## STATE OF OKLAHOMA MUNCIPALITY OF (Name of Municipality)

## CAMPAIGN COMMITTEE STATEMENT OF ORGANIZATION

Name as it will appear on the ballot (Last, First, Middle)				Pa	arty Affiliation	
Dennie (uc)					on-Partisan	
Complete name of Office Sought  DIST Z / LIST CITY ( DUIDCI)				Special or C	General Election Date	
Candidate Residence Street Addre	ss 1 3	5/2/W	Candidate Mailing A	Address 1		
Candidate Residence Street Address 2				Address 2		
Candidate Residence City, State, 2	Zip Code	5	Candidate Mailing C	City, State, Zip	Code	
Phone Number 1 (xxx) xxx-xxxx	ext. xxxxxx	Phone Number 2 (xxx) xxx-xxxx ext. xxxxx		Candidate Email Address		
2. COMMITTEE INF	ORMATION					
Candidate Committee Name:	,	11 & 2445 W1 (4445 E				
Committee Physical Street Address	2		Committee Meiling	Addraga 1		
5 3/3	1	Committee Mailing Address 1				
Committee Physical Street Address 2			Committee Mailing Address 2			
BAMO						
Committee City, State, Zip Code			N.	Mailing Address City, State, Zip Code		
Phone Number 1 (xxx) xxx-xxxx ext. xxxxx		918 40	Number 2 (xxx) xxx-xxxx ext. xxxxx 18 4066313		Committee Email Address	
Committee Website Address		Social Media Account Address		Social Media Account Address		
Social Media Account Address		Social Media Account address		Social Media Account Address		
3. COMMITTEE OFF	ICERS INFO	RMATION				
Chair's Name (First, Middle, Last)		Treasurey's Name (First		Deputy Trea	asurer's Name (First, Middle, Last	
Thomas & Car		Thomas & Cul				
Street Address 1 3 (30)		Street Address 1		Street Address 1		
Street Address 2		Street Address 2		Street Address 2		
16/50, 16 4/0		City, State, Zip Code 7 Phone Number (xxx) xxx-xxxx ext. xxxxx		City, State, Zip Code  Phone Number (xxx) xxx-xxxx ext. xxxxx		
						Email Address
Momas l'une co	911.41			Email Addi		
4. DEPOSITORY INF	ORMATION					
Accounty 2	Account 2	-	Account 3		Account 4	
Street Address 1	Street Addres	ss 1	Street Address 1		Street Address 1	
Street Address 2	Street Addres	ss 2	Street Address 2		Street Address 2	
City, State, Zip Code'	City, State, Zip Code		City, State, Zip Code		City, State, Zip Code	
the candidate identified on t te submitted. I understand n update the information abo	the failure to p	provide such inform	nation is a violation of	the laws of	ete, true and accurate as of f Oklahoma. I understand the	
VSSS	155/5	11	11 11 2022	med	112 1/30 E	
Municipal use only. /	1	30	Signatur A.M.[2'.41] P.M.	е	9/Bate /	

Candidate Committee Statement of Organization version 2015.1