## STATE OF OKLAHOMA MUNICIPALITY OF

## (Name of Municipality)

POLITICAL COMMITTEE
CONTRIBUTIONS AND EXPENDITURES REPORT

AMENDED.	

Full	Name of Committee	Acror	nym N	Number (if assigned)		
	Che 4de					
Type of Political Action Committee and Purpose of Committee						
A ffil	iated Corporation or Labor Union	Reporting Per	iod:	$\sim$		
Ziiii	MA Solution of Early Officer					
NO ACTIVITY. This Committee did not receive any funds or contributions, take out any loans, or expend any funds during this reporting period.						
	FINAL REPORT. This Committee dissolved in accordance with the Ethics Rules and has no funds remaining.					
<b>Debt.</b> This Committee dissolved with outstanding debt which was resolved as indicated on Schedule J.						
	SCHEDULE SUMMARY		REPORTING PERIOD TOT			
1.	REPORTING PERIOD BEGINNING BA	LANCE:				
2.	Monetary Contributions from Individuals [Schedule A]			l e		
3.	Monetary Contributions from PACs [Schedule A]			8		
4.	Monetary Contributions from Other Entities [Schedule A][Unlimited Comm	nittees Only]		8		
5.	All Other Funds [Schedule B]			2		
6.	Transfers from Associated PAC's [Schedule B]					
7.	Loans [Schedule C]					
8.	TOTAL FUNDS REC	CEIVED:		0		
9.	In Kind Contributions [Schedule D]			0		
10.	TOTAL FUNDS AND IN KIND CONTRIBUTIONS REC	CEIVED:				
11.	General Expenditures Made [Schedule E]			0		
12.	Contributions to Other PACs [Schedule E]			0		
13.	Contributions to Political Party Committees [Schedule E]			W.		
14.	Contributions to Candidate Committees [Schedule E]			9		
15.	Transfers to Associated PACs [Schedule B]			8		
16.	Electioneering Communications [Schedule G]			9		
17.	Independent Expenditures [Schedule G]					
18.	Surplus Funds [Schedule H]			er		
19.	TOTAL FUNDS EXP	ENDED:				
20.	Refunds issued [Calculated in Schedules A and B]			,		
21.	Costs Paid by Affiliated Entities [Schedule I]			$\mathcal{J}$		
22.	REPORTING PERIOD ENDING BA			8		
Dec	graping electronic or otherwise my name below I acknowledge that t	he informa	tion submitted	is complete true and		

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 Laws of Oklahoma. I understand that I can update the information above at any time by filing an amended Contributions and Expenditures Report.

Date submitted WINTER CELL OF THE STATE OF T

Officer or Agent signature