PAGE 1 / 4 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Oklahoma Leadership Council 4031 N. Lincoln Boulevard ADDRESS (number and street) (Check if address is changed) Oklahoma City 73105 OK CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS stephaniemilligan@ymail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.okgop.com (Check if address is changed) DATE 2012 C00167213 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. ANTHONY J FERATE Type or Print Name of Treasurer ANTHONY J FERATE [Electronically Filed] 80 13 2012 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. **FEC FORM 1** 

	Office			For further information contact:
i	Use			Federal Election Commission
	Only			Toll Free 800-424-9530 Local 202-694-1100

F	EC <b>Fo</b>	rm 1 (Revised 02/2009)	Page <b>2</b>
		COMMITTEE	
	didate	Committee:	
(a)	Н	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complet information below.)	e the candidate
Name Candi			
Candi Party	idate Affiliati	Office Sought: House Senate President	State
			District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Candi			
Part	y Con	nmittee:	
(d)	X	CTA Don Don Don	mocratic, publican, etc.) Party.
Polit	ical A	action Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ted organization is a
		Corporation Corporation w/o Capital Stock	abor Organization
		Membership Organization Trade Association C	ooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segre committee. (i.e., nonconnected committee)	gated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint	Fund	draising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two o committees/organizations, at least one of which is an authorized committee of a federal candidate.	r more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two o committees/organizations, none of which is an authorized committee of a federal candidate.	r more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number C	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

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Write or Type Committee Name	
Oklahoma Leadership Council	
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Repre	esentative, or Leadership PAC Sponsor
ROMNEY VICTORY INC  585 COMMERCIAL STREET  Mailing Address  BOSTON  CITY  Relationship: Connected Organization Affiliated Committee X Joint Fundraising F	MA 02109  STATE ZIP CODE
<ul> <li>Custodian of Records: Identify by name, address (phone number optional) and positio books and records.</li> </ul> MATT PINNELL	n of the person in possession of committee
Full Name  4301 N. LINCOLN BLVD.  Mailing Address	
OKLAHOMA CITY	OK 73105
Title or Position CITY	STATE ZIP CODE
CHAIRMAN Telephone numb	per 405 - 528 - 3501
<ol> <li>Treasurer: List the name and address (phone number optional) of the treasurer of the any designated agent (e.g., assistant treasurer).</li> </ol>	committee; and the name and address of
Full Name ANTHONY J FERATE of Treasurer  Mailing Address  ANTHONY J FERATE  4031 N. LINCOLN BLVD	
OKLAHOMA CITY  CITY	OK 73105-5206
Title or Position TREASURER THE TREASURER TElephone numb	. 405 528 3501 .

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Full Name of		
Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		211 0002
Banks or Other safety deposit box Name of Bank, D		
safety deposit box		
safety deposit box Name of Bank, D	P.O. BOX 55500  OKLAHOMA CITY  OK 73155	ZIP CODE
safety deposit box Name of Bank, D	P.O. BOX 55500  OKLAHOMA CITY  OK 73155  CITY  STATE	ZIP CODE
safety deposit box Name of Bank, D Mailing Address	P.O. BOX 55500  OKLAHOMA CITY  OK 73155  CITY  STATE	ZIP CODE
safety deposit box Name of Bank, D Mailing Address	P.O. BOX 55500  OKLAHOMA CITY  OK 73155  CITY  STATE	ZIP CODE
safety deposit box Name of Bank, D Mailing Address	P.O. BOX 55500  OKLAHOMA CITY  OK 73155  CITY  STATE  CHAIN BRIDGE BANK	ZIP CODE
safety deposit box Name of Bank, D  Mailing Address  Name of Bank, D	P.O. BOX 55500  OKLAHOMA CITY  OK 73155  CITY  STATE  CHAIN BRIDGE BANK	ZIP CODE
safety deposit box Name of Bank, D  Mailing Address  Name of Bank, D	P.O. BOX 55500  OKLAHOMA CITY  OK 73155  CITY  STATE  CHAIN BRIDGE BANK	