Name of Employer**
- **Occupation**
  - Mailing Address
    - City
    - State
    - ZIP Code

---

**SUBTOTALS** This Period This Page (optional) .......................................................... 800.00

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

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Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.
**NAME OF COMMITTEE (In Full)**
Guild for Congress

**LOAN SOURCE** Full Name (Last, First, Middle Initial) [PERSONAL FUNDS]
Thomas Guild

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>ZIP Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Edmond</td>
<td>OK</td>
<td>73083</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Original Amount of Loan</th>
<th>Cumulative Payment To Date</th>
<th>Balance Outstanding at Close of This Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>2500.00</td>
<td>0.00</td>
<td>2500.00</td>
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</table>

**TERMS**

<table>
<thead>
<tr>
<th>Date Incurred</th>
<th>Date Due</th>
<th>Interest Rate</th>
<th>Secured:</th>
</tr>
</thead>
<tbody>
<tr>
<td>11/29/2013</td>
<td>4/1/2015</td>
<td>0.00% (apr)</td>
<td>No</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Name of Employer</th>
<th>Mailing Address</th>
<th>City</th>
<th>State</th>
<th>ZIP Code</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1. Full Name (Last, First, Middle Initial)
   - Name of Employer
   - Mailing Address
   - City, State, ZIP Code

2. Full Name (Last, First, Middle Initial)
   - Name of Employer
   - Mailing Address
   - City, State, ZIP Code

3. Full Name (Last, First, Middle Initial)
   - Name of Employer
   - Mailing Address
   - City, State, ZIP Code

4. Full Name (Last, First, Middle Initial)
   - Name of Employer
   - Mailing Address
   - City, State, ZIP Code

**SUBTOTALS** This Period This Page (optional) ................................................................. 2500.00

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

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

**Full Name (Last, First, Middle Initial):** Thomas Guild

**Mailing Address:** PO Box 6621

**City:** Edmond  
**State:** OK  
**ZIP Code:** 73083

---

**Original Amount of Loan:** $2,300.00  
**CumulativePayment To Date:** $0.00  
**Balance Outstanding at Close of This Period:** $2,300.00

---

**TERMS**  
- **Date Incurred:** 12/03/2013  
- **Date Due:** 04/1/2015  
- **Interest Rate:** 0.00% (apr)  
- **Secured:** No

---

**List All Endorsers orGuarantors (if any) to Loan Source**

1. **Full Name (Last, First, Middle Initial):**  
   **Name of Employer:**  
   **Mailing Address:**  
   **City:**  
   **State:**  
   **ZIP Code:**

2. **Full Name (Last, First, Middle Initial):**  
   **Name of Employer:**  
   **Mailing Address:**  
   **City:**  
   **State:**  
   **ZIP Code:**

3. **Full Name (Last, First, Middle Initial):**  
   **Name of Employer:**  
   **Mailing Address:**  
   **City:**  
   **State:**  
   **ZIP Code:**

4. **Full Name (Last, First, Middle Initial):**  
   **Name of Employer:**  
   **Mailing Address:**  
   **City:**  
   **State:**  
   **ZIP Code:**

---

**SUBTOTALS**  
**This Period This Page (optional):** $2,300.00

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

---

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.
### NAME OF COMMITTEE (In Full)

Guild for Congress

---

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

Thomas Guild

**Election:** 2014

- [x] Primary
- [ ] General
- [ ] Other (specify)

**Original Amount of Loan** 7500.00

**Cumulative Payment To Date** 0.00

**Balance Outstanding at Close of This Period** 7500.00

---

**TERMS**

<table>
<thead>
<tr>
<th>Date Incurred</th>
<th>Date Due</th>
<th>Interest Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>02/15/2014</td>
<td>4/1/2015</td>
<td>0.00 % (apr)</td>
</tr>
</tbody>
</table>

**Secured:** [x] Yes  

---

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

1. **Full Name (Last, First, Middle Initial)**
   - Name of Employer
   - Mailing Address
   - City  
   - State  
   - ZIP Code

2. **Full Name (Last, First, Middle Initial)**
   - Name of Employer
   - Mailing Address
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4. **Full Name (Last, First, Middle Initial)**
   - Name of Employer
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   - ZIP Code

**Guaranteed Outstanding:**

---

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

7500.00

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

---

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**
### SCHEDULE C  (FEC Form 3)
#### LOANS

**NAME OF COMMITTEE (In Full)**
Guild for Congress

**LOAN SOURCE**
Thomas Guild

**Mailing Address**
PO Box 6621

**City**
Edmond

**State**
OK

**ZIP Code**
73083

**Original Amount of Loan**
4000.00

**Cumulative Payment To Date**
0.00

**Balance Outstanding at Close of This Period**
4000.00

**Election**
2014

**TERMS**
Date Incurred
03 10 2014

Date Due
4/1/2015

**Interest Rate**
0.00%

**Secured**
No

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

1. **Full Name (Last, First, Middle Initial)**
   - Name of Employer
   - Occupation
   - Mailing Address
   - City
   - State
   - ZIP Code

2. **Full Name (Last, First, Middle Initial)**
   - Name of Employer
   - Occupation
   - Mailing Address
   - City
   - State
   - ZIP Code

3. **Full Name (Last, First, Middle Initial)**
   - Name of Employer
   - Occupation
   - Mailing Address
   - City
   - State
   - ZIP Code

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   - Name of Employer
   - Occupation
   - Mailing Address
   - City
   - State
   - ZIP Code

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

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

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.
## SCHEDULE C (FEC Form 3)

**LOANS**

### NAME OF COMMITTEE (In Full)

Guild for Congress

### LOAN SOURCE Full Name (Last, First, Middle Initial)  
**[PERSONAL FUNDS]**

**Thomas Guild**

Mailing Address

PO Box 6621

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</thead>
<tbody>
<tr>
<td>300.00</td>
<td>0.00</td>
<td>300.00</td>
</tr>
</tbody>
</table>

### TERMS

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<th>Secured:</th>
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</thead>
<tbody>
<tr>
<td>03/31/2014</td>
<td>4/1/2015</td>
<td>0.00% (apr)</td>
<td>No</td>
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List All Endorsers or Guarantors (if any) to Loan Source

1. **Full Name (Last, First, Middle Initial)**
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   - **City**
   - **State**
   - **ZIP Code**

### SUBTOTALS This Period This Page (optional)................................................................. 300.00

### TOTALS This Period (last page in this line only)......................................................... 19100.00

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