

STATE OF OKLAHOMA
MUNICIPALITY OF TULSA
(Name of Municipality)

CAMPAIGN COMMITTEE STATEMENT OF ORGANIZATION

1. CANDIDATE INFORMATION

AMENDED:

Name as it will appear on the ballot (Last, First, Middle) ASTON, MICHAEL		Party Affiliation Non-Partisan
Complete name of Office Sought CITY COUNCIL DISTRICT 7		Special or General Election Date NOV 6 2018
Candidate Residence Street Address 1 6849 E. 56TH ST	Candidate Mailing Address 1	
Candidate Residence Street Address 2	Candidate Mailing Address 2	
Candidate Residence City, State, Zip Code TULSA OK 74145	Candidate Mailing City, State, Zip Code	
Phone Number 1 (xxx) xxx-xxxx ext. xxxxx 918 830 2233	Phone Number 2 (xxx) xxx-xxxx ext. xxxxx 918	Candidate Email Address RECYCLEMICHAEL@YAND.COM

2. COMMITTEE INFORMATION

Candidate Committee Name: MICHAEL FOR TULSA 2018		
Committee Physical Street Address 1 6849 E. 56TH ST		Committee Mailing Address 1 P.O. BOX 35773
Committee Physical Street Address 2		Committee Mailing Address 2
Committee City, State, Zip Code TULSA OK 74145		Committee Mailing Address City, State, Zip Code TULSA OK 74153-5773
Phone Number 1 (xxx) xxx-xxxx ext. xxxxx 918 830 2233	Phone Number 2 (xxx) xxx-xxxx ext. xxxxx	Committee Email Address
Committee Website Address MICHAELFORTULSA.COM	Social Media Account Address	Social Media Account Address
Social Media Account Address	Social Media Account address	Social Media Account Address

3. COMMITTEE OFFICERS INFORMATION

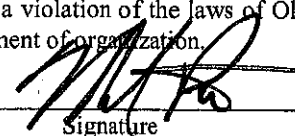
Chair's Name (First, Middle, Last) JESSIE FEIKETNER	Treasurer's Name (First, Middle, Last) SLOT GRIZZLE	Deputy Treasurer's Name (First, Middle, Last)
Street Address 1 3719 E. 28TH ST	Street Address 1 7521 S. 68TH E. PIKE	Street Address 1
Street Address 2	Street Address 2	Street Address 2
City, State, Zip Code TULSA OK 74114	City, State, Zip Code TULSA OK 74133	City, State, Zip Code
Phone Number (xxx) xxx-xxxx ext. xxxxx 918 744 1865	Phone Number (xxx) xxx-xxxx ext. xxxxx 918 261 6556	Phone Number (xxx) xxx-xxxx ext. xxxxx
Email Address	Email Address	Email Address

4. DEPOSITORY INFORMATION

Account 1	Account 2	Account 3	Account 4
Street Address 1	Street Address 1	Street Address 1	Street Address 1
Street Address 2	Street Address 2	Street Address 2	Street Address 2
City, State, Zip Code	City, State, Zip Code	City, State, Zip Code	City, State, Zip Code

I, the candidate identified on this form, 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 statement of organization.

FILED
CITY OF TULSA


 Signature 8/9/18
 Date

For Municipal use only.

Number assigned: **2018-17**

AUG 15 2018

A.M. P.M.
 OFFICE OF THE CITY CLERK
 BY 