STATEMENT OF **ORGANIZATION**

RECEIVEL

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				2013 JUN 2	7 AM 8: 27
1. NAME OF COMMITTEE (in	full)	: (Check if name is changed)	Example:If typing, type over the lines.	12FEE@5MA	TE CENTER
Guild of	FOT CO	ngress.			
ADDRESS (number ar	nd street)	OBOX, 64	21		
(Check if a is changed				<u> </u>	
	É	CITY		STATE A	30831-10621 ZIP CODE▲
COMMITTEE'S E-MA	IL ADDRESS				
(Check if a		mguild@sbcglobal.n			
· :		ional Second E-Mail Ac		1 1 1 6 1 1	
	:	· · · · · · · · · · · · · · · · · · ·			
COMMITTEE'S WEB	PAGE ADDRES	S (URL)			
(Check if a	_	w.guildfo		•	
is changed					
	ا				
2. DATE	M ¹ , / (100 cmm) / 6 17	2013			
3. FEC IDENTIFIC	CATION NUMBE	ER ▶ SC	eg kan gen ege om kokryker, genego og g Han State og stor en Sæmberek Skal		
4. IS THIS STATEM	MENT X	NEW (N) OR	AMENDED (A)		
L certify that I have a	evamined this St	atement and to the hea	st of my knowledge and belief	it is true correct an	d complete
Toering that I have t		atement and to the bes	of my knowledge and belief	it is true, correct an	a complete.
Type or Print Name	of Treasurer C	athy Welch			
Signature of Treasure	er Cathy Weic	, Cathol	Ollar	Date $O Q$	17 2013
NOTE: Submission of			n may subject the person signin		e penalties of 2 U.S.C. §437g.
Office Use Only			For further information Federal Election Commit Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

5.

		OMMITTEE Committee:					
(a)	X	This committee is a principal campaign committee. (Complete the candidate information below.)					
(b)	4	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)					
Name Candid	-	Thomas Guld					
Candid Party	date Affiliatio	on DEM Sought: House Senate President District					
(c)	g 1202 3 3 3 3 3 3 3 3	This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Name Candid	-						
Party	/ Com	nmittee:					
(d)	And	This committee is a (National, State or subordinate) committee of the Republican, etc.) Party.					
Politi	ical A	ction Committee (PAC):					
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:					
		Corporation Corporation w/o Capital Stock Labor Organization					
		Membership Organization Trade Association Cooperative					
		In addition, this committee is a Lobbyist/Registrant PAC.					
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)					
		In addition, thie committee is a Lobbyist/Registrant PAC.					
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)					
Jöint	Fund	Iraising Representative:					
(g)	r	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.					
(h)	(عد) () الأسعال	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.					
	Com	mittees Participating in Joint Fundraiser					
	1.	FEC ID number C					
	2.	FEC ID number C					
	3.	FEC ID number C					
	4	I					

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Write or Type Committee Name		rage 3
	ong 1255	
6. Name of Any Connected C	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadersh	ip PAC Sponsor
NONE		<u> </u>
Mailing Address	1 1 1 1 1 1 1 1 1 1	111111
William y value 555		
	CITY STATE	ZIP CODE
Relationship:	d Organization Affiliated Committee Joint Fundraising Representative Lea	dership PAC Sponsor
Custodian of Records: Ider books and records.	ntify by name, address (phone number optional) and position of the person in pos-	session of committee
J	ugene Guild	1
Full Name	PO Box 6621	
Mailing Address		
	Edmond , OK , 73083	
Title or Position	CITY STATE :	ZIP CODE
Custodian of Records	Telephone number	921 - 3811
Treasurer: List the name an any designated agent (e.g.,	d address (phone number optional) of the treasurer of the committee; and the name assistant treasurer).	ne and address of
Full Name Cathy Wel	ch	•
of Treasurer	[2601 NW Expressway, Ste. 503W	
Mailing Address		
_,	Oklahoma City CITY STATE 73112	ZIP CODE
Title or Position Treasurer	Telephone number	286

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