## STATE OF OKLAHOMA MUNICIPALITY OF \_\_\_\_

DINA	
OKIM	_ (Name of Municipality)

## CANDIDATE COMMITTEE

	CONTINUING REPORT OF CONTRIBUTION	NS AMENDED:		
Full Legal Name of C	Number (if assigned)			
Full Name of Commit	genia Live			
Complete Name of Ot	1 City ouncil DISTE	l or General Election Date		
Type of Report  24 Hour Report  Reporting Period:  7 - 1 - 2 O				
	CONTINUING CONTRIBUTORS SHAMARY	TING PERIOD FOTAL		
1.	Monetary Contributions from Individuals			
2.	Monetary Contributions from PACs			
3.	Monetary Contributions from a Political Party			
4.	Loans			
5.	TOTAL FUNDS RECEIVED:	0		
and accurate as of Oklahoma. I Contributions.	tronic or otherwise, my name below, I, acknowledge that the information of the date submitted. I understand the failure to provide such information understand that I can update the information above at any time by filing at a submitted	is a violation of the Ethics Rules		

Date	Contributor Information [Name/Address/Occupation/Employer] [Name of Committee, Committee #]	Type of Contributor	Amount
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	CLERK E OF THE	21440 YTI3	
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