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STATE OF OKLAHOMA
MUNICIPALITY OF Oklahoma City
(Name of Municipality)

CAMPAIGN COMMITTEE STATEMENT OF ORGANIZATION

1. CANDIDATE INFORMATION

AMENDED:

Name as it will appear on the ballot (Last, First, Middle) <u>BEASLEY, AUDRA D.</u>		Party Affiliation Non-Partisan
Complete name of Office Sought <u>WARD 5 CITY COUNCIL</u>		Special or General Election Date <u>FEBRUARY 14, 2023</u>
Candidate Residence Street Address 1 <u>7204 S. BLACKWELDER AVENUE</u>	Candidate Mailing Address 1	
Candidate Residence Street Address 2	Candidate Mailing Address 2	
Candidate Residence City, State, Zip Code <u>OKLAHOMA CITY, OK 73159</u>	Candidate Mailing City, State, Zip Code	
Phone Number 1 (xxx) xxx-xxxx ext. xxxxx <u>(405) 474-8464</u>	Phone Number 2 (xxx) xxx-xxxx ext. xxxxx	Candidate Email Address

2. COMMITTEE INFORMATION

Candidate Committee Name: <u>BEASLEY FOR WARD 5 CITY COUNCIL 2023</u>		
Committee Physical Street Address 1 <u>7204 S. BLACKWELDER AVENUE</u>		Committee Mailing Address 1
Committee Physical Street Address 2		Committee Mailing Address 2
Committee City, State, Zip Code <u>OKLAHOMA CITY, OK 73159</u>		Committee Mailing Address City, State, Zip Code
Phone Number 1 (xxx) xxx-xxxx ext. xxxxx <u>(405) 474-8464</u>	Phone Number 2 (xxx) xxx-xxxx ext. xxxxx	Committee Email Address <u>Audra@audra.beasley.com</u>
Committee Website Address <u>https://audra.beasley.com</u>	Social Media Account Address	Social Media Account Address
Social Media Account Address <u>FACEBOOK: AUDRA BEASLEY FOR WARD 5 CITY COUNCIL</u>	Social Media Account Address	Social Media Account Address

3. COMMITTEE OFFICERS INFORMATION

Chair's Name (First, Middle, Last) <u>AUDRA BEASLEY</u>	Treasurer's Name (First, Middle, Last) <u>AUDRA BEASLEY</u>	Deputy Treasurer's Name (First, Middle, Last) <u>N BEASLEY</u>
Street Address 1 <u>7204 S. BLACKWELDER AVE.</u>	Street Address 1	Street Address 1 <u>same</u>
Street Address 2	Street Address 2	Street Address 2
City, State, Zip Code <u>OKLAHOMA CITY, OK 73159</u>	City, State, Zip Code	City, State, Zip Code <u>same</u>
Phone Number (xxx) xxx-xxxx ext. xxxxx <u>(405) 474-8464</u>	Phone Number (xxx) xxx-xxxx ext. xxxxx	Phone Number (xxx) xxx-xxxx ext. xxxxx <u>(405) 476-8464</u>
Email Address <u>audra@audra.beasley.com</u>	Email Address	Email Address <u>beasley_ty@gmail.com</u>

4. DEPOSITORY INFORMATION

Account 1 <u>BOK 313827475</u>	Account 2	Account 3	Account 4
Street Address 1 <u>7701 S. WESTERN AVE.</u>	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 <u>OKC, OK 73139</u>	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.

Audra Beasley Signature
10/31/2022 Date

For Municipal use only.

Number assigned: _____