

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 150

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

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)
Bode, Denise, A., Mrs.,

Mailing Address 28389 Catalpa Point Rt.

City Easton	State MD	Zip Code 21601
----------------	-------------	-------------------

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

Name of Employer AWEA	Occupation CEO
--------------------------	-------------------

Receipt For: 2018
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 08 / 2017

Transaction ID : SA11Ai-CN18174

Amount of Each Receipt this Period

1000.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Boren, David, L., President,

Mailing Address 407 W. Boyd

City Norman	State OK	Zip Code 73069
----------------	-------------	-------------------

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

Name of Employer University of Oklahoma	Occupation President
--------------------------------------------	-------------------------

Receipt For: 2018
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2017

Transaction ID : SA11Ai-CN18119

Amount of Each Receipt this Period

500.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Bramlett, Robert, , Mr., Jr

Mailing Address 1900 Cloverleaf Pl

City Ardmore	State OK	Zip Code 73401
-----------------	-------------	-------------------

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

Name of Employer Cross Pointe Advisors	Occupation Insurance
-------------------------------------------	-------------------------

Receipt For: 2018
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 04 / 2017

Transaction ID : SA11Ai-CN17995

Amount of Each Receipt this Period

2700.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

4200.00
