

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Cole for Congress

ADDRESS (number and street)

P.O. Box 722256

Check if different than previously reported. (ACC)

Norman

OK

73070

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00379735

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

OK

04

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y

11 / 29 / 2016

through

M M /

D D /

Y Y Y Y

12 / 31 / 2016

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

Nagel, Rick, , Mr.,

Type or Print Name of Treasurer

Nagel, Rick, , Mr.,

Signature of Treasurer

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

01 / 30 / 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office Use Only								
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**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**Cole for Congress**

Report Covering the Period: From:  /  /  To:  /  /

	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))....	500.00	500.00
(b) Total Contribution Refunds (from Line 20(d)) .....	.00	.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	500.00	500.00
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	39428.08	46679.84
(b) Total Offsets to Operating Expenditures (from Line 14).....	748.90	748.90
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	38679.18	45930.94
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	1262352.54	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	.00	

**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 05/2016)

Write or Type Committee Name

**Cole for Congress**

Report Covering the Period: From:  /  /  To:  /  /

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	500.00	500.00
(ii) Unitemized.....	.00	.00
(iii) TOTAL of contributions from individuals ▶	500.00	500.00
(b) Political Party Committees.....	.00	.00
(c) Other Political Committees (such as PACs).....	.00	.00
(d) The Candidate.....	.00	.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	500.00	500.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	.00	.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	.00	.00
(b) All Other Loans.....	.00	.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	.00	.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	748.90	748.90
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	881.45	881.45
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	2130.35	2130.35

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	39428.08	46679.84
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	.00	.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	.00	.00
(b) Of All Other Loans .....	.00	.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	.00	.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	.00	.00
(b) Political Party Committees.....	.00	.00
(c) Other Political Committees (such as PACs).....	.00	.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	.00	.00
21. OTHER DISBURSEMENTS .....	1000.00	1000.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	40428.08	47679.84

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1300650.27
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	2130.35
25. SUBTOTAL (add Line 23 and Line 24).....	1302780.62
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	40428.08
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1262352.54

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

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

FOR LINE NUMBER: PAGE 5 OF 20  
(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)  
**Porter, Robert, , Mr.,**

Mailing Address 194 Morris Ave

City Buffalo State NY Zip Code 14214

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

Name of Employer Robert Odawi Porter Esq. Occupation Attorney

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 28 2016

Transaction ID : SA11Ai-CN17827

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	500.00

# 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 6 OF 20	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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

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

Mailing Address 3060 Williams Drive Ste 200

City Fairfax	State VA	Zip Code 22031
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
748.90

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 20 / 2016

**Transaction ID : SA14-ER55**

Amount of Each Receipt this Period  
748.90

Memo Item  
Expenditure Refund

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	748.90
<b>TOTAL</b> This Period (last page this line number only).....▶	748.90

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

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

FOR LINE NUMBER: PAGE 7 OF 20  
(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 Of Commerce**

Mailing Address PO Box 70

City Duncan State OK Zip Code 73533

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

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
511.57

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 30 / 2016

Transaction ID : SA15-RC1583

Amount of Each Receipt this Period  
511.57

Memo Item  
Interest Earned

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	511.57
<b>TOTAL</b> This Period (last page this line number only).....▶	511.57

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

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

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

Full Name (Last, First, Middle Initial) <b>A. FEC Financial Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2016
Mailing Address 332 W Lee Hwy # 303		FEC Identification Number C
City Warrenton	State VA	Zip Code 20186
Purpose of Disbursement PAYMENT: SEE BELOW	Category/ Type 001	Amount of Each Disbursement this Period 1709.42
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Transaction ID : SB17-EX7641 <input type="checkbox"/> Memo Item PAYMENT: SEE BELOW	

Full Name (Last, First, Middle Initial) <b>B. FEC Financial Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2016
Mailing Address 332 W Lee Hwy # 303		FEC Identification Number C
City Warrenton	State VA	Zip Code 20186
Purpose of Disbursement Accounting Services	Category/ Type 001	Amount of Each Disbursement this Period 1650.00
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Transaction ID : SB17-EX7642 <input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. FEC Financial Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2016
Mailing Address 332 W Lee Hwy # 303		FEC Identification Number C
City Warrenton	State VA	Zip Code 20186
Purpose of Disbursement Postage Reimbursement	Category/ Type 001	Amount of Each Disbursement this Period 59.42
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Transaction ID : SB17-EX7643 <input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1709.42
<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 9 OF 20
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. Travelers</b>		M M / D D / Y Y Y Y 12 / 05 / 2016
Mailing Address CL & Specialty Remittance Center		FEC Identification Number
City Hartford	State CT	Zip Code 06183
Purpose of Disbursement Insurance	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	345.00	
Disbursement For: 2018	Transaction ID : SB17-EX7663	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="checkbox"/> Memo Item Insurance	
<input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. Key &amp; Associates</b>		M M / D D / Y Y Y Y 12 / 14 / 2016
Mailing Address 12176 Chancery Station Cir		FEC Identification Number
City Reston	State VA	Zip Code 20190
Purpose of Disbursement REIMBURSEMENT: SEE BELOW	Category/Type 003	
Candidate Name	Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	5044.22	
Disbursement For: 2018	Transaction ID : SB17-EX7650	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="checkbox"/> Memo Item REIMBURSEMENT: SEE BELOW	
<input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C. American Airlines</b>		M M / D D / Y Y Y Y 12 / 14 / 2016
Mailing Address PO Box 619612		FEC Identification Number
City Dallas	State TX	Zip Code 75261
Purpose of Disbursement Airfare	Category/Type 003	
Candidate Name	Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	382.20	
Disbursement For: 2018	Transaction ID : SB17-EX7651	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input checked="" type="checkbox"/> Memo Item	
<input type="checkbox"/> Other (specify) ▼		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5389.22
<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 10 OF 20	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Mortons Steakhouse</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2016	
Mailing Address 1050 Connecticut Ave			FEC Identification Number C	
City Washington	State DC	Zip Code 20036	Amount of Each Disbursement this Period 4146.76	
Purpose of Disbursement Food and Beverage		Category/ Type 003	Transaction ID : SB17-EX7652	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Key &amp; Associates</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2016	
Mailing Address 12176 Chancery Station Cir			FEC Identification Number C	
City Reston	State VA	Zip Code 20190	Amount of Each Disbursement this Period 20.00	
Purpose of Disbursement Taxi Reimbursement		Category/ Type 003	Transaction ID : SB17-EX7653	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Key &amp; Associates</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2016	
Mailing Address 12176 Chancery Station Cir			FEC Identification Number C	
City Reston	State VA	Zip Code 20190	Amount of Each Disbursement this Period 6.90	
Purpose of Disbursement Parking Reimbursement		Category/ Type 003	Transaction ID : SB17-EX7654	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<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)		PAGE 11 OF 20	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Key &amp; Associates</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2016	
Mailing Address 12176 Chancery Station Cir			FEC Identification Number C	
City Reston	State VA	Zip Code 20190	Amount of Each Disbursement this Period 32.25	
Purpose of Disbursement Postage Reimbursement		Category/ Type 003	Transaction ID : SB17-EX7655	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. The Willard Intercontinental</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2016	
Mailing Address 1401 Pennsylvania Ave NW			FEC Identification Number C	
City Washington	State DC	Zip Code 20004	Amount of Each Disbursement this Period 47.33	
Purpose of Disbursement Food and Beverage		Category/ Type 003	Transaction ID : SB17-EX7656	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Cigar Town</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2016	
Mailing Address 11903 Democracy Dr			FEC Identification Number C	
City Reston	State VA	Zip Code 20190	Amount of Each Disbursement this Period 318.50	
Purpose of Disbursement Cigars		Category/ Type 003	Transaction ID : SB17-EX7657	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<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)	PAGE 12 OF 20			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Capitol Hill Club</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2016		
Mailing Address 300 1st St SE			FEC Identification Number C		
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 90.28		
Purpose of Disbursement Food and Beverage		Category/ Type 003	Transaction ID : SB17-EX7658		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Credit Card Operations</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2016		
Mailing Address PO Box 22116			FEC Identification Number C		
City Tulsa	State OK	Zip Code 74121	Amount of Each Disbursement this Period 8028.58		
Purpose of Disbursement CREDIT CARD PAYMENT: SEE BELOW		Category/ Type 001	Transaction ID : SB17-EX7666		
Candidate Name		<input type="checkbox"/> Memo Item CREDIT CARD PAYMENT: SEE BELOW			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Credit Card Operations</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2016		
Mailing Address PO Box 22116			FEC Identification Number C		
City Tulsa	State OK	Zip Code 74121	Amount of Each Disbursement this Period 1446.45		
Purpose of Disbursement CREDIT CARD PAYMENT: SEE BELOW		Category/ Type 001	Transaction ID : SB17-EX7667		
Candidate Name		<input type="checkbox"/> Memo Item CREDIT CARD PAYMENT: SEE BELOW			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	9475.03
<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 13 OF 20	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2016
Mailing Address 3060 Williams Drive Ste 200		FEC Identification Number C
City Fairfax	State VA	Zip Code 22031
Purpose of Disbursement PAYROLL: SEE BELOW		001
Candidate Name		Amount of Each Disbursement this Period 15704.21
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17-EX7675
State: District:		<input type="checkbox"/> Memo Item PAYROLL: SEE BELOW

Full Name (Last, First, Middle Initial) <b>B. Cox, Sasha, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2016
Mailing Address 202 Chapel Ridge Rd Apt 1123		FEC Identification Number C
City Pauls Valley	State OK	Zip Code 73075
Purpose of Disbursement Net Salary		001
Candidate Name		Amount of Each Disbursement this Period 110.82
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Primary 2018	Transaction ID : SB17-EX7668
State: District:		<input checked="" type="checkbox"/> Memo Item Net Salary

Full Name (Last, First, Middle Initial) <b>c. Lyda, Dilan, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2016
Mailing Address 1111 Oaktree Ave Apt 215		FEC Identification Number C
City Norman	State OK	Zip Code 73072
Purpose of Disbursement Net Salary		001
Candidate Name		Amount of Each Disbursement this Period 155.14
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Primary 2018	Transaction ID : SB17-EX7669
State: District:		<input checked="" type="checkbox"/> Memo Item Net Salary

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	15704.21
<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 14 OF 20	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Williams, Makayla, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2016	
Mailing Address 1013 Renita Way			FEC Identification Number C	
City Oklahoma City	State OK	Zip Code 73160	Amount of Each Disbursement this Period 44.32	
Purpose of Disbursement Net Salary		Category/ Type 001	Transaction ID : SB17-EX7670	
Candidate Name		Memo Item Net Salary <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2018			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Chance, Scott, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2016	
Mailing Address 1613 Pinnacle Ln			FEC Identification Number C	
City Edmond	State OK	Zip Code 73003	Amount of Each Disbursement this Period 5117.52	
Purpose of Disbursement Net Salary		Category/ Type 001	Transaction ID : SB17-EX7671	
Candidate Name		Memo Item Net Salary <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2018			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Murphy, Sean, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2016	
Mailing Address 2401 Applehill Rd.			FEC Identification Number C	
City Alexandria	State VA	Zip Code 22308	Amount of Each Disbursement this Period 896.83	
Purpose of Disbursement Net Salary		Category/ Type 001	Transaction ID : SB17-EX7672	
Candidate Name		Memo Item Net Salary <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2018			
State: District:				

<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)	PAGE 15 OF 20			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Peters, Jeffrey, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2016		
Mailing Address 328 Woodcreek Rd			FEC Identification Number C		
City Edmond	State OK	Zip Code 73034	Amount of Each Disbursement this Period 4481.41		
Purpose of Disbursement Net Salary		Category/ Type 001	Transaction ID : SB17-EX7673		
Candidate Name		<input checked="" type="checkbox"/> Memo Item Net Salary			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Primary 2018				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2016		
Mailing Address 3060 Williams Drive Ste 200			FEC Identification Number C		
City Fairfax	State VA	Zip Code 22031	Amount of Each Disbursement this Period 4898.17		
Purpose of Disbursement Withholding Taxes		Category/ Type 001	Transaction ID : SB17-EX7674		
Candidate Name		<input checked="" type="checkbox"/> Memo Item Withholding Taxes			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Primary 2018				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Paychex</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2016		
Mailing Address 3060 Williams Drive Ste 200			FEC Identification Number C		
City Fairfax	State VA	Zip Code 22031	Amount of Each Disbursement this Period 114.52		
Purpose of Disbursement Payroll Service Fee		Category/ Type 001	Transaction ID : SB17-EX7676		
Candidate Name		<input type="checkbox"/> Memo Item Payroll Service Fee			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	114.52
<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 16 OF 20	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2016
Mailing Address 3060 Williams Drive Ste 200		FEC Identification Number C
City Fairfax	State VA	Zip Code 22031
Purpose of Disbursement PAYROLL: SEE BELOW		001
Candidate Name		Amount of Each Disbursement this Period 4575.13
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17-EX7681
State: District:		<input type="checkbox"/> Memo Item PAYROLL: SEE BELOW

Full Name (Last, First, Middle Initial) <b>B. Chance, Scott, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2016
Mailing Address 1613 Pinnacle Ln		FEC Identification Number C
City Edmond	State OK	Zip Code 73003
Purpose of Disbursement Net Salary		001
Candidate Name		Amount of Each Disbursement this Period 1917.52
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Primary 2018	Transaction ID : SB17-EX7677
State: District:		<input checked="" type="checkbox"/> Memo Item Net Salary

Full Name (Last, First, Middle Initial) <b>c. Murphy, Sean, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2016
Mailing Address 2401 Applehill Rd.		FEC Identification Number C
City Alexandria	State VA	Zip Code 22308
Purpose of Disbursement Net Salary		001
Candidate Name		Amount of Each Disbursement this Period 896.83
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Primary 2018	Transaction ID : SB17-EX7678
State: District:		<input checked="" type="checkbox"/> Memo Item Net Salary

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4575.13
<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 17 OF 20	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Peters, Jeffrey, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2016	
Mailing Address 328 Woodcreek Rd			FEC Identification Number C	
City Edmond	State OK	Zip Code 73034	Amount of Each Disbursement this Period 692.63	
Purpose of Disbursement Net Salary		Category/ Type 001	Transaction ID : SB17-EX7679	
Candidate Name		Memo Item <input checked="" type="checkbox"/> Net Salary		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Primary 2018			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2016	
Mailing Address 3060 Williams Drive Ste 200			FEC Identification Number C	
City Fairfax	State VA	Zip Code 22031	Amount of Each Disbursement this Period 1068.15	
Purpose of Disbursement Withholding Taxes		Category/ Type 001	Transaction ID : SB17-EX7680	
Candidate Name		Memo Item <input checked="" type="checkbox"/> Withholding Taxes		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Primary 2018			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Paychex</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2016	
Mailing Address 3060 Williams Drive Ste 200			FEC Identification Number C	
City Fairfax	State VA	Zip Code 22031	Amount of Each Disbursement this Period 99.80	
Purpose of Disbursement Payroll Service Fee		Category/ Type 001	Transaction ID : SB17-EX7682	
Candidate Name		Memo Item <input type="checkbox"/> Payroll Service Fee		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	99.80
<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 18 OF 20			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. United Parcel Service</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2016		
Mailing Address 55 Glenlake Parkway Northeast			FEC Identification Number C		
City Atlanta	State GA	Zip Code 30328	Amount of Each Disbursement this Period 429.95		
Purpose of Disbursement Delivery		Category/ Type 001	Transaction ID : SB17-EX7644		
Candidate Name		Memo Item Delivery			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. The Express Star</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2016		
Mailing Address 302 N 3rd St			FEC Identification Number C		
City Chickasha	State OK	Zip Code 73018	Amount of Each Disbursement this Period 283.50		
Purpose of Disbursement Print Advertising		Category/ Type 004	Transaction ID : SB17-EX7649		
Candidate Name		Memo Item Print Advertising			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. The Express Star</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2016		
Mailing Address 302 N 3rd St			FEC Identification Number C		
City Chickasha	State OK	Zip Code 73018	Amount of Each Disbursement this Period 287.75		
Purpose of Disbursement Print Advertising		Category/ Type 004	Transaction ID : SB17-EX7660		
Candidate Name		Memo Item Print Advertising			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1001.20
<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 19 OF 20			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. The Ardmoreite</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2016		
Mailing Address 117 W Broadway			FEC Identification Number C		
City Ardmore	State OK	Zip Code 73401	Amount of Each Disbursement this Period 296.10		
Purpose of Disbursement Print Advertising		Category/ Type 004	Transaction ID : <b>SB17-EX7648</b>		
Candidate Name		Memo Item Print Advertising			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. The Ardmoreite</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2016		
Mailing Address 117 W Broadway			FEC Identification Number C		
City Ardmore	State OK	Zip Code 73401	Amount of Each Disbursement this Period 296.10		
Purpose of Disbursement Print Advertising		Category/ Type 004	Transaction ID : <b>SB17-EX7659</b>		
Candidate Name		Memo Item Print Advertising			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. The Frederick Leader</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2016		
Mailing Address PO Box 690			FEC Identification Number C		
City Miamisburg	State OH	Zip Code 45343	Amount of Each Disbursement this Period 522.90		
Purpose of Disbursement Print Advertising		Category/ Type 004	Transaction ID : <b>SB17-EX7647</b>		
Candidate Name		Memo Item Print Advertising			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1115.10
<b>TOTAL</b> This Period (last page this line number only).....▶	39183.63

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

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

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

Full Name (Last, First, Middle Initial) <b>A. Scott Taylor For Congress</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2016		
Mailing Address PO Box 71596			FEC Identification Number C C00608703		
City Richmond	State VA	Zip Code 23255	Amount of Each Disbursement this Period 1000.00		
Purpose of Disbursement Debt Retirement		Category/ Type 011	Transaction ID : SB21-EX7684		
Candidate Name <b>Taylor, Scott, , ,</b>		Memo Item Debt Retirement			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: VA District: 02					

Full Name (Last, First, Middle Initial) <b>B.</b>			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Category/ Type	Memo Item		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C.</b>			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Category/ Type	Memo Item		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

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