

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

2. FEC IDENTIFICATION NUMBER C C00379735 3. IS THIS REPORT NEW (N) OR AMENDED (A) CITY STATE ZIP CODE STATE DISTRICT OK 04

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) X 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 07 / 01 / 2015 through M M / D D / Y Y Y Y 09 / 30 / 2015

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

Type or Print Name of Treasurer Mr. Rick Nagel

Signature of Treasurer Mr. Rick Nagel [Electronically Filed] Date M M / D D / Y Y Y Y 10 / 15 / 2015

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

Office Use Only grid and FEC FORM 3 (Revised 02/2003)

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 / D D / Y Y Y Y 07 / 01 / 2015 To: M M / D D / Y Y Y Y 09 / 30 / 2015

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	121529.55	680365.03
(b) Total Contribution Refunds (from Line 20(d)) .....	.00	8200.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	121529.55	672165.03
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	33572.22	215330.62
(b) Total Offsets to Operating Expenditures (from Line 14).....	.00	252.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	33572.22	215078.62
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1441950.53	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	.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 12/2003)

Write or Type Committee Name

Cole for Congress

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2015 To: M M / D D / Y Y Y Y 09 / 30 / 2015

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).....	68350.00	333674.08
(ii) Unitemized	4750.00	14690.00
(iii) TOTAL of contributions from individuals	73100.00	348364.08
(b) Political Party Committees.....	.00	.00
(c) Other Political Committees (such as PACs).....	48429.55	332000.95
(d) The Candidate .....	.00	.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	121529.55	680365.03
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	.00	.00
13. LOANS:		
(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
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	.00	252.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	1086.63	3052.26
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	122616.18	683669.29

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	33572.22	215330.62
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	5200.00
(b) Political Party Committees.....	.00	.00
(c) Other Political Committees (such as PACs).....	.00	3000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	.00	8200.00
21. OTHER DISBURSEMENTS .....	.00	20000.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	33572.22	243530.62

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1352906.57
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	122616.18
25. SUBTOTAL (add Line 23 and Line 24).....	1475522.75
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	33572.22
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1441950.53

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 70
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
AGS LLC

Mailing Address 5475 S Decatur Blvd
Ste 100

City Las Vegas State NV Zip Code 89118

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2015

Transaction ID : SA11Ai-CN15639

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Machill Tribal Construction

Mailing Address 19080 County Rd 1590

City Ada State OK Zip Code 74820

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2015

Transaction ID : SA11Ai-CN15601

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Christopher Cox

Mailing Address 2205 Windsor Rd

City Alexandria State VA Zip Code 22307

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

Name of Employer Occupation
 Navigators Global LLC Principal

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11Ai-CN15573

Amount of Each Receipt this Period
 500.00

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 6 OF 70
(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. Carl Barney

Mailing Address PO Box 1157

City State Zip Code
Crystal Bay NV 89402

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

Name of Employer Occupation
Prometheus Foundation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2015

Transaction ID : SA11Ai-CN15540

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Charles R Black

Mailing Address 601 N Fairfax St.
402

City State Zip Code
Alexandria VA 22314

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

Name of Employer Occupation
Prime Policy Group Chairman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2015

Transaction ID : SA11Ai-CN15532

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Mr. Doyce A Boesch

Mailing Address 4515 W Street NW

City State Zip Code
Washington DC 20007

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

Name of Employer Occupation
Self Govt Relations

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 27 / 2015

Transaction ID : SA11Ai-CN15529

Amount of Each Receipt this Period
 250.00

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

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

1750.00

**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 7 OF 70
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Cole for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Doyce A Boesch

Mailing Address 4515 W Street NW

City Washington State DC Zip Code 20007

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

Name of Employer Self Occupation Govt Relations

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 02 / 2015

Transaction ID : SA11Ai-CN15557

Amount of Each Receipt this Period
 150.00

Amount of Each Receipt this Period
 1150.00

B. Full Name (Last, First, Middle Initial)
Mrs. Casie L Cadieux

Mailing Address 6808 E 109th St.

City Tulsa State OK Zip Code 74133

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

Name of Employer Quick Trip Corp Occupation Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 23 / 2015

Transaction ID : SA11Ai-CN15558

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Michael K Callen

Mailing Address 3280 University Ave Ste 6

City Morgantown State WV Zip Code 26505

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

Name of Employer Self Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 18 / 2015

Transaction ID : SA11Ai-CN15547

Amount of Each Receipt this Period
 500.00

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

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

1650.00

**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 8 OF 70
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input 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)
Mr. Christopher Caron

Mailing Address 6771 River Rd

City Manassas State VA Zip Code 20111

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

Name of Employer Steptoe & Johnson Occupation Government Affairs

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 18 / 2015

Transaction ID : SA11Ai-CN15546

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. Mark Dreyfus

Mailing Address 5104 Oceanfront Ave

City Virginia Beach State VA Zip Code 23451

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

Name of Employer ECPI University Occupation Education manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 27 / 2015

Transaction ID : SA11Ai-CN15530

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Mr. T. Lane Epperson

Mailing Address 3801 Churchill Rd

City Oklahoma City State OK Zip Code 73165-7369

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

Name of Employer Hi Tech Assets Inc. Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 18 / 2015

Transaction ID : SA11Ai-CN15545

Amount of Each Receipt this Period
1500.00

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 9 OF 70
(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. Frank J Fahrenkopf Jr

Mailing Address 1110 Harvey Road

City State Zip Code
McLean VA 22101

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

Name of Employer Occupation
Self Lobbyist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2015

Transaction ID : SA11Ai-CN15533

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mitchell Fry

Mailing Address 307Mark Street

City State Zip Code
Oxford MD 21654

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

Name of Employer Occupation
Burns limited partnership Real estate management and investment

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 08 / 2015

Transaction ID : SA11Ai-CN15492

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Kenneth Glueck

Mailing Address 7122 Deer Valley Rd

City State Zip Code
Highland MD 20777

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

Name of Employer Occupation
Oracle Corporation Regulatory

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 07 / 2015

Transaction ID : SA11Ai-CN15475

Amount of Each Receipt this Period
1000.00

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

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

2000.00

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

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

FOR LINE NUMBER: PAGE 10 OF 70
(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. Van D Hipp Jr

Mailing Address 809 N Quaker Ln

City State Zip Code
Alexandria VA 22302-3416

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

Name of Employer Occupation
American Defense Chairman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 18 2015

Transaction ID : SA11Ai-CN15544

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Gary Huckabay

Mailing Address 4104 Ramsey Rd

City State Zip Code
Yukon OK 73099

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

Name of Employer Occupation
All America Bank Banker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 18 2015

Transaction ID : SA11Ai-CN15572

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Wade Huckabay

Mailing Address 9709 SW 32nd St

City State Zip Code
Oklahoma City OK 73179-1217

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

Name of Employer Occupation
All America Bank Banker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 18 2015

Transaction ID : SA11Ai-CN15566

Amount of Each Receipt this Period
500.00

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

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

1250.00

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

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

FOR LINE NUMBER: PAGE 11 OF 70
(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)
Saginaw Chippewa Indian Tribe

Mailing Address 7070 E Broadway Rd

City State Zip Code
Mount Pleasant MI 48858-8970

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

Name of Employer Occupation
Indian tribe Indian tribe

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 23 2015

Transaction ID : SA11Ai-CN15559

Amount of Each Receipt this Period
 2700.00

B. Full Name (Last, First, Middle Initial)
Poarch Creek Indians

Mailing Address 5811 Jack Springs Rd

City State Zip Code
Atmore AL 36502

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

Name of Employer Occupation
Indian Tribe Indian Tribe

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 13 2015

Transaction ID : SA11Ai-CN15534

Amount of Each Receipt this Period
 2700.00

C. Full Name (Last, First, Middle Initial)
Fraydun Manocherian

Mailing Address 18 E 50th St

City State Zip Code
New York NY 10022

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

Name of Employer Occupation
NY Health & Raquet Club Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 23 2015

Transaction ID : SA11Ai-CN15630

Amount of Each Receipt this Period
 5000.00

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

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

10400.00

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

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

FOR LINE NUMBER: PAGE 12 OF 70
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Cole for Congress

A. Full Name (Last, First, Middle Initial)
Fraydun Manocherian

Mailing Address 18 E 50th St

City New York State NY Zip Code 10022

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

Name of Employer NY Health & Raquet Club Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 24 / 2015

Transaction ID : SA11Ai-CN15651

Amount of Each Receipt this Period
 _____ -2300.00

Redesignated to General 2016

[MEMO ITEM]
Redesignated

B. Full Name (Last, First, Middle Initial)
Fraydun Manocherian

Mailing Address 18 E 50th St

City New York State NY Zip Code 10022

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

Name of Employer NY Health & Raquet Club Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 24 / 2015

Transaction ID : SA11Ai-CN15652

Amount of Each Receipt this Period
 _____ 2300.00

Redesignated from Primary 2016

[MEMO ITEM]
Redesignation

C. Full Name (Last, First, Middle Initial)
Gregory Manocherian

Mailing Address 18 E 50th St

City New York State NY Zip Code 10022

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

Name of Employer Self Occupation Developer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2015

Transaction ID : SA11Ai-CN15628

Amount of Each Receipt this Period
 _____ 5000.00

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

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

_____ 5000.00

**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 13 OF 70
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input 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)
Gregory Manocherian

Mailing Address 18 E 50th St

City State Zip Code
New York NY 10022

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

Name of Employer Occupation
Self Developer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 24 / 2015

Transaction ID : SA11Ai-CN15653

Amount of Each Receipt this Period
-2300.00

Redesignated to General 2016

[MEMO ITEM]
Redesignated

B. Full Name (Last, First, Middle Initial)
Gregory Manocherian

Mailing Address 18 E 50th St

City State Zip Code
New York NY 10022

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

Name of Employer Occupation
Self Developer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 24 / 2015

Transaction ID : SA11Ai-CN15654

Amount of Each Receipt this Period
2300.00

Redesignated from Primary 2016

[MEMO ITEM]
Redesignation

C. Full Name (Last, First, Middle Initial)
Michael Meagher

Mailing Address 3931 Williamsburg Rd

City State Zip Code
Dallas TX 75220

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

Name of Employer Occupation
Requested Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2015

Transaction ID : SA11Ai-CN15609

Amount of Each Receipt this Period
5000.00

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

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

5000.00

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

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

FOR LINE NUMBER: PAGE 14 OF 70
(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)
Michael Meagher

Mailing Address 3931 Williamsburg Rd

City State Zip Code
Dallas TX 75220

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

Name of Employer Requested Occupation Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 24 2015

Transaction ID : SA11Ai-CN15655

Amount of Each Receipt this Period
-2300.00

Redesignated to General 2016

[MEMO ITEM]
Redesignated

B. Full Name (Last, First, Middle Initial)
Michael Meagher

Mailing Address 3931 Williamsburg Rd

City State Zip Code
Dallas TX 75220

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

Name of Employer Requested Occupation Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 24 2015

Transaction ID : SA11Ai-CN15656

Amount of Each Receipt this Period
2300.00

Redesignated from Primary 2016

[MEMO ITEM]
Redesignation

C. Full Name (Last, First, Middle Initial)
Mrs. Melissa Mirsaeidi

Mailing Address 11810 S Oswego Ave

City State Zip Code
Tulsa OK 74137

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

Name of Employer Requested Occupation Requested
Claude Neon Federal Signs Account Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 23 2015

Transaction ID : SA11Ai-CN15603

Amount of Each Receipt this Period
1000.00

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

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

1000.00

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

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

FOR LINE NUMBER: PAGE 15 OF 70
(check only one)
 11a 12 11b 13a 11c 13b 11d 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 11581 Potrero Rd

City Banning State CA Zip Code 92220

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

Name of Employer Indian tribe Occupation Indian tribe

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2015

Transaction ID : SA11Ai-CN15541

Amount of Each Receipt this Period
1100.00

B. Full Name (Last, First, Middle Initial)
Mr. Paul Moorehead

Mailing Address 7700 NW Morningside Dr
Washington

City Washington State DC Zip Code 20012

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

Name of Employer powers pyles sutter and verville pc Occupation attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 17 / 2015

Transaction ID : SA11Ai-CN15563

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Paul Moorehead

Mailing Address 7700 NW Morningside Dr
Washington

City Washington State DC Zip Code 20012

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

Name of Employer powers pyles sutter and verville pc Occupation attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2015

Transaction ID : SA11Ai-CN15592

Amount of Each Receipt this Period
500.00

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

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

2100.00

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

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

FOR LINE NUMBER: PAGE 16 OF 70
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Cole for Congress

A. Full Name (Last, First, Middle Initial)
Osage Nation

Mailing Address 627 Grandview Avenue

City Pawhuska State OK Zip Code 74056

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

Name of Employer Indian tribe Occupation Indian tribe

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2015

Transaction ID : SA11Ai-CN15634

Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
Seminole Tribe Of Florida

Mailing Address 6300 Stirling Rd

City Hollywood State FL Zip Code 33024

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

Name of Employer Indian Tribe Occupation Indian Tribe

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11Ai-CN15642

Amount of Each Receipt this Period
 2700.00

C. Full Name (Last, First, Middle Initial)
Santa Ynez Band Of Mission Indians

Mailing Address PO Box 517

City Santa Ynez State CA Zip Code 93460

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

Name of Employer Indian Tribe Occupation Indian Tribe

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2015

Transaction ID : SA11Ai-CN15633

Amount of Each Receipt this Period
 1000.00

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

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

6200.00

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

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

FOR LINE NUMBER: PAGE 17 OF 70
(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. Daniel R Ortiz

Mailing Address 1440 Teal Ln

City Sherman State TX Zip Code 75092

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

Name of Employer Requested Occupation Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2015

Transaction ID : SA11Ai-CN15602

Amount of Each Receipt this Period
 300.00

B. Full Name (Last, First, Middle Initial)
Mr. Joseph L Parker Jr

Mailing Address 4124 S Rockford Ave Suite 201

City Tulsa State OK Zip Code 74105

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

Name of Employer Requested Occupation Requested
 Anchor Stone Co. Chairman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2015

Transaction ID : SA11Ai-CN15640

Amount of Each Receipt this Period
 500.00

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

Mailing Address PO Box 3008

City Mashantucket State CT Zip Code 06338

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

Name of Employer Requested Occupation Requested
 Indian tribe Indian tribe

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11Ai-CN15647

Amount of Each Receipt this Period
 2700.00

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

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

3500.00

**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 18 OF 70
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input 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)
Lytton Band of Pomo Indians

Mailing Address 13255 San Pablo Ave

City San Pablo	State CA	Zip Code 94806
-------------------	-------------	-------------------

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

Name of Employer Indian Tribe	Occupation Indian Tribe
----------------------------------	----------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 23 / 2015

Transaction ID : SA11Ai-CN15561

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
Lytton Band of Pomo Indians

Mailing Address 13255 San Pablo Ave

City San Pablo	State CA	Zip Code 94806
-------------------	-------------	-------------------

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

Name of Employer Indian Tribe	Occupation Indian Tribe
----------------------------------	----------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 23 / 2015

Transaction ID : SA11Ai-CN15562

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
Table Mountain Rancheria

Mailing Address PO Box 410

City Friant	State CA	Zip Code 93626
----------------	-------------	-------------------

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

Name of Employer Indian Tribe	Occupation Indian Tribe
----------------------------------	----------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11Ai-CN15643

Amount of Each Receipt this Period
2000.00

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

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

7400.00

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

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

FOR LINE NUMBER: PAGE 19 OF 70
(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)
Table Mountain Rancheria

Mailing Address **PO Box 410**

City **Friant** State **CA** Zip Code **93626**

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

Name of Employer **Indian Tribe** Occupation **Indian Tribe**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2015

Transaction ID : SA11Ai-CN15645

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
C. Michael Thornbrugh

Mailing Address **4005 W Twin Oaks PI**

City **Broken Arrow** State **OK** Zip Code **74011**

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

Name of Employer **Quiktrip** Occupation **Retail Sales**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 23 / 2015

Transaction ID : SA11Ai-CN15607

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Miccosukee Tribe

Mailing Address **PO Box 440021**

City **Miami** State **FL** Zip Code **33144**

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

Name of Employer **Indian Tribe** Occupation **Indian Tribe**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 23 / 2015

Transaction ID : SA11Ai-CN15635

Amount of Each Receipt this Period
2700.00

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

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

5900.00

**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 20 OF 70
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input 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)
The Tulalip Tribes of Washington

Mailing Address 6700 Totem Beach Rd.

City	State	Zip Code
Marysville	WA	98271

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

Name of Employer	Occupation
Tribe	Tribe

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 18 / 2015

Transaction ID : SA11Ai-CN15548

Amount of Each Receipt this Period
 2700.00

B. Full Name (Last, First, Middle Initial)
The Tulalip Tribes of Washington

Mailing Address 6700 Totem Beach Rd.

City	State	Zip Code
Marysville	WA	98271

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

Name of Employer	Occupation
Tribe	Tribe

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 18 / 2015

Transaction ID : SA11Ai-CN15549

Amount of Each Receipt this Period
 2300.00

C. Full Name (Last, First, Middle Initial)
Mr. Samish Tye

Mailing Address PO Box 161

City	State	Zip Code
Anacortes	WA	98221

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

Name of Employer	Occupation
Barona Band Of Indians	Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2015

Transaction ID : SA11Ai-CN15542

Amount of Each Receipt this Period
 2000.00

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

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

7000.00

**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 21 OF 70
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input 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)
Mr. Richard L Verity

Mailing Address 611 S Elm Pl

City Broken Arrow State OK Zip Code 74012

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

Name of Employer Pamax Management Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2015

Transaction ID : SA11Ai-CN15604

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Match-E-Be-Nash-She- Wish Bd Pottawatomi

Mailing Address P.O. Box 218

City Dorr State MI Zip Code 49323

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

Name of Employer Indian tribe Occupation Indian tribe

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11Ai-CN15644

Amount of Each Receipt this Period
 2700.00

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

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

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

3700.00

68350.00

**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 22 OF 70
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input 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)
Action Committee For Rural Electric

Mailing Address 4301 Wilson Blvd.

City State Zip Code
Arlington VA 22203-1860

FEC ID number of contributing federal political committee. **C** C00002972

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 18 / 2015

Transaction ID : SA11C-CN15550

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
American Crystal Sugar Co. PAC

Mailing Address 101 North Third Street

City State Zip Code
Moorhead MN 56560

FEC ID number of contributing federal political committee. **C** C00110338

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 23 / 2015

Transaction ID : SA11C-CN15631

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
American Crystal Sugar Co. PAC

Mailing Address 101 North Third Street

City State Zip Code
Moorhead MN 56560

FEC ID number of contributing federal political committee. **C** C00110338

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 23 / 2015

Transaction ID : SA11C-CN15632

Amount of Each Receipt this Period
2500.00

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

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

6000.00

**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 23 OF 70
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cole for Congress

A. American Federation of Government Employees PAC

Full Name (Last, First, Middle Initial)
Mailing Address 80 F St NW

City Washington State DC Zip Code 20001-1528

FEC ID number of contributing federal political committee. **C C00009936**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2015

Transaction ID : SA11C-CN15636

Amount of Each Receipt this Period
2500.00

B. American Society Of Plastic Surgeons PAC

Full Name (Last, First, Middle Initial)
Mailing Address 444 East Algonquin Road

City Arlington Heights State IL Zip Code 60005

FEC ID number of contributing federal political committee. **C C00249342**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11C-CN15646

Amount of Each Receipt this Period
2500.00

C. American Wind Energy Assn PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1501 M St NW
10th Floor

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00259572**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 18 / 2015

Transaction ID : SA11C-CN15551

Amount of Each Receipt this Period
1000.00

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

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

6000.00

**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 24 OF 70
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input 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)
Assoc. Of Private Sector Colleges PAC

Mailing Address 1101 Connecticut Ave NW
Ste 900

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00213066

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2015

Transaction ID : SA11C-CN15535

Amount of Each Receipt this Period
2500.00

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

Mailing Address 3005 Highland Parkway

City Downers Grove State IL Zip Code 60515

FEC ID number of contributing federal political committee. **C** C00198606

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2015

Transaction ID : SA11C-CN15536

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
EDMC EDU PAC

Mailing Address 210 Sixth Ave
33rd Floor

City Pittsburgh State PA Zip Code 15222

FEC ID number of contributing federal political committee. **C** C00466169

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2015

Transaction ID : SA11C-CN15537

Amount of Each Receipt this Period
1000.00

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

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

4500.00

**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 25 OF 70
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cole for Congress

A. Emergent Biosolutions Inc. Employee PAC

Full Name (Last, First, Middle Initial)
Mailing Address 400 Professional Dr
Ste 400
City Gaithersburg State MD Zip Code 20879

FEC ID number of contributing federal political committee. **C** C00380303

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 20 / 2015

Transaction ID : SA11C-CN15531

Amount of Each Receipt this Period
5000.00

B. Employees of Northrop Grumman PAC

Full Name (Last, First, Middle Initial)
Mailing Address 3699 Wilshire Blvd Ste 1290
City Los Angeles State CA Zip Code 90010

FEC ID number of contributing federal political committee. **C** C00088591

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 18 / 2015

Transaction ID : SA11C-CN15555

Amount of Each Receipt this Period
2500.00

C. Eye Of The Tiger PAC

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 2485
City Springfield State VA Zip Code 22152

FEC ID number of contributing federal political committee. **C** C00467431

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2015

Transaction ID : SA11C-CN15649

Amount of Each Receipt this Period
500.00

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

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

8000.00

**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 26 OF 70
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input 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)
FMR LLC PAC

Mailing Address 245 Summer Street
V5A

City Boston State MA Zip Code 02210

FEC ID number of contributing federal political committee. **C** C00380550

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 18 / 2015

Transaction ID : SA11C-CN15556

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Friends Of Medical Research PAC

Mailing Address 300 Independence Ave SE

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00566042

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2015

Transaction ID : SA11C-CN15637

Amount of Each Receipt this Period
 2700.00

C. Full Name (Last, First, Middle Initial)
Friends Of Medical Research PAC

Mailing Address 300 Independence Ave SE

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00566042

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2015

Transaction ID : SA11C-CN15638

Amount of Each Receipt this Period
 2300.00

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

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

6000.00

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

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

FOR LINE NUMBER: PAGE 27 OF 70
(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. General Electric PAC
 Full Name (Last, First, Middle Initial)
 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: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 18 / 2015
Transaction ID : SA11C-CN15554
 Amount of Each Receipt this Period
 1000.00
 3000.00

B. Goodyear Good Govt Fund
 Full Name (Last, First, Middle Initial)
 Mailing Address 1144 E Market St
 City Akron State OH Zip Code 44316-0001
 FEC ID number of contributing federal political committee. **C C00100131**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 18 / 2015
Transaction ID : SA11C-CN15567
 Amount of Each Receipt this Period
 1000.00
 3000.00

C. Huntington Ingalls Industries PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 M St SE Ste 350
 City Washington State DC Zip Code 20003
 FEC ID number of contributing federal political committee. **C C00325092**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 18 / 2015
Transaction ID : SA11C-CN15564
 Amount of Each Receipt this Period
 1000.00
 2000.00

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

3000.00
 3000.00

**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 28 OF 70
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input 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)
International Council Of Shopping Centers Inc PAC

Mailing Address 555 12th St NW

City Washington State DC Zip Code 20004-1209

FEC ID number of contributing federal political committee. **C C00217638**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 18 / 2015

Transaction ID : SA11C-CN15565

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Marathon Oil CO PAC

Mailing Address 539 S Main St.

City Findlay State OH Zip Code 45840

FEC ID number of contributing federal political committee. **C C00040568**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11C-CN15650

Amount of Each Receipt this Period
 2500.00

C. Full Name (Last, First, Middle Initial)
Nat'l Sorghum Producers PAC

Mailing Address 4201 N Interstate 27

City Lubbock State TX Zip Code 79403

FEC ID number of contributing federal political committee. **C C00475673**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2015

Transaction ID : SA11C-CN15629

Amount of Each Receipt this Period
 1000.00

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

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

4500.00

**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 29 OF 70
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input 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)
OGE Energy Corp. PAC

Mailing Address **PO Box 321**

City **Oklahoma City** State **OK** Zip Code **73101-0321**

FEC ID number of contributing federal political committee. **C C00337808**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 13 / 2015

Transaction ID : SA11C-CN15538

Amount of Each Receipt this Period
1000.00

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

Mailing Address **1100 Wilson Blvd Ste 1500**

City **Arlington** State **VA** Zip Code **22209**

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 18 / 2015

Transaction ID : SA11C-CN15553

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Rock Pac

Mailing Address **1605 King St.**

City **Alexandria** State **VA** Zip Code **22314**

FEC ID number of contributing federal political committee. **C C00089458**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 18 / 2015

Transaction ID : SA11C-CN15568

Amount of Each Receipt this Period
1000.00

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

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

3000.00

**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 30 OF 70
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cole for Congress

A. Scalise For Congress

Full Name (Last, First, Middle Initial)
Mailing Address 2900 Clearview Pkwy
Ste 206

City State Zip Code
Metairie LA 70006

FEC ID number of contributing federal political committee. **C C00394957**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2015

Transaction ID : SA11C-CN15648

Amount of Each Receipt this Period
2000.00

B. Society of Independent Gasoline Marketers PAC

Full Name (Last, First, Middle Initial)
Mailing Address 3930 Pender Dr
Ste 340

City State Zip Code
Fairfax VA 22030

FEC ID number of contributing federal political committee. **C C00120030**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
7000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 23 / 2015

Transaction ID : SA11C-CN15560

Amount of Each Receipt this Period
2000.00

C. UPS PAC

Full Name (Last, First, Middle Initial)
Mailing Address 55 Glenlake Pkwy NE

City State Zip Code
Atlanta GA 30328-3474

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
929.55

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 18 / 2015

Transaction ID : SA11C-CN15552

Amount of Each Receipt this Period
929.55

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

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

4929.55

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 OF 70
(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)
Westwood College Inc. Fund

Mailing Address **PO Box 101837**

City **Denver** State **CO** Zip Code **80250**

FEC ID number of contributing federal political committee. **C C00467589**

Name of Employer _____ Occupation _____

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 13 / 2015

Transaction ID : SA11C-CN15539

Amount of Each Receipt this Period
 _____ **2500.00**

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

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

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

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

_____ **2500.00**

_____ **48429.55**

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

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

FOR LINE NUMBER: PAGE 32 OF 70
(check only one)
 11a 11b 11c 11d 15
 12 13a 13b 14

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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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
200.98

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 01 / 2015

Transaction ID : SA15-RC1518

Amount of Each Receipt this Period
24.93

Interest Earned

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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
226.75

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 31 / 2015

Transaction ID : SA15-RC1514

Amount of Each Receipt this Period
25.77

Interest Earned

C. 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
252.53

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2015

Transaction ID : SA15-RC1516

Amount of Each Receipt this Period
25.78

Interest Earned

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

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

76.48

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

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

FOR LINE NUMBER: PAGE 33 OF 70
(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)
Banc2

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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
696.89

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 17 2015

Transaction ID : SA15-RC1508

Amount of Each Receipt this Period
76.79

Interest Earned

B. Full Name (Last, First, Middle Initial)
Banc2

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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
776.29

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 18 2015

Transaction ID : SA15-RC1509

Amount of Each Receipt this Period
79.40

Interest Earned

C. Full Name (Last, First, Middle Initial)
Republic Bank & Trust

Mailing Address PO Box 5369

City State Zip Code
Norman OK 73070

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
211.11

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 31 2015

Transaction ID : SA15-RC1517

Amount of Each Receipt this Period
25.85

Interest Earned

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

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

182.04

**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 34 OF 70
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Cole for Congress

A. Vision Bank

Full Name (Last, First, Middle Initial)
Vision Bank

Mailing Address 101 E Main

City State Zip Code
Ada OK 74820

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
244.11

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA15-RC1522

Amount of Each Receipt this Period
50.53

Interest Earned

B. Bank Of Commerce

Full Name (Last, First, Middle Initial)
Bank Of Commerce

Mailing Address PO Box 70

City State Zip Code
Duncan OK 73533

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.07

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 31 / 2015

Transaction ID : SA15-RC1512

Amount of Each Receipt this Period
213.00

Interest Earned

C. Bank Of Commerce

Full Name (Last, First, Middle Initial)
Bank Of Commerce

Mailing Address PO Box 70

City State Zip Code
Duncan OK 73533

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1213.29

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2015

Transaction ID : SA15-RC1513

Amount of Each Receipt this Period
213.22

Interest Earned

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

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

476.75

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

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

FOR LINE NUMBER: PAGE 35 OF 70
(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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1419.85

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2015

Transaction ID : SA15-RC1521

Amount of Each Receipt this Period
206.56

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

206.56

941.83

**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 OF 70			
	<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	
A. BB&T		M M / D D / Y Y Y Y 07 / 15 / 2015	
Mailing Address PO Box 200		Amount of Each Disbursement this Period	
City Wilson State NC Zip Code 27894		4.00	
Purpose of Disbursement Bank Service Charge		Transaction ID : SB17-EX6823	
Candidate Name		Bank Service Charge	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Category/Type	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B. BB&T		M M / D D / Y Y Y Y 08 / 21 / 2015	
Mailing Address PO Box 200		Amount of Each Disbursement this Period	
City Wilson State NC Zip Code 27894		69.00	
Purpose of Disbursement Bank Service Charge		Transaction ID : SB17-EX6824	
Candidate Name		Bank Service Charge	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Category/Type	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
C. BB&T		M M / D D / Y Y Y Y 09 / 22 / 2015	
Mailing Address PO Box 200		Amount of Each Disbursement this Period	
City Wilson State NC Zip Code 27894		4.00	
Purpose of Disbursement Bank Service Charge		Transaction ID : SB17-EX6876	
Candidate Name		Bank Service Charge	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Category/Type	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	77.00
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 37 OF 70	
	<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) A. Trail Blazer Campaign Services Inc.			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2015
Mailing Address 5115 Excelsior Blvd #103			Amount of Each Disbursement this Period 6500.00
City Minneapolis	State MN	Zip Code 55416	Transaction ID : SB17-EX6773
Purpose of Disbursement Reporting Software		001 Category/ Type	
Candidate Name			Reporting Software
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. FEC Financial Inc.			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2015
Mailing Address 332 W Lee Hwy # 303			Amount of Each Disbursement this Period 1055.88
City Warrenton	State VA	Zip Code 20186	Transaction ID : SB17-EX6780
Purpose of Disbursement PAYMENT: SEE BELOW		001 Category/ Type	
Candidate Name			PAYMENT: SEE BELOW
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. FEC Financial Inc.			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2015
Mailing Address 332 W Lee Hwy # 303			Amount of Each Disbursement this Period 1050.00
City Warrenton	State VA	Zip Code 20186	Transaction ID : SB17-EX6781
Purpose of Disbursement Accounting Services		001 Category/ Type	
Candidate Name			[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	7555.88
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 38 OF 70	
	<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) A. FEC Financial Inc.		Date of Disbursement MM / DD / YYYY 07 / 02 / 2015
Mailing Address 332 W Lee Hwy # 303		Amount of Each Disbursement this Period 5.88
City Warrenton	State VA Zip Code 20186	
Purpose of Disbursement Postage Reimbursement	Category/Type 001	Transaction ID : SB17-EX6782
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. FEC Financial Inc.		Date of Disbursement MM / DD / YYYY 08 / 13 / 2015
Mailing Address 332 W Lee Hwy # 303		Amount of Each Disbursement this Period 1052.94
City Warrenton	State VA Zip Code 20186	
Purpose of Disbursement PAYMENT: SEE BELOW	Category/Type 001	Transaction ID : SB17-EX6784
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	PAYMENT: SEE BELOW
State: District:		

Full Name (Last, First, Middle Initial) C. FEC Financial Inc.		Date of Disbursement MM / DD / YYYY 08 / 13 / 2015
Mailing Address 332 W Lee Hwy # 303		Amount of Each Disbursement this Period 1050.00
City Warrenton	State VA Zip Code 20186	
Purpose of Disbursement Accounting Services	Category/Type 001	Transaction ID : SB17-EX6785
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1052.94
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 39 OF 70			
	<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) A. FEC Financial Inc.		Date of Disbursement MM / DD / YYYY 08 / 13 / 2015
Mailing Address 332 W Lee Hwy # 303		Amount of Each Disbursement this Period 2.94
City Warrenton	State VA Zip Code 20186	
Purpose of Disbursement Postage Reimbursement	Category/Type 001	Transaction ID : SB17-EX6786
Candidate Name		
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. FEC Financial Inc.		Date of Disbursement MM / DD / YYYY 09 / 01 / 2015
Mailing Address 332 W Lee Hwy # 303		Amount of Each Disbursement this Period 1051.96
City Warrenton	State VA Zip Code 20186	
Purpose of Disbursement PAYMENT: SEE BELOW	Category/Type 001	Transaction ID : SB17-EX6789
Candidate Name		
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	PAYMENT: SEE BELOW
State: District:		

Full Name (Last, First, Middle Initial) C. FEC Financial Inc.		Date of Disbursement MM / DD / YYYY 09 / 01 / 2015
Mailing Address 332 W Lee Hwy # 303		Amount of Each Disbursement this Period 1050.00
City Warrenton	State VA Zip Code 20186	
Purpose of Disbursement Accounting Services	Category/Type 001	Transaction ID : SB17-EX6790
Candidate Name		
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1051.96
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 40 OF 70			
	<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) A. FEC Financial Inc.		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2015
Mailing Address 332 W Lee Hwy # 303		Amount of Each Disbursement this Period 9,999,999.99 1.96
City Warrenton	State VA		Zip Code 20186
Purpose of Disbursement Postage Reimbursement	Category/ Type 001	Transaction ID : SB17-EX6791 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. AT&T Mobility		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2015
Mailing Address PO Box 537104		Amount of Each Disbursement this Period 9,999,999.99 47.21
City Atlanta	State GA		Zip Code 30353
Purpose of Disbursement Telephone Expense	Category/ Type 001	Transaction ID : SB17-EX6787 Telephone Expense
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. AT&T Mobility		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2015
Mailing Address PO Box 537104		Amount of Each Disbursement this Period 9,999,999.99 47.21
City Atlanta	State GA		Zip Code 30353
Purpose of Disbursement Telephone Expense	Category/ Type 001	Transaction ID : SB17-EX6793 Telephone Expense
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	94.42
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 41 OF 70			
	<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
A. Travelers		M M / D D / Y Y Y Y 08 / 07 / 2015
Mailing Address CL & Specialty Remittance Center		Amount of Each Disbursement this Period
City Hartford	State CT	Zip Code 06183
Purpose of Disbursement Insurance Expense	Category/Type 001	282.00
Candidate Name	Disbursement For: 2016	Transaction ID : SB17-EX6822
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Insurance Expense
State: District:	<input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. AT&T		M M / D D / Y Y Y Y 07 / 06 / 2015
Mailing Address PO Box 105414		Amount of Each Disbursement this Period
City Atlanta	State GA	Zip Code 30348
Purpose of Disbursement Telephone	Category/Type 001	47.24
Candidate Name	Disbursement For: 2016	Transaction ID : SB17-EX6769
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Telephone
State: District:	<input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. AT&T		M M / D D / Y Y Y Y 07 / 06 / 2015
Mailing Address PO Box 105414		Amount of Each Disbursement this Period
City Atlanta	State GA	Zip Code 30348
Purpose of Disbursement Telephone	Category/Type 001	74.35
Candidate Name	Disbursement For: 2016	Transaction ID : SB17-EX6770
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Telephone
State: District:	<input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	403.59
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 42 OF 70			
	<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) A. AT&T		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2015
Mailing Address PO Box 105414		Amount of Each Disbursement this Period 74.35
City Atlanta	State GA	
Zip Code 30348	Purpose of Disbursement Telephone Expense	Transaction ID : SB17-EX6788
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Telephone Expense
State: District:		

Full Name (Last, First, Middle Initial) B. AT&T		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2015
Mailing Address PO Box 105414		Amount of Each Disbursement this Period 75.47
City Atlanta	State GA	
Zip Code 30348	Purpose of Disbursement Telephone Expense	Transaction ID : SB17-EX6792
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Telephone Expense
State: District:		

Full Name (Last, First, Middle Initial) c. Key & Associates		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2015
Mailing Address 12176 Chancery Station Cir		Amount of Each Disbursement this Period 8311.07
City Reston	State VA	
Zip Code 20190	Purpose of Disbursement REIMBURSEMENT: SEE BELOW	Transaction ID : SB17-EX6829
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	REIMBURSEMENT: SEE BELOW
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	8460.89
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 43 OF 70	
	<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) A. Joes Stone Crab		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 750 15th St NW		Amount of Each Disbursement this Period 1809.95
City Washington	State DC Zip Code 20005	
Purpose of Disbursement Food and Beverage	Category/Type 003	Transaction ID : SB17-EX6830 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Central Michel Richard		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 1001 Pennsylvania Ave NW		Amount of Each Disbursement this Period 873.15
City Washington	State DC Zip Code 20004	
Purpose of Disbursement Food and Beverage	Category/Type 003	Transaction ID : SB17-EX6831 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Capital Grille		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 601 Pennsylvania Ave. NW		Amount of Each Disbursement this Period 643.50
City Washington	State DC Zip Code 20004	
Purpose of Disbursement Food and Beverage	Category/Type 003	Transaction ID : SB17-EX6832 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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 44 OF 70			
	<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) A. Acqua AI 2			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2015
Mailing Address 212 7th Street Southeast			Amount of Each Disbursement this Period 792.00
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement Food and Beverage		Category/ Type 003	Transaction ID : SB17-EX6833 [MEMO ITEM]
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) B. Skirvin Hilton			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2015
Mailing Address One Park Ave			Amount of Each Disbursement this Period 1109.80
City Oklahoma City	State OK	Zip Code 73102	
Purpose of Disbursement Catering		Category/ Type 003	Transaction ID : SB17-EX6834 [MEMO ITEM]
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) c. Capitol Hill Club			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2015
Mailing Address 300 1st St SE			Amount of Each Disbursement this Period 1794.51
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement Food and Beverage		Category/ Type 003	Transaction ID : SB17-EX6835 [MEMO ITEM]
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

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 45 OF 70			
	<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) A. Cairo Wine & Liquor			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2015		
Mailing Address 1618 17th St NW			Amount of Each Disbursement this Period 424.80		
City Washington	State DC	Zip Code 20009	Transaction ID : SB17-EX6836		
Purpose of Disbursement Food and Beverage		Category/ Type 003	[MEMO ITEM]		
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. Simplicity Catering			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2015		
Mailing Address 6402 Arlington Blvd			Amount of Each Disbursement this Period 220.00		
City Falls Church	State VA	Zip Code 22042	Transaction ID : SB17-EX6837		
Purpose of Disbursement Catering		Category/ Type 003	[MEMO ITEM]		
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) C. USPS			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2015		
Mailing Address 458 Lenfant Plaza Southwest			Amount of Each Disbursement this Period 19.70		
City Washington	State DC	Zip Code 20024	Transaction ID : SB17-EX6838		
Purpose of Disbursement Postage		Category/ Type 003	[MEMO ITEM]		
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

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 46 OF 70			
	<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) A. Chick-fil-A		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2015
Mailing Address 2200 Crystal Dr		Amount of Each Disbursement this Period 481.25
City Arlington	State VA	
Zip Code 22202	Purpose of Disbursement Food and Beverage	Transaction ID : SB17-EX6839
Candidate Name	003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Key & Associates		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2015
Mailing Address 12176 Chancery Station Cir		Amount of Each Disbursement this Period 142.41
City Reston	State VA	
Zip Code 20190	Purpose of Disbursement Parking Reimbursemenmt	Transaction ID : SB17-EX6840
Candidate Name	003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Credit Card Operations		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2015
Mailing Address PO Box 22116		Amount of Each Disbursement this Period 1554.75
City Tulsa	State OK	
Zip Code 74121	Purpose of Disbursement CREDIT CARD PAYMENT: SEE BELOW	Transaction ID : SB17-EX6808
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CREDIT CARD PAYMENT: SEE BELOW
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1554.75
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 OF 70			
	<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) A. Hobby-Lobby		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2015
Mailing Address 555 W Main St		Amount of Each Disbursement this Period 473.59
City Norman	State OK	
Zip Code 73069	Purpose of Disbursement Event Decorations	Transaction ID : SB17-EX6794
Candidate Name	007 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Event Decorations
State: District:		

Full Name (Last, First, Middle Initial) B. Viceroy Grille		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2015
Mailing Address 1200 N Walker Ave		Amount of Each Disbursement this Period 132.96
City Oklahoma City	State OK	
Zip Code 73103	Purpose of Disbursement Food and Beverage	Transaction ID : SB17-EX6795
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Food and Beverage
State: District:		

Full Name (Last, First, Middle Initial) c. Laughing Squid		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2015
Mailing Address 320 W 38th St # 1505		Amount of Each Disbursement this Period 6.00
City New York	State NY	
Zip Code 10018	Purpose of Disbursement Website Hosting	Transaction ID : SB17-EX6797
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Website Hosting
State: District:		

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 48 OF 70	
	<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) A. Switzer's Locker Room		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2015
Mailing Address 905 SE 19th		Amount of Each Disbursement this Period 124.00
City Moore	State OK Zip Code 73160	
Purpose of Disbursement Storage Expense	Category/Type 001	Transaction ID : SB17-EX6798
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Storage Expense
State: District:		

Full Name (Last, First, Middle Initial) B. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2015
Mailing Address 300 1st St SE		Amount of Each Disbursement this Period 136.62
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Food and Beverage	Category/Type 001	Transaction ID : SB17-EX6799
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Food and Beverage
State: District:		

Full Name (Last, First, Middle Initial) c. Murphy's Irish Pub		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2015
Mailing Address 713 King St		Amount of Each Disbursement this Period 80.00
City Alexandria	State VA Zip Code 22314	
Purpose of Disbursement Food and Beverage	Category/Type 001	Transaction ID : SB17-EX6800
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Food and Beverage
State: District:		

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 49 OF 70			
	<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) A. Shelly's Back Room		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2015
Mailing Address 1331 F St NW		Amount of Each Disbursement this Period 91.00
City Washington	State DC	
Zip Code 20004	Purpose of Disbursement Food and Beverage	Transaction ID : SB17-EX6801
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Food and Beverage
State: District:		

Full Name (Last, First, Middle Initial) B. Grille District		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2015
Mailing Address Reagan National Airport		Amount of Each Disbursement this Period 15.00
City Arlington	State VA	
Zip Code 22202	Purpose of Disbursement Food and Beverage	Transaction ID : SB17-EX6802
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Food and Beverage
State: District:		

Full Name (Last, First, Middle Initial) c. Kingside		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2015
Mailing Address 124 W 57th St		Amount of Each Disbursement this Period 118.00
City New York	State NY	
Zip Code 10019	Purpose of Disbursement Food and Beverage	Transaction ID : SB17-EX6803
Candidate Name	007 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Food and Beverage
State: District:		

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 50 OF 70	
	<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) A. BFS Foods		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2015
Mailing Address 4008 National Pike		Amount of Each Disbursement this Period 34.00
City Accident	State MD		Transaction ID : SB17-EX6804
Zip Code 21520		[MEMO ITEM] Food and Beverage
Purpose of Disbursement Food and Beverage	Category/ Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	
State: District:		

Full Name (Last, First, Middle Initial) B. Royal Pipes And Tobacco		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2015
Mailing Address 105 East Boyd St		Amount of Each Disbursement this Period 147.60
City Norman	State OK		Transaction ID : SB17-EX6805
Zip Code 73069		[MEMO ITEM] Host Gifts
Purpose of Disbursement Host Gifts	Category/ Type 007	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	
State: District:		

Full Name (Last, First, Middle Initial) c. NWL Corp		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2015
Mailing Address 1001 Lafayette Dr		Amount of Each Disbursement this Period 165.82
City Farmington	State PA		Transaction ID : SB17-EX6806
Zip Code 15437		[MEMO ITEM] Lodging
Purpose of Disbursement Lodging	Category/ Type 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	
State: District:		

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 51 OF 70			
	<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	
A. USPS		M M / D D / Y Y Y Y 07 / 28 / 2015	
Mailing Address 458 Lenfant Plaza Southwest		Amount of Each Disbursement this Period	
City Washington State DC Zip Code 20024		30.16	
Purpose of Disbursement Postage		Transaction ID : SB17-EX6807	
Candidate Name		[MEMO ITEM] Postage	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016	
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	
		Category/Type 001	

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B. Credit Card Operations		M M / D D / Y Y Y Y 09 / 03 / 2015	
Mailing Address PO Box 22116		Amount of Each Disbursement this Period	
City Tulsa State OK Zip Code 74121		2679.58	
Purpose of Disbursement CREDIT CARD PAYMENT: SEE BELOW		Transaction ID : SB17-EX6819	
Candidate Name		CREDIT CARD PAYMENT: SEE BELOW	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016	
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Category/Type 001	

Full Name (Last, First, Middle Initial)		Date of Disbursement	
c. Staples		M M / D D / Y Y Y Y 09 / 03 / 2015	
Mailing Address 128 W I-240 Services Road		Amount of Each Disbursement this Period	
City Oklahoma City State OK Zip Code 73139		51.40	
Purpose of Disbursement Copy Paper		Transaction ID : SB17-EX6809	
Candidate Name		[MEMO ITEM] Copy Paper	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016	
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	
		Category/Type 001	

SUBTOTAL of Disbursements This Page (optional).....	2679.58
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 52 OF 70			
	<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) A. McCormick & Schmick's			Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2015		
Mailing Address 1652 K St NW			Amount of Each Disbursement this Period 1338.89		
City Washington	State DC	Zip Code 20006	Transaction ID : SB17-EX6810		
Purpose of Disbursement Food and Beverage		Category/ Type 007	[MEMO ITEM] Food and Beverage		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016				
State: District:					

Full Name (Last, First, Middle Initial) B. Capital Grille			Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2015		
Mailing Address 601 Pennsylvania Ave. NW			Amount of Each Disbursement this Period 148.48		
City Washington	State DC	Zip Code 20004	Transaction ID : SB17-EX6811		
Purpose of Disbursement Food and Beverage		Category/ Type 001	[MEMO ITEM] Food and Beverage		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016				
State: District:					

Full Name (Last, First, Middle Initial) C. Switzer's Locker Room			Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2015		
Mailing Address 905 SE 19th			Amount of Each Disbursement this Period 124.00		
City Moore	State OK	Zip Code 73160	Transaction ID : SB17-EX6812		
Purpose of Disbursement Storage Expense		Category/ Type 001	[MEMO ITEM] Storage Expense		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016				
State: District:					

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 53 OF 70	
	<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) A. Amazon.com		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 1200 12th Ave. S. Suite 1200		Amount of Each Disbursement this Period 123.60
City Seattle	State WA	
Zip Code 98144	Purpose of Disbursement Research Materials	Transaction ID : SB17-EX6813
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Research Materials
State: District:		

Full Name (Last, First, Middle Initial) B. Capitol Hill Club		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 300 1st St SE		Amount of Each Disbursement this Period 562.39
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Food and Beverage	Transaction ID : SB17-EX6814
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Food and Beverage
State: District:		

Full Name (Last, First, Middle Initial) c. Ampco System Parking		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 7100 E. Terminal Road		Amount of Each Disbursement this Period 12.00
City Oklahoma City	State OK	
Zip Code 73159	Purpose of Disbursement Parking	Transaction ID : SB17-EX6815
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Parking
State: District:		

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 54 OF 70			
	<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

A. Fish Market

Full Name (Last, First, Middle Initial)
Mailing Address 105 King St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement Food and Beverage
Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) Primary 2016

State: District:

Date of Disbursement: 09 / 03 / 2015

Amount of Each Disbursement this Period: 110.00

Transaction ID : SB17-EX6816

[MEMO ITEM]
Food and Beverage

B. Royal Pipes And Tobacco

Full Name (Last, First, Middle Initial)
Mailing Address 105 East Boyd St

City Norman State OK Zip Code 73069

Purpose of Disbursement Host Gifts
Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) Primary 2016

State: District:

Date of Disbursement: 09 / 03 / 2015

Amount of Each Disbursement this Period: 167.70

Transaction ID : SB17-EX6817

[MEMO ITEM]
Host Gifts

c. VIP Cab Co.

Full Name (Last, First, Middle Initial)
Mailing Address 85 South Bragg Street Suite 202

City Alexandria State VA Zip Code 22312

Purpose of Disbursement Taxi Fare
Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) Primary 2016

State: District:

Date of Disbursement: 09 / 03 / 2015

Amount of Each Disbursement this Period: 41.12

Transaction ID : SB17-EX6818

[MEMO ITEM]
Taxi Fare

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 55 OF 70			
	<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)
A. 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: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
09 / 23 / 2015

Amount of Each Disbursement this Period
2665.88

Transaction ID : SB17-EX6855

CREDIT CARD PAYMENT: SEE BELOW

Category/Type
001

Full Name (Last, First, Middle Initial)
B. Laughing Squid

Mailing Address 320 W 38th St # 1505

City New York State NY Zip Code 10018

Purpose of Disbursement
Website Hosting

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) Primary 2016

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
09 / 23 / 2015

Amount of Each Disbursement this Period
6.00

Transaction ID : SB17-EX6841

[MEMO ITEM]
Website Hosting

Category/Type
001

Full Name (Last, First, Middle Initial)
c. Broadway 10

Mailing Address 1101 North Broadway Ave

City Oklahoma City State OK Zip Code 73103

Purpose of Disbursement
Food and Beverage

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) Primary 2016

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
09 / 23 / 2015

Amount of Each Disbursement this Period
445.91

Transaction ID : SB17-EX6842

[MEMO ITEM]
Food and Beverage

Category/Type
007

SUBTOTAL of Disbursements This Page (optional)..... 2665.88

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 56 OF 70			
	<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) A. Choctaw Durant Resort		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2015
Mailing Address 3735 Choctaw Rd		Amount of Each Disbursement this Period 671.60
City Durant	State OK	
Zip Code 74701	Purpose of Disbursement Lodging	Transaction ID : SB17-EX6844
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Lodging
State: District:		

Full Name (Last, First, Middle Initial) B. Choctaw Durant Resort		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2015
Mailing Address 3735 Choctaw Rd		Amount of Each Disbursement this Period 279.19
City Durant	State OK	
Zip Code 74701	Purpose of Disbursement Food and Beverage	Transaction ID : SB17-EX6845
Candidate Name	Category/Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Food and Beverage
State: District:		

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2015
Mailing Address 458 Lenfant Plaza Southwest		Amount of Each Disbursement this Period 158.50
City Washington	State DC	
Zip Code 20024	Purpose of Disbursement Postage	Transaction ID : SB17-EX6846
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Postage
State: District:		

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 57 OF 70			
	<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

A. Legends Restaurant

Full Name (Last, First, Middle Initial)
Mailing Address 1313 W Lindsey Street

City Norman State OK Zip Code 73069

Purpose of Disbursement Food and Beverage Category/Type 007

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) Primary 2016

State: District:

Date of Disbursement 09 / 23 / 2015

Amount of Each Disbursement this Period 285.29

Transaction ID : SB17-EX6847

[MEMO ITEM]
Food and Beverage

B. Switzer's Locker Room

Full Name (Last, First, Middle Initial)
Mailing Address 905 SE 19th

City Moore State OK Zip Code 73160

Purpose of Disbursement Storage Expense Category/Type 001

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) Primary 2016

State: District:

Date of Disbursement 09 / 23 / 2015

Amount of Each Disbursement this Period 124.00

Transaction ID : SB17-EX6848

[MEMO ITEM]
Storage Expense

c. Capitol Hill Club

Full Name (Last, First, Middle Initial)
Mailing Address 300 1st St SE

City Washington State DC Zip Code 20003

Purpose of Disbursement Food and Beverage Category/Type 001

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) Primary 2016

State: District:

Date of Disbursement 09 / 23 / 2015

Amount of Each Disbursement this Period 96.07

Transaction ID : SB17-EX6849

[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 58 OF 70			
	<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) A. Marriott Tulsa			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2015	
Mailing Address 1902 East 71st St			Amount of Each Disbursement this Period 425.82	
City Tulsa	State OK	Zip Code 74136	Transaction ID : SB17-EX6850	
Purpose of Disbursement Lodging		Category/ Type 002	[MEMO ITEM] Lodging	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016			
State: District:				

Full Name (Last, First, Middle Initial) B. United Air			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2015	
Mailing Address PO Box 66100			Amount of Each Disbursement this Period 50.00	
City Amf Ohare	State IL	Zip Code 60666	Transaction ID : SB17-EX6851	
Purpose of Disbursement Baggage Fees		Category/ Type 002	[MEMO ITEM] Baggage Fees	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016			
State: District:				

Full Name (Last, First, Middle Initial) c. United Air			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2015	
Mailing Address PO Box 66100			Amount of Each Disbursement this Period 14.50	
City Amf Ohare	State IL	Zip Code 60666	Transaction ID : SB17-EX6852	
Purpose of Disbursement Food and Beverage		Category/ Type 002	[MEMO ITEM] Food and Beverage	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016			
State: District:				

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 OF 70			
	<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) A. Casa Romo Cocina Mexicana		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2015
Mailing Address 120 W Main St		Amount of Each Disbursement this Period 44.00
City Ardmore	State OK Zip Code 73401	
Purpose of Disbursement Food and Beverage	Category/Type 001	Transaction ID : SB17-EX6853
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Food and Beverage
State: District:		

Full Name (Last, First, Middle Initial) B. FireFlies		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2015
Mailing Address 1501 Mt Vernon Ave		Amount of Each Disbursement this Period 65.00
City Alexandria	State VA Zip Code 22301	
Purpose of Disbursement Food and Beverage	Category/Type 001	Transaction ID : SB17-EX6854
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Food and Beverage
State: District:		

Full Name (Last, First, Middle Initial) c. Tom Cole		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2015
Mailing Address PO Box 722256		Amount of Each Disbursement this Period 36.00
City Norman	State OK Zip Code 73070	
Purpose of Disbursement Taxi Fare Reimbursement	Category/Type 002	Transaction ID : SB17-EX6872
Candidate Name Tom Cole		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Taxi Fare Reimbursement
State: OK District: 04		

SUBTOTAL of Disbursements This Page (optional).....	36.00
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 60 OF 70	
	<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) A. Paychex		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2015
Mailing Address 3060 Williams Drive Ste 200		Amount of Each Disbursement this Period 2194.40
City Fairfax	State VA	
Zip Code 22031	Purpose of Disbursement PAYROLL: SEE BELOW	Transaction ID : SB17-EX6859
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	PAYROLL: SEE BELOW
State: District:		

Full Name (Last, First, Middle Initial) B. Sean Murphy		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2015
Mailing Address 2401 Applehill Rd.		Amount of Each Disbursement this Period 896.83
City Alexandria	State VA	
Zip Code 22308	Purpose of Disbursement Net Salary	Transaction ID : SB17-EX6856
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Net Salary
State: District:		

Full Name (Last, First, Middle Initial) c. Jeffrey Peters		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2015
Mailing Address 328 Woodcreek Rd		Amount of Each Disbursement this Period 923.50
City Edmond	State OK	
Zip Code 73034	Purpose of Disbursement Net Salary	Transaction ID : SB17-EX6857
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Net Salary
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2194.40
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 61 OF 70			
	<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	
A. Paychex		M M / D D / Y Y Y Y 07 / 31 / 2015	
Mailing Address 3060 Williams Drive Ste 200		Amount of Each Disbursement this Period	
City Fairfax State VA Zip Code 22031		374.07	
Purpose of Disbursement Withholding Taxes		Transaction ID : SB17-EX6858	
Candidate Name		[MEMO ITEM] Withholding Taxes	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016	
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	
Category/Type			
001			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B. Paychex		M M / D D / Y Y Y Y 07 / 31 / 2015	
Mailing Address 3060 Williams Drive Ste 200		Amount of Each Disbursement this Period	
City Fairfax State VA Zip Code 22031		134.37	
Purpose of Disbursement Payroll Processing Fee		Transaction ID : SB17-EX6860	
Candidate Name		Payroll Processing Fee	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016	
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Category/Type			
001			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
C. Paychex		M M / D D / Y Y Y Y 08 / 31 / 2015	
Mailing Address 3060 Williams Drive Ste 200		Amount of Each Disbursement this Period	
City Fairfax State VA Zip Code 22031		1966.90	
Purpose of Disbursement PAYROLL: SEE BELOW		Transaction ID : SB17-EX6864	
Candidate Name		PAYROLL: SEE BELOW	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016	
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Category/Type			
001			

SUBTOTAL of Disbursements This Page (optional).....	2101.27
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 62 OF 70	
	<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) A. Sean Murphy		Date of Disbursement MM / DD / YYYY 08 / 31 / 2015
Mailing Address 2401 Applehill Rd.		Amount of Each Disbursement this Period 896.83
City Alexandria	State VA	
Zip Code 22308	Purpose of Disbursement Net Salary	Transaction ID : SB17-EX6861
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Net Salary
State: District:		

Full Name (Last, First, Middle Initial) B. Jeffrey Peters		Date of Disbursement MM / DD / YYYY 08 / 31 / 2015
Mailing Address 328 Woodcreek Rd.		Amount of Each Disbursement this Period 738.80
City Edmond	State OK	
Zip Code 73034	Purpose of Disbursement Net Salary	Transaction ID : SB17-EX6862
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Net Salary
State: District:		

Full Name (Last, First, Middle Initial) c. Paychex		Date of Disbursement MM / DD / YYYY 08 / 31 / 2015
Mailing Address 3060 Williams Drive Ste 200		Amount of Each Disbursement this Period 331.27
City Fairfax	State VA	
Zip Code 22031	Purpose of Disbursement Withholding Taxes	Transaction ID : SB17-EX6863
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Withholding Taxes
State: District:		

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 63 OF 70			
	<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) A. Paychex		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2015
Mailing Address 3060 Williams Drive Ste 200		Amount of Each Disbursement this Period 115.87
City Fairfax	State VA	Zip Code 22031
Purpose of Disbursement Payroll Processing Fee	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX6865
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Payroll Processing Fee
State: District:		

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2015
Mailing Address 3060 Williams Drive Ste 200		Amount of Each Disbursement this Period 1938.50
City Fairfax	State VA	Zip Code 22031
Purpose of Disbursement PAYROLL: SEE BELOW	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX6869
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	PAYROLL: SEE BELOW
State: District:		

Full Name (Last, First, Middle Initial) c. Sean Murphy		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2015
Mailing Address 2401 Applehill Rd.		Amount of Each Disbursement this Period 896.83
City Alexandria	State VA	Zip Code 22308
Purpose of Disbursement Net Salary	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX6866
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Net Salary
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2054.37
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 64 OF 70			
	<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) A. Jeffrey Peters			Date of Disbursement MM / DD / YYYY 09 / 30 / 2015	
Mailing Address 328 Woodcreek Rd			Amount of Each Disbursement this Period 738.80	
City Edmond	State OK	Zip Code 73034	Transaction ID : SB17-EX6867	
Purpose of Disbursement Net Salary		Category/ Type 001	[MEMO ITEM] Net Salary	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016			
State: District:				

Full Name (Last, First, Middle Initial) B. Paychex			Date of Disbursement MM / DD / YYYY 09 / 30 / 2015	
Mailing Address 3060 Williams Drive Ste 200			Amount of Each Disbursement this Period 302.87	
City Fairfax	State VA	Zip Code 22031	Transaction ID : SB17-EX6868	
Purpose of Disbursement Withholding Taxes		Category/ Type 001	[MEMO ITEM] Withholding Taxes	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016			
State: District:				

Full Name (Last, First, Middle Initial) c. Paychex			Date of Disbursement MM / DD / YYYY 09 / 30 / 2015	
Mailing Address 3060 Williams Drive Ste 200			Amount of Each Disbursement this Period 165.87	
City Fairfax	State VA	Zip Code 22031	Transaction ID : SB17-EX6870	
Purpose of Disbursement Payroll Processing Fee		Category/ Type 001	Payroll Processing Fee	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	165.87
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 65 OF 70			
	<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) A. Vanco Services			Date of Disbursement MM / DD / YYYY 07 / 09 / 2015
Mailing Address 12600 Whitewater Drive Suite 200			Amount of Each Disbursement this Period 35.45
City Minnetonka	State MN	Zip Code 55343	Transaction ID : SB17-EX6768
Purpose of Disbursement Credit Card Service Fee		001 Category/ Type	
Candidate Name			Credit Card Service Fee
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. Vanco Services			Date of Disbursement MM / DD / YYYY 07 / 13 / 2015
Mailing Address 12600 Whitewater Drive Suite 200			Amount of Each Disbursement this Period 17.95
City Minnetonka	State MN	Zip Code 55343	Transaction ID : SB17-EX6771
Purpose of Disbursement Credit Card Service Fee		001 Category/ Type	
Candidate Name			Credit Card Service Fee
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) c. Vanco Services			Date of Disbursement MM / DD / YYYY 07 / 15 / 2015
Mailing Address 12600 Whitewater Drive Suite 200			Amount of Each Disbursement this Period 4.50
City Minnetonka	State MN	Zip Code 55343	Transaction ID : SB17-EX6825
Purpose of Disbursement Credit Card Service Fee		001 Category/ Type	
Candidate Name			Credit Card Service Fee
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....	57.90
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 66 OF 70			
	<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) A. Vanco Services		Date of Disbursement MM / DD / YYYY 07 / 29 / 2015
Mailing Address 12600 Whitewater Drive Suite 200		Amount of Each Disbursement this Period 7.33
City Minnetonka	State MN	Zip Code 55343
Purpose of Disbursement Credit Card Service Fee	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX6874
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Credit Card Service Fee
State: District:		

Full Name (Last, First, Middle Initial) B. Vanco Services		Date of Disbursement MM / DD / YYYY 07 / 30 / 2015
Mailing Address 12600 Whitewater Drive Suite 200		Amount of Each Disbursement this Period 27.95
City Minnetonka	State MN	Zip Code 55343
Purpose of Disbursement Credit Card Service Fee	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX6873
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Credit Card Service Fee
State: District:		

Full Name (Last, First, Middle Initial) C. Vanco Services		Date of Disbursement MM / DD / YYYY 08 / 17 / 2015
Mailing Address 12600 Whitewater Drive Suite 200		Amount of Each Disbursement this Period 1.50
City Minnetonka	State MN	Zip Code 55343
Purpose of Disbursement Credit Card Service Fee	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX6826
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Credit Card Service Fee
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	36.78
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)		PAGE 67 OF 70	
	<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) A. Vanco Services		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2015
Mailing Address 12600 Whitewater Drive Suite 200		Amount of Each Disbursement this Period 4.58
City Minnetonka	State MN	
Zip Code 55343	Purpose of Disbursement Credit Card Service Fee	Transaction ID : SB17-EX6772
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Credit Card Service Fee
State: District:		

Full Name (Last, First, Middle Initial) B. Vanco Services		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2015
Mailing Address 12600 Whitewater Drive Suite 200		Amount of Each Disbursement this Period 14.20
City Minnetonka	State MN	
Zip Code 55343	Purpose of Disbursement Credit Card Service Fee	Transaction ID : SB17-EX6828
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Credit Card Service Fee
State: District:		

Full Name (Last, First, Middle Initial) C. Vanco Services		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2015
Mailing Address 12600 Whitewater Drive Suite 200		Amount of Each Disbursement this Period 14.20
City Minnetonka	State MN	
Zip Code 55343	Purpose of Disbursement Credit Card Service Fee	Transaction ID : SB17-EX6875
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Credit Card Service Fee
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	32.98
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 68 OF 70			
	<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) A. Jeffrey Peters		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2015
Mailing Address 328 Woodcreek Rd		Amount of Each Disbursement this Period 138.88
City Edmond State OK Zip Code 73034	Purpose of Disbursement REIMBURSEMENT: SEE BELOW	
Candidate Name	001 Category/Type	Transaction ID : SB17-EX6774
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	REIMBURSEMENT: SEE BELOW	
State: District:		

Full Name (Last, First, Middle Initial) B. Jeffrey Peters		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2015
Mailing Address 328 Woodcreek Rd		Amount of Each Disbursement this Period 78.30
City Edmond State OK Zip Code 73034	Purpose of Disbursement Mileage Reimbursement	
Candidate Name	001 Category/Type	Transaction ID : SB17-EX6775
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]	
State: District:		

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2015
Mailing Address 458 Lenfant Plaza Southwest		Amount of Each Disbursement this Period 40.25
City Washington State DC Zip Code 20024	Purpose of Disbursement Postage	
Candidate Name	001 Category/Type	Transaction ID : SB17-EX6776
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	138.88
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 69 OF 70			
	<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) A. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2015
Mailing Address 820 W I 240 Service Rd		Amount of Each Disbursement this Period 461.38
City Oklahoma City	State OK	
Zip Code 73139	Purpose of Disbursement File Folders	Transaction ID : SB17-EX6777
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Capitol Hill Consulting Group		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2015
Mailing Address 499 S Capitol St Ste 608		Amount of Each Disbursement this Period 461.38
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement REIMBURSEMENT: SEE BELOW	Transaction ID : SB17-EX6778
Candidate Name	007 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	REIMBURSEMENT: SEE BELOW
State: District:		

Full Name (Last, First, Middle Initial) C. Bittersweet Catering		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2015
Mailing Address 823 King St		Amount of Each Disbursement this Period 461.38
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Catering	Transaction ID : SB17-EX6779
Candidate Name	007 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	461.38
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 70 OF 70			
	<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) A. Davis And Harman LLP			Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2015	
Mailing Address 1455 Pennsylvania Ave NW Ste 1200			Amount of Each Disbursement this Period 500.00	
City Washington	State DC	Zip Code 20004	Transaction ID : SB17-EX6783	
Purpose of Disbursement Facility Rental		Category/Type 007	Facility Rental	
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016		
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) B.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			Amount of Each Disbursement this Period	
City	State	Zip Code		
Purpose of Disbursement		Category/Type		
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) C.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			Amount of Each Disbursement this Period	
City	State	Zip Code		
Purpose of Disbursement		Category/Type		
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:			

SUBTOTAL of Disbursements This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	33376.72