CAMPAIGN COMMITTEE STATEMENT OF ORGANIZATION

1. CANDIDATE INFORMATION	A	MENDED:	
Name as it will appear on the ballot (Last, First, Middle)		Party Affiliation Non-Partisan	
Complete name of Office Sought	211	Pecial or General Election Date ERRUPRY 147	200
Candidate Residence Street Address 1	Candidate Mailing Add		v
Candidate Residence Street Address 2	Candidate Mailing Add	ress 2	
Candidate Residence City, State, Zip Code	Candidate Mailing City	, State, Zip Code	\dashv
DRUHHOMH CUTT. UK	2 (xxx) xxx-xxxx ext. xxxxx	Candidate Email Address	-
2. COMMITTEE INFORMATION			
Candidate Committee Name: Ptw/ Ptw/ To	R WARDS	CITY Council	2
Committee Physical Street Address 1	Committee Mailing Ad	dress 1	
Committee Physical Street Address 2	Committee Mailing Ad	dress 2	
Committee City, State, Zip Code	Committee Mailing Ad	dress City, State, Zip Code	-
DICIEHUMA (179 DIK	2 (xxx) xxx-xxxx ext. xxxxx	Committee Email Address	
Committee Website Address Social Media Ac	count Address	Social Media Account Address	ey.
https://auara.beas/ey.Cor	2	Social Media Account Address	_
	count usuress		
3. COMMITTEE OFFICERS INFORMATION Treasurer's Name (First, Middle, Last) Treasurer's Name (First, Middle, Last)	irst Middle Last)	Deputy Treasurer's Name (First, Middle, Last)	
HUDRA BEASLEY HU	ORA BEAS	by 14 ISEASLE	14
Street Address 17204 SBLACKWEL	DERANT	1204 S. BUNCKUM	74
Street Address 2 Street Address 2			_
Stay State Zip Code CITY OK IS	159	City, State, Zip Code, 78/3	59
(405)47484(du		705) 476-8464	/
uar audra beastey · Com	6	Email Address	.0
4. DEPOSITORY INFORMATION		7 7 0	_
50k 03/3827849 Account 2	Account 3	Account 4	
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	
UKC, UK 13/39		. 14 4 1	tho
I, the candidate identified on this form, acknowledge that the date submitted. I understand the failure to provide such info	rmation is a violation of t	ne laws of Oklahoma, I understand th	at I
can update the information above at any time by filing an ame	nded statement of organiza	tien.	
	Mal Signature	Caste Date	12
For Municipal use only.	Signature	Date	

Number assigned: