STATE OF OKLAHOMA MUNICIPALITY OF ___

OKIA (Name of Municipality)

CANDIDATE COMMITTEE CONTINUING REPORT OF CONTRIBUTIONS

		AMENDED:
Full Legal Name of C	andidate	Number (if assigned)
Lu,	75 // /	
Full Name of Commi	4DZ	
Complete Name of O	lection Date	
Type of Report	Reporting Period:	
24 Hour Repo	rt	
	CONTINUING CONTRIBUTORS SUMMARY REPORTING PER TOTAL	RIOD
1.	Monetary Contributions from Individuals	
2.	Monetary Contributions from PACs	
3.	Monetary Contributions from a Political Party 3. Monetary Contributions from a Political Party	
4.	Loans	
5.	TOTAL FUNDS RECEIVED:	-

By signing, electronic or otherwise, my name below, I, acknowledge that the information submitted is complete, true and accurate as of the date submitted. I understand the failure to provide such information is a violation of the Ethics Rules of Oklahoma. I understand that I can update the information above at any time by filing an amended Continuing Report of Contributions.

Date	Contributor Information [Name/Address/Occupation/Employer] [Name of Committee, Committee #]	Type of Contributor	Amount
	3K LHE	OFFICE OF	
	5: 16	M9 S- 270 0005	
	AHOL	VINU 30 BLVIS	

2015 Candidate CC Report Version 2017.1