



**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Cole for Congress

Report Covering the Period: From: 

M	M
0	7

D	D
0	8

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)).....	87086.59	792778.03
(b) Total Contribution Refunds (from Line 20(d)).....		5100.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	87086.59	787678.03
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17).....	258156.13	627048.94
(b) Total Offsets to Operating Expenditures (from Line 14).....	1033.53	5742.13
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	257122.60	621306.81
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	516150.90	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>		
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>		

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name  
Cole for Congress

Report Covering the Period: From: 

M	M
0	7

D	D
0	8

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	43411.59	447561.03
(ii) Unitemized.....	1675.00	42917.00
(iii) TOTAL of contributions from individuals..... ▶	45086.59	490478.03
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACS).....	42000.00	302300.00
(d) The Candidate.....		
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	87086.59	792778.03
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....		4224.00
13. LOANS		
(a) Made or Guaranteed by the Candidate.....		
(b) All Other Loans.....		
(c) TOTAL LOANS (add Lines 13(a) and (b)).....		
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	1033.53	5742.13
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	438.81	5156.78
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	88558.93	807900.94

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES.....	258156.13	627048.94
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.....		1100.00
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		4000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....		5100.00
21. OTHER DISBURSEMENTS.....	10000.00	38750.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	268156.13	670898.94

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	695748.10
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	88558.93
25. SUBTOTAL (add Line 23 and Line 24).....	784307.03
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	268156.13
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	516150.90

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

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

FOR LINE NUMBER: PAGE 5 / 79

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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)  
Cole for Congress

**A.**

Full Name (Last, First, Middle Initial)  
AICPA PAC

Mailing Address Palladian Corporate Center  
220 Leigh Farm Road

City State Zip Code  
Durham NC 27707

FEC ID number of contributing federal political committee. **C** C00077321

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 20 / 2010

Transaction ID: SA11C-CN11270

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
American Medical Assn PAC

Mailing Address 25 Massachusetts Ave NW  
Ste 600

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00000422

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 17 / 2010

Transaction ID: SA11C-CN11259

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Associated General Contractors PAC

Mailing Address 2300 Wilson Blvd Ste 400

City State Zip Code  
Arlington VA 22201

FEC ID number of contributing federal political committee. **C** C00082917

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 27 / 2010

Transaction ID: SA11C-CN11289

Amount of Each Receipt this Period

2000.00

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

4000.00

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

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

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

FOR LINE NUMBER: PAGE 6 / 79  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Cole for Congress

**A.** Full Name (Last, First, Middle Initial)  
AT&T Federal PAC

Mailing Address 175 E. Houston Rm.7-A-50

City State Zip Code  
San Antonio TX 78205

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  

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

**Transaction ID:** SA11C-CN11250

Amount of Each Receipt this Period  
2000.00

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

Mailing Address PO Box 961039

City State Zip Code  
Fort Worth TX 76161

FEC ID number of contributing federal political committee. **C** C00235739

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	1	/	2	0	1	0

**Transaction ID:** SA11C-CN11331

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 1200 Wilson Blvd

City State Zip Code  
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	6	/	2	0	1	0

**Transaction ID:** SA11C-CN11325

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5500.00**

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

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

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

FOR LINE NUMBER: PAGE 7 / 79  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Cole for Congress

**A.** Full Name (Last, First, Middle Initial)  
Centerpoint Energy PAC  
Mailing Address P.O. Box 4567  
City Houston State TX Zip Code 77210  
FEC ID number of contributing federal political committee. **C** C00333534  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 500.00  
Date of Receipt: 07 / 21 / 2010  
Transaction ID: SA11C-CN11284  
Amount of Each Receipt this Period: 500.00

**B.** Full Name (Last, First, Middle Initial)  
Dealers Election PAC  
Mailing Address 8400 Westpark Dr  
City Mc Lean State VA Zip Code 22102  
FEC ID number of contributing federal political committee. **C** C00040998  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 3400.00  
Date of Receipt: 07 / 27 / 2010  
Transaction ID: SA11C-CN11292  
Amount of Each Receipt this Period: 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Deloitte Federal PAC  
Mailing Address PO Box 365  
City Washington State DC Zip Code 20044  
FEC ID number of contributing federal political committee. **C** C00211318  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00  
Date of Receipt: 07 / 23 / 2010  
Transaction ID: SA11C-CN11276  
Amount of Each Receipt this Period: 2000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3500.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 8 / 79  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Cole for Congress

**A.** Full Name (Last, First, Middle Initial)  
Deloitte Federal PAC

Mailing Address PO Box 365

City Washington State DC Zip Code 20044

FEC ID number of contributing federal political committee. **C** C00211318

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 6000.00

Date of Receipt MM / DD / YYYY  
07 / 23 / 2010

**Transaction ID:** SA11C-CN11277

Amount of Each Receipt this Period 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Free and Strong America PAC Inc.

Mailing Address PO Box 79226

City Waverley State MA Zip Code 02479

FEC ID number of contributing federal political committee. **C** C00449280

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt MM / DD / YYYY  
09 / 23 / 2010

**Transaction ID:** SA11C-CN11333

Amount of Each Receipt this Period 2500.00

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

Mailing Address 1299 Pennsylvania Ave NW Ste 1100

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY  
08 / 26 / 2010

**Transaction ID:** SA11C-CN11324

Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4500.00

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



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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 9 / 79  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Cole for Congress

**A.** Full Name (Last, First, Middle Initial)  
Home Depot Inc. Pac

Mailing Address 101 Constitution Ave. NW  
Suite 800 West

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00284885

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 27 / 2010

**Transaction ID:** SA11C-CN11288

Amount of Each Receipt this Period  
 2000.00

**B.** Full Name (Last, First, Middle Initial)  
Independent Insuranc Agents PAC

Mailing Address Mr. Robert A. Rusbuldt  
412 First Street SE Suite 300

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 26 / 2010

**Transaction ID:** SA11C-CN11326

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
International Game Technology Pac

Mailing Address 9295 Prototype Drive

City Reno State NV Zip Code 89511

FEC ID number of contributing federal political committee. **C** C00316331

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 21 / 2010

**Transaction ID:** SA11C-CN11273

Amount of Each Receipt this Period  
 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4000.00

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

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

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

FOR LINE NUMBER: PAGE 10 / 79  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Cole for Congress

**A.** Full Name (Last, First, Middle Initial)  
National Beer Wholesalers PAC

Mailing Address 1101 King St  
Suite 600

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  

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

**Transaction ID:** SA11C-CN11251

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
NATIONAL CABLE AND TELECOMMUNICATIONS ASSO. PAC

Mailing Address 25 Massachusetts Avenue NW #100

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00010082

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	1	0

**Transaction ID:** SA11C-CN11342

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
National Telecommunications CoOp PAC

Mailing Address 4121 Wilson Blvd 10th Floor

City State Zip Code  
Arlington VA 22203

FEC ID number of contributing federal political committee. **C** C00004473

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	6	/	2	0	1	0

**Transaction ID:** SA11C-CN11329

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5500.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 79  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Cole for Congress

**A.** Full Name (Last, First, Middle Initial)  
Oneok Employees PAC

Mailing Address PO Box 871

City State Zip Code  
Tulsa OK 74102

FEC ID number of contributing federal political committee. **C** C00215384

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 8 / 0 5 / 2 0 1 0

**Transaction ID:** SA11C-CN11293

Amount of Each Receipt this Period  
2000.00

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

Mailing Address 1100 Wilson Blvd Ste 1500

City State Zip Code  
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 6000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 8 / 2 6 / 2 0 1 0

**Transaction ID:** SA11C-CN11330

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
ROLLS-ROYCE NORTH AMERICA PAC

Mailing Address 1875 Explorer Street Suite 200

City State Zip Code  
Reston VA 20190

FEC ID number of contributing federal political committee. **C** C00296822

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 1 6 / 2 0 1 0

**Transaction ID:** SA11C-CN11341

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4000.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 79  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Cole for Congress

**A.** Full Name (Last, First, Middle Initial)  
Spectra Energy Corp. PAC  
Mailing Address 5400 Westheimer Court  
City Houston State TX Zip Code 77056  
FEC ID number of contributing federal political committee. **C** C00429662  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00  
Date of Receipt: 09 / 16 / 2010  
Transaction ID: SA11C-CN11338  
Amount of Each Receipt this Period: 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Spirit Aerosystems Inc PAC  
Mailing Address PO Box 780008  
City Wichita State KS Zip Code 67278  
FEC ID number of contributing federal political committee. **C** C00428110  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt: 09 / 16 / 2010  
Transaction ID: SA11C-CN11335  
Amount of Each Receipt this Period: 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Swedish Match PAC  
Mailing Address 7300 Beaufont Springs Dr  
City Richmond State VA Zip Code 23225  
FEC ID number of contributing federal political committee. **C** C00215053  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt: 08 / 03 / 2010  
Transaction ID: SA11C-CN11290  
Amount of Each Receipt this Period: 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3000.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 13 / 79  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Cole for Congress

**A.** Full Name (Last, First, Middle Initial)  
Title Industry PAC  
Mailing Address 1828 L St NW Ste 705

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00012914

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 21 / 2010

**Transaction ID:** SA11C-CN11272

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
UPS PAC  
Mailing Address 55 Glenlake Pkwy NE

City Atlanta State GA Zip Code 30328

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4023.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 16 / 2010

**Transaction ID:** SA11C-CN11257

Amount of Each Receipt this Period  
1023.00

In-Kind Received Facility Usage & Catering

**C.** Full Name (Last, First, Middle Initial)  
UPS PAC  
Mailing Address 55 Glenlake Pkwy NE

City Atlanta State GA Zip Code 30328

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 16 / 2010

**Transaction ID:** SA11C-CN11258

Amount of Each Receipt this Period  
977.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3000.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 79  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Cole for Congress

**A.** Full Name (Last, First, Middle Initial)  
Verizon Communications Good Govt Club

Mailing Address 1300 I St NW 4th Floor

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00186288

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt 07 / 09 / 2010  
**Transaction ID:** SA11C-CN11197  
 Amount of Each Receipt this Period 2000.00

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

Mailing Address P.O. Box 75000

City Detroit State MI Zip Code 48275

FEC ID number of contributing federal political committee. **C** C00007948

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 08 / 26 / 2010  
**Transaction ID:** SA11C-CN11328  
 Amount of Each Receipt this Period 1000.00

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

Mailing Address 1627 I St NW Suite 900

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00040394

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt 07 / 21 / 2010  
**Transaction ID:** SA11C-CN11275  
 Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4000.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 79  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Cole for Congress

A.

Full Name (Last, First, Middle Initial)  
Wine & Spirits Wholesalers PAC

Mailing Address 805 FIFTEENTH ST NW SUITE 430

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00147173

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 15 / 2010

Transaction ID: SA11C-CN11252

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	42000.00

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

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

FOR LINE NUMBER: PAGE 16 / 79

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Cole for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Clarence H Albright, Jr  
Mailing Address 821 Mackall Ave

City State Zip Code  
Mc Lean VA 22101

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

Name of Employer Requested Occupation Requested  
Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 21 2010

Transaction ID: SA11Ai-CN11282

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
The Jicarilla Apache Tribe  
Mailing Address P.O. Box 507

City State Zip Code  
Dulce NM 87528

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

Name of Employer Indian tribe Occupation Indian tribe  
Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 03 2010

Transaction ID: SA11Ai-CN11291

Amount of Each Receipt this Period  
1000.00

**C.**

Full Name (Last, First, Middle Initial)  
C. Mark Brown  
Mailing Address 1413 Claiborne Ln.

City State Zip Code  
Aledo TX 76008

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

Name of Employer Prepaid Legal Services Occupation CMO  
Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 26 2010

Transaction ID: SA11Ai-CN11300

Amount of Each Receipt this Period  
2500.00

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

3750.00

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 79  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Cole for Congress

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

Mailing Address 1413 Claiborne Ln.

City Aledo State TX Zip Code 76008

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

Name of Employer Prepaid Legal Services Occupation CMO

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt 08 / 26 / 2010  
**Transaction ID:** SA11Ai-CN11320  
 Amount of Each Receipt this Period -100.00  
 Reattributed to Denise Brown  
**[MEMO ITEM]**  
 Reattributed

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

Mailing Address 21 NW 44th St Rm 201

City Lawton State OK Zip Code 73505

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

Name of Employer Telos OK Occupation Chairman of the Board

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt 07 / 12 / 2010  
**Transaction ID:** SA11Ai-CN11230  
 Amount of Each Receipt this Period 2400.00

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

Mailing Address 2601 NW Stone Hill Dr

City Lawton State OK Zip Code 73505

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

Name of Employer Self Employed Occupation Attorney

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt 07 / 12 / 2010  
**Transaction ID:** SA11Ai-CN11231  
 Amount of Each Receipt this Period 2400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4800.00

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 79

(check only one)

<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)  
Cole for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Lloyd Hardin

Mailing Address 13813 Hollow Glen Rd

City State Zip Code  
Edmond OK 73013

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

Name of Employer Occupation  
McAfee & Taft Attorney

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 27 / 2010

Transaction ID: SA11Ai-CN11285

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)  
Randy Harp

Mailing Address 13185 County Road 3510

City State Zip Code  
Ada OK 74820

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

Name of Employer Occupation  
Prepaid Legal Services Chief Operating Officer

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 26 / 2010

Transaction ID: SA11Ai-CN11305

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Elizabeth Huckabay

Mailing Address 2114 Edinburg Dr

City State Zip Code  
Yukon OK 73099

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

Name of Employer Occupation Requested  
Requested

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 27 / 2010

Transaction ID: SA11Ai-CN11344

Amount of Each Receipt this Period

1000.00

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

2500.00

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

# 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 20 / 79
	<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)  
Cole for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) George Kaiser	Date of Receipt MM / DD / YYYY 09 / 16 / 2010
	Mailing Address PO Box 21468	<b>Transaction ID:</b> SA11Ai-CN11339
	City State Zip Code Tulsa OK 74121	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: BOK Financial    Occupation: Chairman Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Michael Kloiber	Date of Receipt MM / DD / YYYY 07 / 12 / 2010
	Mailing Address 12908 Doriath Way	<b>Transaction ID:</b> SA11Ai-CN11263
	City State Zip Code Oklahoma City OK 73170	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Tinker Federal Credit Union    Occupation: President Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Kenneth Levit	Date of Receipt MM / DD / YYYY 09 / 16 / 2010
	Mailing Address 2821 E 44th Ct	<b>Transaction ID:</b> SA11Ai-CN11337
	City State Zip Code Tulsa OK 74105	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: George Kaiser Foundation    Occupation: Executive Director Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 21 / 79  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Cole for Congress

**A.** Full Name (Last, First, Middle Initial)  
Soboba Band Of Luiseno Indians  
Mailing Address P.O. Box 487

City State Zip Code  
San Jacinto CA 92581

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

Name of Employer Occupation  
Indian tribe Indian tribe

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 21 / 2010

**Transaction ID:** SA11Ai-CN11274

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
Soboba Band Of Luiseno Indians  
Mailing Address P.O. Box 487

City State Zip Code  
San Jacinto CA 92581

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

Name of Employer Occupation  
Indian tribe Indian tribe

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 21 / 2010

**Transaction ID:** SA11Ai-CN11314

Amount of Each Receipt this Period  
-100.00

Redesignated to General 2010

**[MEMO ITEM]**  
Redesignated

**C.** Full Name (Last, First, Middle Initial)  
Soboba Band Of Luiseno Indians  
Mailing Address P.O. Box 487

City State Zip Code  
San Jacinto CA 92581

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

Name of Employer Occupation  
Indian tribe Indian tribe

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 21 / 2010

**Transaction ID:** SA11Ai-CN11315

Amount of Each Receipt this Period  
100.00

Redesignated from Primary 2010

**[MEMO ITEM]**  
Redesignation

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2500.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 79

(check only one)

<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)  
Cole for Congress

**A.**

Full Name (Last, First, Middle Initial)

Soboba Band Of Luiseno Indians

Mailing Address P.O. Box 487

City State Zip Code  
San Jacinto CA 92581

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

Name of Employer Occupation  
Indian tribe Indian tribe

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 6 / 2 0 1 0

Transaction ID: SA11Ai-CN11323

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

J.R McGraw

Mailing Address 10900 S Louisville Ave

City State Zip Code  
Tulsa OK 74137

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

Name of Employer Occupation  
McGraw Davisson Stewart Real Estate Broker

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 6 / 2 0 1 0

Transaction ID: SA11Ai-CN11336

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Barona Band Of Mission Indians

Mailing Address 1095 Barona Rd

City State Zip Code  
Lakeside CA 92040

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

Name of Employer Occupation  
Indian Tribe Indian Tribe

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt

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

Transaction ID: SA11Ai-CN11232

Amount of Each Receipt this Period

1000.00

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

2250.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 79  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Cole for Congress

**A.** Full Name (Last, First, Middle Initial)  
Morongo Band of Mission Indians

Mailing Address PO Box 366

City State Zip Code  
Cabazon CA 92230

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

Name of Employer Occupation  
Indian tribe Indian tribe

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4400.00

Date of Receipt  

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

**Transaction ID:** SA11Ai-CN11271

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
Pechanga Band Of Mission Indians

Mailing Address P.O. Box 1477

City State Zip Code  
Temecula CA 92593

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

Name of Employer Occupation  
Indian tribe Indian tribe

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6900.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	2	/	2	0	1	0

**Transaction ID:** SA11Ai-CN11332

Amount of Each Receipt this Period  
2400.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. William L Mocha

Mailing Address 6501 S. Fulton Ave.  
P. O. Box 470887

City State Zip Code  
Tulsa OK 74147

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

Name of Employer Occupation  
APSCO Inc. President / CEO

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	0	/	2	0	1	0

**Transaction ID:** SA11Ai-CN11280

Amount of Each Receipt this Period  
250.00

TrnsRef: 29601239 CustRef: 8245035

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4650.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 79  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Cole for Congress

**A.** Full Name (Last, First, Middle Initial)  
Mr. Barry Moore

Mailing Address 247 N Broadway Ste 102  
Suite 605

City Edmond State OK Zip Code 73034

FEC ID number of contributing federal political committee. C

Name of Employer The BKM Group Occupation Executive

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt MM / DD / YYYY  
07 / 09 / 2010

**Transaction ID:** SA11Ai-CN11196

Amount of Each Receipt this Period 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Mashantucket Pequot Tribal Nation

Mailing Address 101 Constitution Ave NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. C

Name of Employer Indian tribe Occupation Indian tribe

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt MM / DD / YYYY  
09 / 16 / 2010

**Transaction ID:** SA11Ai-CN11340

Amount of Each Receipt this Period 1000.00

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

Mailing Address 700 W Kings Rd.

City Ada State OK Zip Code 74820

FEC ID number of contributing federal political committee. C

Name of Employer Pre-Paid Legal Services Inc. Occupation Attorney

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt MM / DD / YYYY  
08 / 26 / 2010

**Transaction ID:** SA11Ai-CN11308

Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... 2250.00

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 79  
(check only one)

<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

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)  
Cole for Congress

**A.**

Full Name (Last, First, Middle Initial) Patrick Raffaniello		Date of Receipt MM / DD / YYYY 07 / 08 / 2010
Mailing Address 1161 Old Gate Ct		<b>Transaction ID:</b> SA11Ai-CN11343
City Mc Lean	State VA	Zip Code 22102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 461.59
Name of Employer Federal Policy Group	Occupation Partner	In-Kind Received Cigars
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 461.59	

**B.**

Full Name (Last, First, Middle Initial) Mr. Scott W. Reed		Date of Receipt MM / DD / YYYY 07 / 21 / 2010
Mailing Address 1215 19th St. NW 3rd FL.		<b>Transaction ID:</b> SA11Ai-CN11283
City Washington	State DC	Zip Code 20036
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Chesapeake Enterprises In- c.	Occupation Chairman	
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4800.00	

**C.**

Full Name (Last, First, Middle Initial) Mr. John Reskovac		Date of Receipt MM / DD / YYYY 07 / 12 / 2010
Mailing Address 9403 Crosspointe Dr		<b>Transaction ID:</b> SA11Ai-CN11268
City Fairfax Station	State VA	Zip Code 22039
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Capitol Decisions	Occupation Principal	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1261.59
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 26 / 79  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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)  
Cole for Congress

**A.** Full Name (Last, First, Middle Initial)  
Beverly Savula

Mailing Address 435 Robertson Rd

City Dawsonville State GA Zip Code 30534

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

Name of Employer Prepaid Legal Services Occupation Insurance Agent

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 08 / 26 / 2010  
Transaction ID: SA11Ai-CN11297  
Amount of Each Receipt this Period: 1000.00

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

Mailing Address PO Box 699

City Tulsa State OK Zip Code 74101

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

Name of Employer Samson Resources Occupation Chairman/CEO

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 07 / 12 / 2010  
Transaction ID: SA11Ai-CN11233  
Amount of Each Receipt this Period: 2400.00

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

Mailing Address 4102 Columns Dr SE

City Marietta State GA Zip Code 30067

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

Name of Employer Pre-Paid Legal Inc. Occupation Vice President

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 08 / 26 / 2010  
Transaction ID: SA11Ai-CN11299  
Amount of Each Receipt this Period: 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4400.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 79  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Cole for Congress

**A.** Full Name (Last, First, Middle Initial)  
Mr. Hal W. Smith

Mailing Address 3101 W Tecumseh Rd. Ste 200

City State Zip Code  
Norman OK 73072

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

Name of Employer Hal Smith Restaurant Group Occupation CEO

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 16 / 2010

**Transaction ID:** SA11Ai-CN11256

Amount of Each Receipt this Period  
2800.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Hal W. Smith

Mailing Address 3101 W Tecumseh Rd. Ste 200

City State Zip Code  
Norman OK 73072

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

Name of Employer Hal Smith Restaurant Group Occupation CEO

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 16 / 2010

**Transaction ID:** SA11Ai-CN11312

Amount of Each Receipt this Period  
-2400.00

Redesignated to General 2010

**[MEMO ITEM]**  
Redesignated

**C.** Full Name (Last, First, Middle Initial)  
Mr. Hal W. Smith

Mailing Address 3101 W Tecumseh Rd. Ste 200

City State Zip Code  
Norman OK 73072

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

Name of Employer Hal Smith Restaurant Group Occupation CEO

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 16 / 2010

**Transaction ID:** SA11Ai-CN11313

Amount of Each Receipt this Period  
2400.00

Redesignated from Primary 2010

**[MEMO ITEM]**  
Redesignation

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2800.00

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

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

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

FOR LINE NUMBER: PAGE 28 / 79  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Cole for Congress

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

Mailing Address 1200 S Monte Vista St

City State Zip Code  
Ada OK 74820

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

Name of Employer Occupation  
Prepaid Legal Services National Sales Director

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
08 / 26 / 2010

**Transaction ID:** SA11Ai-CN11309

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 1200 S Monte Vista St

City State Zip Code  
Ada OK 74820

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

Name of Employer Occupation  
Prepaid Legal Services National Sales Director

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
08 / 26 / 2010

**Transaction ID:** SA11Ai-CN11318

Amount of Each Receipt this Period  
-100.00

Reattributed to Carol Smith

**[MEMO ITEM]**  
Reattributed

**C.** Full Name (Last, First, Middle Initial)  
Gen Thomas P Stafford

Mailing Address 88181 Old Hwy. Coral Harbor

City State Zip Code  
Islamorada FL 33036

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
07 / 12 / 2010

**Transaction ID:** SA11Ai-CN11267

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3000.00**

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

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

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

FOR LINE NUMBER: PAGE 29 / 79  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Cole for Congress

**A.** Full Name (Last, First, Middle Initial)  
Harland Stonecipher

Mailing Address RR 1 Box 39

City State Zip Code  
Centrahoma OK 74534

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

Name of Employer Pre-Paid Legal Services Inc. Occupation CEO

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 2 6 / 2 0 1 0

**Transaction ID:** SA11Ai-CN11298

Amount of Each Receipt this Period  
2500.00

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

Mailing Address RR 1 Box 39

City State Zip Code  
Centrahoma OK 74534

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

Name of Employer Pre-Paid Legal Services Inc. Occupation CEO

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 2 6 / 2 0 1 0

**Transaction ID:** SA11Ai-CN11316

Amount of Each Receipt this Period  
-100.00

Reattributed to Shirley Stonecipher

**[MEMO ITEM]**  
Reattributed

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

Mailing Address 4103 West Main Street Apt. K

City State Zip Code  
Norman OK 73072

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

Name of Employer Bryan Stratton PC Occupation Attorney

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 7 / 1 9 / 2 0 1 0

**Transaction ID:** SA11Ai-CN11260

Amount of Each Receipt this Period  
250.00

TrnsRef: 28099371 CustRef: 7964323

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2750.00**

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

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

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

FOR LINE NUMBER: PAGE 30 / 79  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Cole for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Francis Tarkenton

Mailing Address 3340 Peachtree Rd NE

City Atlanta State GA Zip Code 30326

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

Name of Employer Prepaid Legal Services Occupation Independent Assoc.

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt 08 / 26 / 2010

Transaction ID: SA11Ai-CN11322

Amount of Each Receipt this Period 1000.00

Election Cycle-to-Date 1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Max D Venard

Mailing Address 11125 Lakeridge Run

City Oklahoma City State OK Zip Code 73170

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

Name of Employer Self Occupation Optometrist

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt 08 / 05 / 2010

Transaction ID: SA11Ai-CN11294

Amount of Each Receipt this Period 250.00

Election Cycle-to-Date 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	43411.59

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 79  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Cole for Congress

**A.** Full Name (Last, First, Middle Initial)  
Banc First

Mailing Address PO Box 988

City State Zip Code  
Norman OK 73070

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	3	1	/	2	0	1	0

Transaction ID: SA15-RC267

Amount of Each Receipt this Period  
96.02

Interest Earned

973.86

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

Mailing Address PO Box 988

City State Zip Code  
Norman OK 73070

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

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

Transaction ID: SA15-RC264

Amount of Each Receipt this Period  
100.17

Interest Earned

1174.85

**C.** Full Name (Last, First, Middle Initial)  
Bank 2

Mailing Address 909 S Meridian

City State Zip Code  
Oklahoma City OK 73108

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

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

Transaction ID: SA15-RC260

Amount of Each Receipt this Period  
78.41

Interest Earned

395.73

**SUBTOTAL** of Receipts This Page (optional) ..... ► **274.60**

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

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

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

FOR LINE NUMBER: PAGE 32 / 79  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Cole for Congress

**A.** Full Name (Last, First, Middle Initial)  
Bank 2  
Mailing Address 909 S Meridian

City State Zip Code  
Oklahoma City OK 73108

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
476.81

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 30 / 2010  
**Transaction ID: SA15-RC263**  
 Amount of Each Receipt this Period  
 81.08  
 Interest Earned

**B.** Full Name (Last, First, Middle Initial)  
Bank 2  
Mailing Address 909 S Meridian

City State Zip Code  
Oklahoma City OK 73108

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
557.94

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 31 / 2010  
**Transaction ID: SA15-RC266**  
 Amount of Each Receipt this Period  
 81.13  
 Interest Earned

**SUBTOTAL** of Receipts This Page (optional) ..... ► **162.21**

**TOTAL** This Period (last page this line number only) ..... ► **436.81**



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

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

FOR LINE NUMBER: PAGE 33 / 79  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Cole for Congress

**A.** Full Name (Last, First, Middle Initial)  
Oklahoma Election Commission

Mailing Address State Capitol Building

City State Zip Code  
Oklahoma City OK 73102

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 9 / 3 0 / 2 0 1 0

**Transaction ID:** SA14-ER37

Amount of Each Receipt this Period  
750.00

Expenditure Refund

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

Mailing Address PO Box 722256

City State Zip Code  
Norman OK 73070

FEC ID number of contributing federal political committee. **C** H2OK04055

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
283.53

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 7 / 2 6 / 2 0 1 0

**Transaction ID:** SA14-ER36

Amount of Each Receipt this Period  
283.53

Expenditure Refund

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1033.53**

**TOTAL** This Period (last page this line number only) ..... ► **1033.53**

**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)

<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

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)  
Cole for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) BB&T Mailing Address PO Box 200 City Wilson State NC Zip Code 27894 Purpose of Disbursement Bank Service Charge Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3770 Date of Disbursement 08 / 23 / 2010 Amount of Each Disbursement this Period 434.00 Bank Service Charge
<b>B.</b>	Full Name (Last, First, Middle Initial) BB&T Mailing Address PO Box 200 City Wilson State NC Zip Code 27894 Purpose of Disbursement Bank Service Charge Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3827 Date of Disbursement 09 / 21 / 2010 Amount of Each Disbursement this Period 12.00 Bank Service Charge
<b>C.</b>	Full Name (Last, First, Middle Initial) Trail Blazer Campaign Services Inc. Mailing Address 5115 Excelsior Blvd #103 City Minneapolis State MN Zip Code 55416 Purpose of Disbursement Reporting Software Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3763 Date of Disbursement 09 / 02 / 2010 Amount of Each Disbursement this Period 5000.00 Reporting Software

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

5446.00

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

# 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)

<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)  
Cole for Congress

A.	Full Name (Last, First, Middle Initial) CMA Strategies Inc. <hr/> Mailing Address 201 Robert S. Kerr Suite 301 <hr/> City Oklahoma City State OK Zip Code 73102 <hr/> Purpose of Disbursement Strategic/Political Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3622 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td>1505.30</td> </tr> </table> <hr/> Strategic/Political Consulting	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	8		2	0	1	0	1505.30
M	M	/	D	D	/	Y	Y	Y	Y														
0	7		0	8		2	0	1	0														
1505.30																							
B.	Full Name (Last, First, Middle Initial) CMA Strategies Inc. <hr/> Mailing Address 201 Robert S. Kerr Suite 301 <hr/> City Oklahoma City State OK Zip Code 73102 <hr/> Purpose of Disbursement Strategic/Political Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3766 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td>1526.73</td> </tr> </table> <hr/> Strategic/Political Consulting	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	7		2	0	1	0	1526.73
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		0	7		2	0	1	0														
1526.73																							
C.	Full Name (Last, First, Middle Initial) CMA Strategies Inc. <hr/> Mailing Address 201 Robert S. Kerr Suite 301 <hr/> City Oklahoma City State OK Zip Code 73102 <hr/> Purpose of Disbursement Strategic/Political Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3747 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td>1500.00</td> </tr> </table> <hr/> Strategic/Political Consulting	M	M	/	D	D	/	Y	Y	Y	Y	0	9		3	0		2	0	1	0	1500.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		3	0		2	0	1	0														
1500.00																							

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<table border="1"> <tr> <td><b>4532.03</b></td> </tr> </table>	<b>4532.03</b>
<b>4532.03</b>		
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<table border="1"> <tr> <td> </td> </tr> </table>	

# 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 36 / 79

<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)  
Cole for Congress

A.	Full Name (Last, First, Middle Initial) Cox Communications	Transaction ID: SB17-EX3691 Date of Disbursement
	Mailing Address P.O. Box 268870	<input type="text" value="07"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>
	City Oklahoma City State OK Zip Code 73126	Amount of Each Disbursement this Period
	Purpose of Disbursement Cable and Internet Expense	<input type="text" value="134.19"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Cable and Internet Expense

B.	Full Name (Last, First, Middle Initial) Cox Communications	Transaction ID: SB17-EX3714 Date of Disbursement
	Mailing Address P.O. Box 268870	<input type="text" value="08"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City Oklahoma City State OK Zip Code 73126	Amount of Each Disbursement this Period
	Purpose of Disbursement Cable and Internet Expense	<input type="text" value="134.19"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Cable and Internet Expense

C.	Full Name (Last, First, Middle Initial) Cox Communications	Transaction ID: SB17-EX3723 Date of Disbursement
	Mailing Address P.O. Box 268870	<input type="text" value="09"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>
	City Oklahoma City State OK Zip Code 73126	Amount of Each Disbursement this Period
	Purpose of Disbursement Cable and Internet Expense	<input type="text" value="134.19"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Cable and Internet Expense

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="402.57"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# 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)

<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)  
Cole for Congress

A.	Full Name (Last, First, Middle Initial) 1-800-Conference  Mailing Address PO Box 5075  City Saginaw State MI Zip Code 48605  Purpose of Disbursement Phone Conferencing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17-EX3739 Date of Disbursement 08 / 02 / 2010  Amount of Each Disbursement this Period 3.44  Phone Conferencing
B.	Full Name (Last, First, Middle Initial) FEC Financial  Mailing Address PO Box 651374  City Sterling State VA Zip Code 20165  Purpose of Disbursement Accounting Services Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17-EX3684 Date of Disbursement 07 / 12 / 2010  Amount of Each Disbursement this Period 1500.00  Accounting Services
C.	Full Name (Last, First, Middle Initial) FEC Financial  Mailing Address PO Box 651374  City Sterling State VA Zip Code 20165  Purpose of Disbursement PAYMENT: SEE BELOW Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17-EX3743 Date of Disbursement 08 / 01 / 2010  Amount of Each Disbursement this Period 1052.80  PAYMENT: SEE BELOW

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

2556.24

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

# 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)

<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)  
Cole for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) FEC Financial <hr/> Mailing Address PO Box 651374 <hr/> City Sterling State VA Zip Code 20165 <hr/> Purpose of Disbursement Accounting Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3744 Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2010
	Amount of Each Disbursement this Period 1000.00
	[MEMO ITEM]
	Category/Type 001
<b>B.</b> Full Name (Last, First, Middle Initial) FEC Financial <hr/> Mailing Address PO Box 651374 <hr/> City Sterling State VA Zip Code 20165 <hr/> Purpose of Disbursement Postage Reimbursement Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3745 Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2010
	Amount of Each Disbursement this Period 52.80
	[MEMO ITEM]
	Category/Type 001
<b>C.</b> Full Name (Last, First, Middle Initial) FEC Financial <hr/> Mailing Address PO Box 651374 <hr/> City Sterling State VA Zip Code 20165 <hr/> Purpose of Disbursement Accounting Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3803 Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2010
	Amount of Each Disbursement this Period 1000.00
	Accounting Services
	Category/Type 001

**SUBTOTAL** of Disbursements This Page (optional) ..... ► 1000.00

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



**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)

<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)  
Cole for Congress

A.	Full Name (Last, First, Middle Initial) Mentzer Media  Mailing Address 600 Fairmount Ave Suite 306  City Towson State MD Zip Code 21286  Purpose of Disbursement Media Services Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3693 Date of Disbursement 07 / 12 / 2010  Amount of Each Disbursement this Period 23705.20  Media Services
B.	Full Name (Last, First, Middle Initial) Mentzer Media  Mailing Address 600 Fairmount Ave Suite 306  City Towson State MD Zip Code 21286  Purpose of Disbursement Media Services Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3681 Date of Disbursement 07 / 16 / 2010  Amount of Each Disbursement this Period 61057.00  Media Services
C.	Full Name (Last, First, Middle Initial) Mentzer Media  Mailing Address 600 Fairmount Ave Suite 306  City Towson State MD Zip Code 21286  Purpose of Disbursement Media Services Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3695 Date of Disbursement 07 / 21 / 2010  Amount of Each Disbursement this Period 1115.00  Media Services

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

**85877.20**

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



**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)

<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)  
Cole for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Mentzer Media  Mailing Address 600 Fairmount Ave Suite 306  City Towson State MD Zip Code 21286  Purpose of Disbursement Media Services Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB17-EX3705 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 3 / 2 0 1 0	Amount of Each Disbursement this Period  1060.00
	Media Services  Category/Type: 004		
<b>B.</b>	Full Name (Last, First, Middle Initial) Federal Express  Mailing Address PO Box 1140  City Memphis State TN Zip Code 38101  Purpose of Disbursement Postage Expense Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB17-EX3715 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 2 3 / 2 0 1 0	Amount of Each Disbursement this Period  26.98
	Postage Expense  Category/Type: 001		
<b>C.</b>	Full Name (Last, First, Middle Initial) AT&T Mobility/ Cingular Wireless  Mailing Address P.O. Box 6463  City Carol Stream State IL Zip Code 60197  Purpose of Disbursement Telephone Expense Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB17-EX3741 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 1 0	Amount of Each Disbursement this Period  45.73
	Telephone Expense  Category/Type: 001		

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

1132.71

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



**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)

<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)  
Cole for Congress

A.	Full Name (Last, First, Middle Initial) Cole Hargrave Snodgrass & Assoc. <hr/> Mailing Address P.O. Box 2034 <hr/> City Oklahoma City State OK Zip Code 73101 <hr/> Purpose of Disbursement Polling Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17-EX3683 Date of Disbursement 07 / 09 / 2010 <hr/> Amount of Each Disbursement this Period 5648.25 <hr/> Polling
B.	Full Name (Last, First, Middle Initial) Cole Hargrave Snodgrass & Assoc. <hr/> Mailing Address P.O. Box 2034 <hr/> City Oklahoma City State OK Zip Code 73101 <hr/> Purpose of Disbursement Polling Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17-EX3742 Date of Disbursement 08 / 02 / 2010 <hr/> Amount of Each Disbursement this Period 6507.32 <hr/> Polling
C.	Full Name (Last, First, Middle Initial) Revolution Media Group <hr/> Mailing Address 1090 Vermont Ave NW Ste 230 <hr/> City Washington State DC Zip Code 20005 <hr/> Purpose of Disbursement Mailer Design and Layout Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17-EX3709 Date of Disbursement 08 / 05 / 2010 <hr/> Amount of Each Disbursement this Period 1500.00 <hr/> Mailer Design and Layout

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

13655.57

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

# 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)

<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)  
Cole for Congress

A.	Full Name (Last, First, Middle Initial) Revolution Media Group <hr/> Mailing Address 1090 Vermont Ave NW Ste 230 <hr/> City Washington State DC Zip Code 20005 <hr/> Purpose of Disbursement Radio and TV Production Candidate Name <span style="float: right; border: 1px solid black; padding: 2px;">004</span> Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17-EX3711 Date of Disbursement <span style="border: 1px solid black; padding: 2px;">08</span> / <span style="border: 1px solid black; padding: 2px;">08</span> / <span style="border: 1px solid black; padding: 2px;">2010</span> <hr/> Amount of Each Disbursement this Period <span style="border: 1px solid black; padding: 2px; display: block; text-align: center;">19171.59</span> <hr/> Radio and TV Production
B.	Full Name (Last, First, Middle Initial) Flat Creek Management <hr/> Mailing Address 1708 21st Avenue South #140 <hr/> City Nashville State TN Zip Code 37212 <hr/> Purpose of Disbursement Website Hosting & Design Candidate Name <span style="float: right; border: 1px solid black; padding: 2px;">001</span> Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17-EX3682 Date of Disbursement <span style="border: 1px solid black; padding: 2px;">07</span> / <span style="border: 1px solid black; padding: 2px;">09</span> / <span style="border: 1px solid black; padding: 2px;">2010</span> <hr/> Amount of Each Disbursement this Period <span style="border: 1px solid black; padding: 2px; display: block; text-align: center;">510.25</span> <hr/> Website Hosting & Design
C.	Full Name (Last, First, Middle Initial) Flat Creek Management <hr/> Mailing Address 1708 21st Avenue South #140 <hr/> City Nashville State TN Zip Code 37212 <hr/> Purpose of Disbursement Website Hosting & Design Candidate Name <span style="float: right; border: 1px solid black; padding: 2px;">001</span> Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17-EX3710 Date of Disbursement <span style="border: 1px solid black; padding: 2px;">08</span> / <span style="border: 1px solid black; padding: 2px;">06</span> / <span style="border: 1px solid black; padding: 2px;">2010</span> <hr/> Amount of Each Disbursement this Period <span style="border: 1px solid black; padding: 2px; display: block; text-align: center;">535.32</span> <hr/> Website Hosting & Design

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<span style="border: 1px solid black; padding: 2px; display: block;">20217.16</span>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<span style="border: 1px solid black; padding: 2px; display: block;"> </span>

**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)

<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)  
Cole for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Travelers  Mailing Address CL & Specialty Remittance Center  City Hartford State CT Zip Code 06183  Purpose of Disbursement Insurance Expense Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3697 Date of Disbursement 07 / 19 / 2010  Amount of Each Disbursement this Period 276.00  Insurance Expense
<b>B.</b>	Full Name (Last, First, Middle Initial) AT&T  Mailing Address PO Box 105414  City Atlanta State GA Zip Code 30348  Purpose of Disbursement Telephone Expense Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3696 Date of Disbursement 07 / 19 / 2010  Amount of Each Disbursement this Period 52.01  Telephone Expense
<b>C.</b>	Full Name (Last, First, Middle Initial) AT&T  Mailing Address PO Box 105414  City Atlanta State GA Zip Code 30348  Purpose of Disbursement Telephone Expense Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3730 Date of Disbursement 07 / 23 / 2010  Amount of Each Disbursement this Period 72.00  Telephone Expense

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

400.01

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

**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)

<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)  
Cole for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) AT&amp;T</p> <p>Mailing Address PO Box 105414</p> <p>City Atlanta State GA Zip Code 30348</p> <p>Purpose of Disbursement Telephone Expense Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17-EX3738</p> <p>Date of Disbursement 07 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 32.30</p> <p>001 Category/ Type</p> <p>Telephone Expense</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) AT&amp;T</p> <p>Mailing Address PO Box 105414</p> <p>City Atlanta State GA Zip Code 30348</p> <p>Purpose of Disbursement Telephone Expense Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17-EX3740</p> <p>Date of Disbursement 08 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 282.89</p> <p>001 Category/ Type</p> <p>Telephone Expense</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) AT&amp;T</p> <p>Mailing Address PO Box 105414</p> <p>City Atlanta State GA Zip Code 30348</p> <p>Purpose of Disbursement Telephone Expense Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17-EX3764</p> <p>Date of Disbursement 09 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 124.73</p> <p>001 Category/ Type</p> <p>Telephone Expense</p>

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

**439.92**

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

# 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 47 / 79

<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)  
Cole for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) AT&T  Mailing Address PO Box 105414  City Atlanta State GA Zip Code 30348  Purpose of Disbursement Telephone Expense Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3765 Date of Disbursement 09 / 07 / 2010  Amount of Each Disbursement this Period 62.00  Telephone Expense
<b>B.</b>	Full Name (Last, First, Middle Initial) AT&T  Mailing Address PO Box 105414  City Atlanta State GA Zip Code 30348  Purpose of Disbursement Telephone Expense Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3718 Date of Disbursement 09 / 20 / 2010  Amount of Each Disbursement this Period 52.01  Telephone Expense
<b>C.</b>	Full Name (Last, First, Middle Initial) AT&T  Mailing Address PO Box 105414  City Atlanta State GA Zip Code 30348  Purpose of Disbursement Telephone Expense Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3724 Date of Disbursement 09 / 30 / 2010  Amount of Each Disbursement this Period 172.58  Telephone Expense

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>286.59</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**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)

<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)  
Cole for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Signs Etc.</p> <p>Mailing Address 200 SE 3rd</p> <p>City Oklahoma City State OK Zip Code 73129</p> <p>Purpose of Disbursement Sign Production and Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17-EX3708</p> <p>Date of Disbursement 07 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 1988.85</p> <p>004 Category/ Type</p> <p>Sign Production and Print- ing</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Key &amp; Associates</p> <p>Mailing Address 12176 Chancery Station Cir</p> <p>City Reston State VA Zip Code 20190</p> <p>Purpose of Disbursement PAYMENT: SEE BELOW</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17-EX3624</p> <p>Date of Disbursement 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 6745.67</p> <p>003 Category/ Type</p> <p>PAYMENT: SEE BELOW</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Key &amp; Associates</p> <p>Mailing Address 12176 Chancery Station Cir</p> <p>City Reston State VA Zip Code 20190</p> <p>Purpose of Disbursement Fundraising Retainer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17-EX3625</p> <p>Date of Disbursement 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>003 Category/ Type</p> <p>[MEMO ITEM]</p>

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

8734.52

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



**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)

<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)  
Cole for Congress

A. Key & Associates	Full Name (Last, First, Middle Initial)	Transaction ID: SB17-EX3626																					
	Key & Associates	Date of Disbursement																					
	Mailing Address 12176 Chancery Station Cir	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y														
0	7		0	8		2	0	1	0														
	City Reston State VA Zip Code 20190	Amount of Each Disbursement this Period																					
	Purpose of Disbursement Fundraising Commission	<table border="1"> <tr> <td>5652.50</td> </tr> </table>		5652.50																			
5652.50																							
	Candidate Name	<table border="1"> <tr> <td>003</td> </tr> <tr> <td>Category/Type</td> </tr> </table>		003	Category/Type																		
003																							
Category/Type																							
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010																					
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					

[MEMO ITEM]

B. Key & Associates	Full Name (Last, First, Middle Initial)	Transaction ID: SB17-EX3627																					
	Key & Associates	Date of Disbursement																					
	Mailing Address 12176 Chancery Station Cir	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y														
0	7		0	8		2	0	1	0														
	City Reston State VA Zip Code 20190	Amount of Each Disbursement this Period																					
	Purpose of Disbursement Parking Reimbursement	<table border="1"> <tr> <td>18.50</td> </tr> </table>		18.50																			
18.50																							
	Candidate Name	<table border="1"> <tr> <td>003</td> </tr> <tr> <td>Category/Type</td> </tr> </table>		003	Category/Type																		
003																							
Category/Type																							
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010																					
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					

[MEMO ITEM]

C. Capitol Hill Club	Full Name (Last, First, Middle Initial)	Transaction ID: SB17-EX3628																					
	Capitol Hill Club	Date of Disbursement																					
	Mailing Address 300 1st St SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y														
0	7		0	8		2	0	1	0														
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period																					
	Purpose of Disbursement Food and Beverage	<table border="1"> <tr> <td>28.52</td> </tr> </table>		28.52																			
28.52																							
	Candidate Name	<table border="1"> <tr> <td>003</td> </tr> <tr> <td>Category/Type</td> </tr> </table>		003	Category/Type																		
003																							
Category/Type																							
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010																					
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	<table border="1"> <tr> <td>0.00</td> </tr> </table>	0.00
0.00			
<b>TOTAL</b> This Period (last page this line number only) .....	▶	<table border="1"> <tr> <td></td> </tr> </table>	

# 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)

<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)  
Cole for Congress

A.	Full Name (Last, First, Middle Initial) La Lomita Dos	Transaction ID: SB17-EX3629 Date of Disbursement 07 / 08 / 2010
	Mailing Address 5507 Connecticut Avenue Northwest	Amount of Each Disbursement this Period 46.15
	City Washington State DC Zip Code 20015	
	Purpose of Disbursement Food and Beverage Candidate Name	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Key & Associates	Transaction ID: SB17-EX3726 Date of Disbursement 07 / 23 / 2010
	Mailing Address 12176 Chancery Station Cir	Amount of Each Disbursement this Period 3501.46
	City Reston State VA Zip Code 20190	
	Purpose of Disbursement PAYMENT: SEE BELOW Candidate Name	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

PAYMENT: SEE BELOW

C.	Full Name (Last, First, Middle Initial) Key & Associates	Transaction ID: SB17-EX3727 Date of Disbursement 07 / 23 / 2010
	Mailing Address 12176 Chancery Station Cir	Amount of Each Disbursement this Period 3071.74
	City Reston State VA Zip Code 20190	
	Purpose of Disbursement Fundraising Commission Candidate Name	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3501.46
<b>TOTAL</b> This Period (last page this line number only) .....	

# 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)

<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)  
Cole for Congress

A.	Full Name (Last, First, Middle Initial) Key & Associates <hr/> Mailing Address 12176 Chancery Station Cir <hr/> City Reston State VA Zip Code 20190 <hr/> Purpose of Disbursement Parking Reimbursement Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3728 Date of Disbursement 07 / 23 / 2010 <hr/> Amount of Each Disbursement this Period 5.80 <hr/> [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) Capitol Hill Club <hr/> Mailing Address 300 1st St SE <hr/> City Washington State DC Zip Code 20003 <hr/> Purpose of Disbursement Food and Beverage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3729 Date of Disbursement 07 / 23 / 2010 <hr/> Amount of Each Disbursement this Period 423.92 <hr/> [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) Key & Associates <hr/> Mailing Address 12176 Chancery Station Cir <hr/> City Reston State VA Zip Code 20190 <hr/> Purpose of Disbursement PAYMENT: SEE BELOW Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3757 Date of Disbursement 08 / 26 / 2010 <hr/> Amount of Each Disbursement this Period 6331.76 <hr/> PAYMENT: SEE BELOW

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

6331.76

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

# 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)

<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)  
Cole for Congress

A.

Full Name (Last, First, Middle Initial)  
Key & Associates

Transaction ID: SB17-EX3758  
Date of Disbursement

Mailing Address 12176 Chancery Station Cir

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	6		2	0	1	0

City Reston State VA Zip Code 20190

Amount of Each Disbursement this Period

Purpose of Disbursement  
Fundraising Retainer

003
Category/ Type

1000.00
---------

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

[MEMO ITEM]

State: District:

B.

Full Name (Last, First, Middle Initial)  
Key & Associates

Transaction ID: SB17-EX3759  
Date of Disbursement

Mailing Address 12176 Chancery Station Cir

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	6		2	0	1	0

City Reston State VA Zip Code 20190

Amount of Each Disbursement this Period

Purpose of Disbursement  
Fundraising Commission

003
Category/ Type

5135.00
---------

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

[MEMO ITEM]

State: District:

C.

Full Name (Last, First, Middle Initial)  
Key & Associates

Transaction ID: SB17-EX3760  
Date of Disbursement

Mailing Address 12176 Chancery Station Cir

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	6		2	0	1	0

City Reston State VA Zip Code 20190

Amount of Each Disbursement this Period

Purpose of Disbursement  
Parking Reimbursement

003
Category/ Type

32.30
-------

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

[MEMO ITEM]

State: District:

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

0.00
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TOTAL 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)

<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)  
Cole for Congress

A.	Full Name (Last, First, Middle Initial) Pat Troy's Restaurant  Mailing Address 111 North Pitt St  City Alexandria State VA Zip Code 22314  Purpose of Disbursement Food and Beverage Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3761 Date of Disbursement 08 / 26 / 2010  Amount of Each Disbursement this Period 164.46  <b>[MEMO ITEM]</b>
B.	Full Name (Last, First, Middle Initial) First American Bank  Mailing Address 570 24th Ave NW  City Norman State OK Zip Code 73070  Purpose of Disbursement Bank Service Charge Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3769 Date of Disbursement 07 / 10 / 2010  Amount of Each Disbursement this Period 30.00  Bank Service Charge
C.	Full Name (Last, First, Middle Initial) First American Bank  Mailing Address 570 24th Ave NW  City Norman State OK Zip Code 73070  Purpose of Disbursement Bank Service Charge Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3816 Date of Disbursement 08 / 03 / 2010  Amount of Each Disbursement this Period 30.00  Bank Service Charge

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

60.00

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

60.00

**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)

<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)  
Cole for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) First American Bank Mailing Address 570 24th Ave NW City Norman State OK Zip Code 73070 Purpose of Disbursement Bank Service Charge Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3796 Date of Disbursement 09 / 08 / 2010 Amount of Each Disbursement this Period 30.00 Bank Service Charge
<b>B.</b>	Full Name (Last, First, Middle Initial) Credit Card Operations Mailing Address PO Box 22116 City Tulsa State OK Zip Code 74121 Purpose of Disbursement CREDIT CARD PAYMENT: SEE BELOW Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3813 Date of Disbursement 07 / 26 / 2010 Amount of Each Disbursement this Period 884.76 CREDIT CARD PAYMENT: SEE BELOW
<b>C.</b>	Full Name (Last, First, Middle Initial) House Members Dining Room Mailing Address Longworth House Office Supply City Washington State DC Zip Code 20515 Purpose of Disbursement Administrative/Salary/Overhead Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3732 Date of Disbursement 07 / 26 / 2010 Amount of Each Disbursement this Period 130.00 [MEMO ITEM] Food and Beverage

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

914.76

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

# 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)

<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)  
Cole for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Ponder's Restaurant  Mailing Address 2521 Veterans Blvd  City Ardmore State OK Zip Code 73401  Purpose of Disbursement Campaign Event Expenses Candidate Name <span style="float: right; border: 1px solid black; padding: 2px;">007</span> Category/Type  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17-EX3733 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 6 / 2 0 1 0  Amount of Each Disbursement this Period 112.00  <b>[MEMO ITEM]</b> Food and Beverage
<b>B.</b>	Full Name (Last, First, Middle Initial) Iron Star  Mailing Address 3700 N Shartel Ave  City Oklahoma City State OK Zip Code 73118  Purpose of Disbursement Administrative/Salary/Overhead Expenses Candidate Name <span style="float: right; border: 1px solid black; padding: 2px;">001</span> Category/Type  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17-EX3734 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 6 / 2 0 1 0  Amount of Each Disbursement this Period 70.02  <b>[MEMO ITEM]</b> Food and Beverage
<b>C.</b>	Full Name (Last, First, Middle Initial) Louie's  Mailing Address 3750 W Robinson  City Norman State OK Zip Code 73072  Purpose of Disbursement Campaign Event Expenses Candidate Name <span style="float: right; border: 1px solid black; padding: 2px;">007</span> Category/Type  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17-EX3735 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 6 / 2 0 1 0  Amount of Each Disbursement this Period 102.00  <b>[MEMO ITEM]</b> Food and Beverage

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<span style="border: 1px solid black; padding: 5px;">0.00</span>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<span style="border: 1px solid black; padding: 5px;"> </span>

# 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)

<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)  
Cole for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Toni's Flowers  Mailing Address 3549 S. Harvard Ave  City Tulsa State OK Zip Code 74135  Purpose of Disbursement Campaign Event Expenses Candidate Name <span style="float: right;">007 Category/ Type</span>  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17-EX3736 Date of Disbursement 07 / 26 / 2010  Amount of Each Disbursement this Period 63.21  <b>[MEMO ITEM]</b> Decorations
<b>B.</b>	Full Name (Last, First, Middle Initial) Switzer's Locker Room  Mailing Address 905 SE 19th  City Moore State OK Zip Code 73160  Purpose of Disbursement Administrative/Salary/Overhead Expenses Candidate Name <span style="float: right;">001 Category/ Type</span>  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17-EX3737 Date of Disbursement 07 / 26 / 2010  Amount of Each Disbursement this Period 124.00  <b>[MEMO ITEM]</b> Storage Expense
<b>C.</b>	Full Name (Last, First, Middle Initial) Jos A Bank  Mailing Address 3720 W Robinson St  City Norman State OK Zip Code 73072  Purpose of Disbursement Administrative/Salary/Overhead Expenses Candidate Name <span style="float: right;">001 Category/ Type</span>  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17-EX3812 Date of Disbursement 07 / 26 / 2010  Amount of Each Disbursement this Period 283.53  <b>[MEMO ITEM]</b> REFERR TO OFFSET OF OPERATING

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]



# 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)

<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)  
Cole for Congress

A.	Full Name (Last, First, Middle Initial) Credit Card Operations <hr/> Mailing Address PO Box 22116 <hr/> City Tulsa State OK Zip Code 74121 <hr/> Purpose of Disbursement Credit Card Paid by Credit Card Operations Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3756 Date of Disbursement 08 / 23 / 2010 <hr/> Amount of Each Disbursement this Period 598.68 <hr/> Credit Card Paid by Credit Card Operations
B.	Full Name (Last, First, Middle Initial) House Members Dining Room <hr/> Mailing Address Longworth House Office Supply <hr/> City Washington State DC Zip Code 20515 <hr/> Purpose of Disbursement Administrative/Salary/Overhead Expenses Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3748 Date of Disbursement 08 / 23 / 2010 <hr/> Amount of Each Disbursement this Period 66.00 <hr/> [MEMO ITEM] Food and Beverage
C.	Full Name (Last, First, Middle Initial) Exxon Mobil <hr/> Mailing Address 5959 Las Colinas Blvd <hr/> City Irving State TX Zip Code 75039 <hr/> Purpose of Disbursement Travel Expenses Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3749 Date of Disbursement 08 / 23 / 2010 <hr/> Amount of Each Disbursement this Period 43.83 <hr/> [MEMO ITEM] Fuel Expense

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

598.68

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

**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)

<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)  
Cole for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Sunoco Inc.

Mailing Address 1735 Market Street

City Philadelphia State PA Zip Code 19103

Purpose of Disbursement  
Travel Expenses

Candidate Name

002  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX3750  
Date of Disbursement

08 / 23 / 2010

Amount of Each Disbursement this Period

18.60

**[MEMO ITEM]**  
Fuel Expense

**B.**

Full Name (Last, First, Middle Initial)  
NWL Corp

Mailing Address 1001 Lafayette Dr

City Farmington State PA Zip Code 15437

Purpose of Disbursement  
Travel Expenses

Candidate Name

002  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX3751  
Date of Disbursement

08 / 23 / 2010

Amount of Each Disbursement this Period

98.00

**[MEMO ITEM]**  
Lodging

**C.**

Full Name (Last, First, Middle Initial)  
Pat Troy's Restaurant

Mailing Address 111 North Pitt St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX3752  
Date of Disbursement

08 / 23 / 2010

Amount of Each Disbursement this Period

37.00

**[MEMO ITEM]**  
Food and Beverage

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

0.00

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

# 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 59 / 79

<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)  
Cole for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Louie's  Mailing Address 3750 W Robinson  City Norman State OK Zip Code 73072  Purpose of Disbursement Administrative/Salary/Overhead Expenses Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3753 Date of Disbursement 08 / 23 / 2010  Amount of Each Disbursement this Period 60.00  <b>[MEMO ITEM]</b> Food and Beverage
<b>B.</b>	Full Name (Last, First, Middle Initial) Cha Cha's  Mailing Address 3720 W Robinson St  City Norman State OK Zip Code 73072  Purpose of Disbursement Campaign Event Expenses Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3754 Date of Disbursement 08 / 23 / 2010  Amount of Each Disbursement this Period 151.25  <b>[MEMO ITEM]</b> Food and Beverage
<b>C.</b>	Full Name (Last, First, Middle Initial) Switzer's Locker Room  Mailing Address 905 SE 19th  City Moore State OK Zip Code 73160  Purpose of Disbursement Administrative/Salary/Overhead Expenses Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3755 Date of Disbursement 08 / 23 / 2010  Amount of Each Disbursement this Period 124.00  <b>[MEMO ITEM]</b> Storage Expense

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	0.00

# 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)

<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)  
Cole for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Credit Card Operations</p> <p>Mailing Address PO Box 22116</p> <p>City Tulsa State OK Zip Code 74121</p> <p>Purpose of Disbursement CREDIT CARD PAYMENT: SEE BELOW</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17-EX3795 <b>Date of Disbursement:</b> 09 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 202.00</p> <p>001 Category/Type</p> <p>CREDIT CARD PAYMENT: SEE BELOW</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Michaels Grill</p> <p>Mailing Address 2824 W Country Club Dr</p> <p>City Oklahoma City State OK Zip Code 73116</p> <p>Purpose of Disbursement Administrative/Salary/Overhead Expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17-EX3793 <b>Date of Disbursement:</b> 09 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 78.00</p> <p>001 Category/Type</p> <p><b>[MEMO ITEM]</b> Food and Beverage</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Switzer's Locker Room</p> <p>Mailing Address 905 SE 19th</p> <p>City Moore State OK Zip Code 73160</p> <p>Purpose of Disbursement Administrative/Salary/Overhead Expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17-EX3794 <b>Date of Disbursement:</b> 09 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 124.00</p> <p>001 Category/Type</p> <p><b>[MEMO ITEM]</b> Storage Expense</p>

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

202.00

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

# 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)

<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)  
Cole for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address 3060 Williams Drive Ste 200</p> <p>City Fairfax State VA Zip Code 22031</p> <p>Purpose of Disbursement Payroll Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17-EX3787</p> <p>Date of Disbursement 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 96.07</p> <p>001 Category/ Type</p> <p>Payroll Service</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address 3060 Williams Drive Ste 200</p> <p>City Fairfax State VA Zip Code 22031</p> <p>Purpose of Disbursement Credit Card Paid by Paychex</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17-EX3811</p> <p>Date of Disbursement 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 1715.25</p> <p>001 Category/ Type</p> <p>Credit Card Paid by Paychex</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Clayton Thorton</p> <p>Mailing Address 1102 S Stanley St</p> <p>City Stillwater State OK Zip Code 74074</p> <p>Purpose of Disbursement Administrative/Salary/Overhead Expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17-EX3809</p> <p>Date of Disbursement 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 1479.57</p> <p>001 Category/ Type</p> <p><b>[MEMO ITEM]</b> Net Salary</p>

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

1811.32

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

**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)

<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)  
Cole for Congress

A.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB17-EX3810 Date of Disbursement 07 / 12 / 2010
	Mailing Address 3060 Williams Drive Ste 200	Amount of Each Disbursement this Period 235.68
	City Fairfax State VA Zip Code 22031	
	Purpose of Disbursement Administrative/Salary/Overhead Expenses Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> Withholding Taxes

B.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB17-EX3786 Date of Disbursement 07 / 30 / 2010
	Mailing Address 3060 Williams Drive Ste 200	Amount of Each Disbursement this Period 9166.65
	City Fairfax State VA Zip Code 22031	
	Purpose of Disbursement PAYROLL: SEE BELOW Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL: SEE BELOW

C.	Full Name (Last, First, Middle Initial) Nathan Atkins	Transaction ID: SB17-EX3779 Date of Disbursement 07 / 30 / 2010
	Mailing Address 18317 English Oak Ln	Amount of Each Disbursement this Period 2483.68
	City Edmond State OK Zip Code 73012	
	Purpose of Disbursement Administrative/Salary/Overhead Expenses Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> Net Salary

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	9166.65
<b>TOTAL</b> This Period (last page this line number only) .....	

# 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)

<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)  
Cole for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Sarah Ferman  Mailing Address 1215 Ridgeway Dr  City Sherman State TX Zip Code 75092  Purpose of Disbursement Administrative/Salary/Overhead Expenses Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3780 Date of Disbursement 07 / 30 / 2010  Amount of Each Disbursement this Period 790.00  <b>[MEMO ITEM]</b> Net Salary
<b>B.</b>	Full Name (Last, First, Middle Initial) Adam Rainbolt  Mailing Address 6226 Rivera Dr  City Oklahoma City State OK Zip Code 73112  Purpose of Disbursement Administrative/Salary/Overhead Expenses Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3781 Date of Disbursement 07 / 30 / 2010  Amount of Each Disbursement this Period 814.98  <b>[MEMO ITEM]</b> Net Salary
<b>C.</b>	Full Name (Last, First, Middle Initial) Ally Roberts  Mailing Address 501 Maple St  City Ardmore State OK Zip Code 73401  Purpose of Disbursement Administrative/Salary/Overhead Expenses Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3782 Date of Disbursement 07 / 30 / 2010  Amount of Each Disbursement this Period 814.98  <b>[MEMO ITEM]</b> Net Salary

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# 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)

<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)  
Cole for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Clayton Thorton <hr/> Mailing Address 1102 S Stanley St <hr/> City Stillwater State OK Zip Code 74074 <hr/> Purpose of Disbursement Administrative/Salary/Overhead Expenses Candidate Name Category/Type <b>001</b> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17-EX3783 Date of Disbursement 07 / 30 / 2010 <hr/> Amount of Each Disbursement this Period 1317.35 <hr/> <b>[MEMO ITEM]</b> Net Salary
<b>B.</b>	Full Name (Last, First, Middle Initial) John Walker <hr/> Mailing Address 1817 E Lindsay St #1 <hr/> City Norman State OK Zip Code 73071 <hr/> Purpose of Disbursement Administrative/Salary/Overhead Expenses Candidate Name Category/Type <b>001</b> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17-EX3784 Date of Disbursement 07 / 30 / 2010 <hr/> Amount of Each Disbursement this Period 828.15 <hr/> <b>[MEMO ITEM]</b> Net Salary
<b>C.</b>	Full Name (Last, First, Middle Initial) Paychex <hr/> Mailing Address 3060 Williams Drive Ste 200 <hr/> City Fairfax State VA Zip Code 22031 <hr/> Purpose of Disbursement Administrative/Salary/Overhead Expenses Candidate Name Category/Type <b>001</b> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17-EX3785 Date of Disbursement 07 / 30 / 2010 <hr/> Amount of Each Disbursement this Period 2117.51 <hr/> <b>[MEMO ITEM]</b> Withholding Taxes

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

**0.00**

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



# 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)

<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)  
Cole for Congress

A.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB17-EX3788 Date of Disbursement 08 / 10 / 2010
	Mailing Address 3060 Williams Drive Ste 200	Amount of Each Disbursement this Period 104.75
	City Fairfax State VA Zip Code 22031	
	Purpose of Disbursement Payroll Service Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Payroll Service

B.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB17-EX3792 Date of Disbursement 08 / 31 / 2010
	Mailing Address 3060 Williams Drive Ste 200	Amount of Each Disbursement this Period 8886.03
	City Fairfax State VA Zip Code 22031	
	Purpose of Disbursement Credit Card Paid by Paychex Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Credit Card Paid by Paychex

C.	Full Name (Last, First, Middle Initial) Nathan Atkins	Transaction ID: SB17-EX3790 Date of Disbursement 08 / 31 / 2010
	Mailing Address 18317 English Oak Ln	Amount of Each Disbursement this Period 7483.68
	City Edmond State OK Zip Code 73012	
	Purpose of Disbursement Administrative/Salary/Overhead Expenses Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] Net Salary

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

8990.78

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

# 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)

<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)  
Cole for Congress

A.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB17-EX3791 Date of Disbursement 08 / 31 / 2010
	Mailing Address 3060 Williams Drive Ste 200	Amount of Each Disbursement this Period 1402.35
	City Fairfax State VA Zip Code 22031	
	Purpose of Disbursement Administrative/Salary/Overhead Expenses Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> Withholding Taxes

B.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB17-EX3789 Date of Disbursement 09 / 10 / 2010
	Mailing Address 3060 Williams Drive Ste 200	Amount of Each Disbursement this Period 93.13
	City Fairfax State VA Zip Code 22031	
	Purpose of Disbursement Payroll Service Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Payroll Service

C.	Full Name (Last, First, Middle Initial) Nathan Atkins	Transaction ID: SB17-EX3685 Date of Disbursement 07 / 14 / 2010
	Mailing Address 18317 English Oak Ln	Amount of Each Disbursement this Period 779.25
	City Edmond State OK Zip Code 73012	
	Purpose of Disbursement Mileage Reimbursement Candidate Name	002 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Mileage Reimbursement

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>872.38</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# 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)

<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)  
Cole for Congress

A.

Full Name (Last, First, Middle Initial)  
Nathan Atkins

Transaction ID: SB17-EX3703  
Date of Disbursement

Mailing Address 18317 English Oak Ln

/   /

City Edmond State OK Zip Code 73012

Amount of Each Disbursement this Period

Purpose of Disbursement  
Mileage Reimbursement  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: District:

Mileage Reimbursement

B.

Full Name (Last, First, Middle Initial)  
Nathan Atkins

Transaction ID: SB17-EX3817  
Date of Disbursement

Mailing Address 18317 English Oak Ln

/  /

City Edmond State OK Zip Code 73012

Amount of Each Disbursement this Period

Purpose of Disbursement  
REIMBURSEMENT: SEE BELOW  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: District:

REIMBURSEMENT: SEE BELOW

C.

Full Name (Last, First, Middle Initial)  
Wal-Mart

Transaction ID: SB17-EX3818  
Date of Disbursement

Mailing Address 501 SW 19th St

/  /

City Oklahoma City State OK Zip Code 73160

Amount of Each Disbursement this Period

Purpose of Disbursement  
Toner Post-its Cable Ties  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: District:

[MEMO ITEM]

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

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

# 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)

<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)  
Cole for Congress

A.

Full Name (Last, First, Middle Initial)  
Copelins Office Center

Mailing Address 425 W Main St

City State Zip Code  
Norman OK 73069

Purpose of Disbursement  
Copies

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX3819  
Date of Disbursement

08 / 09 / 2010

Amount of Each Disbursement this Period

39.16

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
USPS

Mailing Address 458 Lenfant Plaza Southwest

City State Zip Code  
Washington DC 20024

Purpose of Disbursement  
Postage

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX3820  
Date of Disbursement

08 / 09 / 2010

Amount of Each Disbursement this Period

18.94

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
Taco Mayo

Mailing Address 801 SW 11th St

City State Zip Code  
Lawton OK 73501

Purpose of Disbursement  
Food and Beverage

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX3821  
Date of Disbursement

08 / 09 / 2010

Amount of Each Disbursement this Period

11.20

[MEMO ITEM]

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

0.00

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

**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)

<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)  
Cole for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Braum's Ice Cream</p> <p>Mailing Address ShellNorth Interstate Drive</p> <p>City Norman State OK Zip Code 73072</p> <p>Purpose of Disbursement Food and Beverage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB17-EX3822</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="8.60"/></p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Daylight Donuts</p> <p>Mailing Address 1300 12 Ave SE</p> <p>City Norman State OK Zip Code 73071</p> <p>Purpose of Disbursement Food and Beverage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB17-EX3823</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="31.99"/></p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Oklahoma Turnpike</p> <p>Mailing Address 4401 W. Memorial Rd</p> <p>City Oklahoma City State OK Zip Code 73134</p> <p>Purpose of Disbursement Tolls</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB17-EX3824</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="21.90"/></p> <p><b>[MEMO ITEM]</b></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="0.00"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text" value=""/></p>

# 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)

<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)  
Cole for Congress

A.

Full Name (Last, First, Middle Initial)  
Nathan Atkins

Mailing Address 18317 English Oak Ln

City Edmond State OK Zip Code 73012

Purpose of Disbursement  
Mileage Reimbursement  
Candidate Name

002  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: District:

Transaction ID: SB17-EX3806  
Date of Disbursement

08 / 19 / 2010

Amount of Each Disbursement this Period

773.10

Mileage Reimbursement

B.

Full Name (Last, First, Middle Initial)  
Texoma Friends of the NRA

Mailing Address 121 W. Main

City Denison State TX Zip Code 75021

Purpose of Disbursement  
Event Sponsorship  
Candidate Name

007  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: District:

Transaction ID: SB17-EX3694  
Date of Disbursement

07 / 21 / 2010

Amount of Each Disbursement this Period

250.00

Event Sponsorship

C.

Full Name (Last, First, Middle Initial)  
Cleveland County Republicans

Mailing Address 1108 W Main

City Norman State OK Zip Code 73071

Purpose of Disbursement  
Office Rent  
Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: District:

Transaction ID: SB17-EX3721  
Date of Disbursement

09 / 20 / 2010

Amount of Each Disbursement this Period

2000.00

Office Rent

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

3023.10

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

# 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)

<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)  
Cole for Congress

A.	Full Name (Last, First, Middle Initial) Chorus Call Inc.  Mailing Address PO Box 3830  City Pittsburgh State PA Zip Code 15230  Purpose of Disbursement Telephone Conferencing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3717 Date of Disbursement 08 / 25 / 2010  Amount of Each Disbursement this Period 120.39  Telephone Conferencing
B.	Full Name (Last, First, Middle Initial) Chorus Call Inc.  Mailing Address PO Box 3830  City Pittsburgh State PA Zip Code 15230  Purpose of Disbursement Telephone Conferencing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3719 Date of Disbursement 09 / 20 / 2010  Amount of Each Disbursement this Period 14.42  Telephone Conferencing
C.	Full Name (Last, First, Middle Initial) Adam Rainbolt  Mailing Address 6226 Rivera Dr  City Oklahoma City State OK Zip Code 73112  Purpose of Disbursement Mileage Reimbursement Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3689 Date of Disbursement 07 / 14 / 2010  Amount of Each Disbursement this Period 204.50  Mileage Reimbursement

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

339.31

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

### 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)

<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)  
Cole for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Adam Rainbolt  Mailing Address 6226 Rivera Dr  City Oklahoma City State OK Zip Code 73112  Purpose of Disbursement Mileage Reimbursement Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17-EX3698 Date of Disbursement 07 / 20 / 2010  Amount of Each Disbursement this Period 60.40  Mileage Reimbursement
<b>B.</b>	Full Name (Last, First, Middle Initial) Adam Rainbolt  Mailing Address 6226 Rivera Dr  City Oklahoma City State OK Zip Code 73112  Purpose of Disbursement Mileage Reimbursement Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17-EX3807 Date of Disbursement 08 / 19 / 2010  Amount of Each Disbursement this Period 159.05  Mileage Reimbursement
<b>C.</b>	Full Name (Last, First, Middle Initial) Ally Roberts  Mailing Address 501 Maple St  City Ardmore State OK Zip Code 73401  Purpose of Disbursement Mileage Reimbursement Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17-EX3688 Date of Disbursement 07 / 14 / 2010  Amount of Each Disbursement this Period 63.20  Mileage Reimbursement

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

**282.65**

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



# 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 73 / 79

<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)  
Cole for Congress

A.	Full Name (Last, First, Middle Initial) Ally Roberts <hr/> Mailing Address 501 Maple St <hr/> City Ardmore State OK Zip Code 73401 <hr/> Purpose of Disbursement Mileage Reimbursement Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3699 Date of Disbursement 07 / 20 / 2010 <hr/> Amount of Each Disbursement this Period 39.50 <hr/> Mileage Reimbursement
B.	Full Name (Last, First, Middle Initial) Ally Roberts <hr/> Mailing Address 501 Maple St <hr/> City Ardmore State OK Zip Code 73401 <hr/> Purpose of Disbursement Mileage Reimbursement Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3808 Date of Disbursement 08 / 19 / 2010 <hr/> Amount of Each Disbursement this Period 68.00 <hr/> Mileage Reimbursement
C.	Full Name (Last, First, Middle Initial) Clayton Thornton <hr/> Mailing Address 1102 S Stanley St <hr/> City Stillwater State OK Zip Code 74074 <hr/> Purpose of Disbursement Mileage Reimbursement Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3686 Date of Disbursement 07 / 14 / 2010 <hr/> Amount of Each Disbursement this Period 482.35 <hr/> Mileage Reimbursement

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

**589.85**

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

.....

# 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)

<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)  
Cole for Congress

A.

Full Name (Last, First, Middle Initial)  
Clayton Thornton

Transaction ID: SB17-EX3700  
Date of Disbursement

Mailing Address 1102 S Stanley St

/   /

City Stillwater State OK Zip Code 74074

Amount of Each Disbursement this Period

Purpose of Disbursement  
Mileage Reimbursement  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: District:

Mileage Reimbursement

B.

Full Name (Last, First, Middle Initial)  
John Walker

Transaction ID: SB17-EX3687  
Date of Disbursement

Mailing Address 1817 E Lindsay St #1

/   /

City Norman State OK Zip Code 73071

Amount of Each Disbursement this Period

Purpose of Disbursement  
Mileage Reimbursement  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: District:

Mileage Reimbursement

C.

Full Name (Last, First, Middle Initial)  
John Walker

Transaction ID: SB17-EX3701  
Date of Disbursement

Mailing Address 1817 E Lindsay St #1

/   /

City Norman State OK Zip Code 73071

Amount of Each Disbursement this Period

Purpose of Disbursement  
Mileage Reimbursement  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: District:

Mileage Reimbursement

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

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

**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)

<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)  
Cole for Congress

A.	Full Name (Last, First, Middle Initial) John Walker  Mailing Address 1817 E Lindsay St #1  City Norman State OK Zip Code 73071  Purpose of Disbursement Mileage Reimbursement Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3804 Date of Disbursement 08 / 19 / 2010  Amount of Each Disbursement this Period 262.50  Mileage Reimbursement
B.	Full Name (Last, First, Middle Initial) Sarah Ferman  Mailing Address 1215 Ridgeway Dr  City Sherman State TX Zip Code 75092  Purpose of Disbursement Mileage Reimbursement Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3690 Date of Disbursement 07 / 14 / 2010  Amount of Each Disbursement this Period 261.75  Mileage Reimbursement
C.	Full Name (Last, First, Middle Initial) Clayton Thorton  Mailing Address 1102 S Stanley St  City Stillwater State OK Zip Code 74074  Purpose of Disbursement Mileage Reimbursement Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX3805 Date of Disbursement 08 / 19 / 2010  Amount of Each Disbursement this Period 480.60  Mileage Reimbursement

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1004.85
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# 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)

<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)  
Cole for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Embassy Suites  Mailing Address 2501 Conference Drive  City Norman State OK Zip Code 73069  Purpose of Disbursement Watch Party Event Expense - Venue Food and Beverage Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17-EX3706 Date of Disbursement 07 / 26 / 2010  Amount of Each Disbursement this Period 1421.00  Watch Party Event Expense - Venue Food and Beverage
<b>B.</b>	Full Name (Last, First, Middle Initial) Embassy Suites  Mailing Address 2501 Conference Drive  City Norman State OK Zip Code 73069  Purpose of Disbursement Event Internet Screen and Projector Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17-EX3713 Date of Disbursement 07 / 27 / 2010  Amount of Each Disbursement this Period 99.05  Event Internet Screen and Projector
<b>C.</b>	Full Name (Last, First, Middle Initial) Air Partners Inc.  Mailing Address 1100 Lee Wagener Blvd. Suite 328  City Fort Lauderdale State FL Zip Code 33315  Purpose of Disbursement Charter Airfare Expense Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17-EX3707 Date of Disbursement 07 / 28 / 2010  Amount of Each Disbursement this Period 7410.00  Charter Airfare Expense

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

8930.05

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

**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 77 / 79

<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)  
Cole for Congress

A.	Full Name (Last, First, Middle Initial) Four Seasons Shistler	Transaction ID: SB17-EX3771 Date of Disbursement 09 / 30 / 2010
	Mailing Address 4591 Blackcomb Way	Amount of Each Disbursement this Period 1725.00
	City Whistler State BC Zip Code Von 1	
	Purpose of Disbursement Event Travel and Lodging Candidate Name	007 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Event Travel and Lodging

B.	Full Name (Last, First, Middle Initial) Connoisseur Travel	Transaction ID: SB17-EX3772 Date of Disbursement 09 / 30 / 2010
	Mailing Address 2440 Virginia Avenue NW Ste. D-	Amount of Each Disbursement this Period 1322.18
	City Washington State DC Zip Code 20037	
	Purpose of Disbursement Event Travel and Lodging Candidate Name	007 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Event Travel and Lodging

C.	Full Name (Last, First, Middle Initial) UPS PAC	Transaction ID: SB17-CN11257 Date of Disbursement 07 / 16 / 2010
	Mailing Address 55 Glenlake Pkwy NE	Amount of Each Disbursement this Period 1023.00
	City Atlanta State GA Zip Code 30328	
	Purpose of Disbursement IN-KIND RECEIVED Facility Usage & Catering Candidate Name UPS PAC	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		In-Kind Received Facility Usage & Catering

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	4070.18
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**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 78 / 79

<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)  
Cole for Congress

A.	Full Name (Last, First, Middle Initial) Patrick Raffaniello		Transaction ID: SB17-CN11343	
	Mailing Address 1161 Old Gate Ct		Date of Disbursement 07 / 08 / 2010	
	City Mc Lean	State VA	Zip Code 22102	Amount of Each Disbursement this Period 461.59
	Purpose of Disbursement IN-KIND RECEIVED Cigars		Category/ Type	In-Kind Received Cigars
	Candidate Name			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	State: District:			

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

461.59

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

257519.20

**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 79 / 79

<input 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 checked="" type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Cole for Congress

A.

Full Name (Last, First, Middle Initial)  
Oklahoma Republican Party

Mailing Address 4031 N Lincoln Blvd

City Oklahoma City State OK Zip Code 73105

Purpose of Disbursement  
Transfer of Excess Funds

Candidate Name

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21-EX3720  
Date of Disbursement

09 / 21 / 2010

Amount of Each Disbursement this Period

10000.00

Transfer of Excess Funds

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

10000.00

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

10000.00