

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION COMMISSION
MAIL ROOM
Oct 20 11 26 AM

1. NAME OF COMMITTEE (in full) OBA Fed Elect		2. FEC IDENTIFICATION NUMBER C08139477
ADDRESS (number and street) 643 N.E. 41st Street	<input checked="" type="checkbox"/> Check if different than previously reported	
CITY, STATE and ZIP CODE Oklahoma City, OK 73185	3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (See FEC FORM 1M)	

4. TYPE OF REPORT

(a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report

Monthly Report Due On:
 February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 January 31

Fifteenth day report preceding (Type of Election)
 election on _____ in the State of _____

Thirtieth day report following the General Election of
 _____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 04/01/94 through 06/30/94		
6. (a) Cash on Hand January 1, 1994		\$ 15.00
(b) Cash on Hand at Beginning of Reporting Period	\$ 20,830.98	
(c) Total Receipts (from line 19)	\$ 9,856.48	\$ 15.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(e) and 6(c) for Column B)	\$ 30,787.47	\$ 30.00
7. Total Disbursements (from Line 30)	\$ 0.00	\$ 0.00
8. Cash on Hand at Close of Reporting Period (Subtract Line 7 from Line 6(d))	\$ 30,787.47	\$ 30.00
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	

11. Certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and Complete

Type or Print Name of Treasurer
Roger M. Beverage

Signature of Treasurer
Roger M. Beverage

Date
10/11/96

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 437g.

STATE OF OKLAHOMA

DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

Revised

NAME OF COMMITTEE	CBA Fed Elect	REPORT COVERING PERIOD	
		FROM: 04/01/94	TO: 06/30/94
		COLUMN A	COLUMN B
		Total This Period	Calendar Year
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Person: Other Than Political Committees			
i. Itemized (Use Schedule A)		3,755.00	3,755.00
ii. Unitemized		5,535.00	10,490.00
iii. Total		9,290.00	14,245.00
b. Political Party Committees		0.00	0.00
c. Other Political Committees (such as PACs)		500.00	500.00
d. Total Contributions		9,790.00	14,745.00
12. Transfers From Affiliated/Other Party Committees		0.00	0.00
13. All Loans Received		0.00	0.00
14. Loan Repayments Received		0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)		166.49	166.49
18. Transfers from Non-Federal Account for Joint Activity		0.00	0.00
19. Total Receipts		9,956.49	15,011.49
20. Total Federal Receipts		9,956.49	15,011.49
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share		0.00	0.00
ii. Non-Federal Share		0.00	0.00
b. Other Federal Operating Expenditures		0.00	0.00
c. Total Operating Expenditures		0.00	0.00
22. Transfers to Affiliated/Other Party Committees		0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees		0.00	0.00
24. Independent Expenditures (use Schedule E)		0.00	0.00
25. Coordinated Expenditures Made by Party/Committees (2 U.S.C. 4410(d)) (use Schedule F)		0.00	0.00
26. Loan Repayments Made		0.00	0.00
27. Loans Made		0.00	0.00
28. Refunds of Contributions To:			
a. Individual/Person: Other Than Political Committees		0.00	0.00
b. Political Party Committees		0.00	0.00
c. Other Political Committees (Such As PACs)		0.00	0.00
d. Total Contributions Refunds		0.00	0.00
29. Other Disbursements		0.00	0.00
30. Total Disbursements		0.00	0.00
31. Total Federal Disbursements		0.00	0.00
III. Net Contributions/Operating Expenditures			
32. Total Contributions (Other than loans) from line 11d		9,790.00	14,745.00
33. Total Contribution Refunds (from line 28d)		0.00	0.00
34. Net Contributions (Other than loans) (subtract line 33 from line 32)		9,790.00	14,745.00
35. Total Federal Operating Expenditures		0.00	0.00
36. Offsets to Operating Expenditures (from line 15)		0.00	0.00
37. Net Operating Expenditures		0.00	0.00

95-02-111-2557

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 1 OF 2
FOR LINE NUMBER 11 a.

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in full)
OBA Fed Elect

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
MARY ANN SPAKE P.O. BOX 116 VICI, OK 73859-0116	BANK OF VICI Occupation: BANKER	05/10/94	230.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$	230.00	
MARY BETH GUARD 201 N.W. 33RD ST OKLAHOMA CITY, OK 73118	Oldahoma Bankers Association Occupation: LAWYER	05/10/94	575.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$	650.00	
VIRGINIA HAMILTON 6440 CLEAR CREEK LOOP BARTLESVILLE, OK 74006	BANK OF OKLAHOMA Occupation: NA	05/10/94	300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$	300.00	
CURTIS HORRALL 1909 SENECA ENID, OK 73703	BANK OF DRUMMOND Occupation:	05/10/94	795.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$	945.00	
MICHAEL V. RWY 1515 SOUTH MISSION OKMULGEE, OK 7447	First National Bank & Trust of Okmulgee Occupation: BANKER	05/10/94	350.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$	370.00	
GEORGE PORTER 1930 FERRIS LAWTON, OK 73501	CITY NATIONAL BANK & TRUST CO Occupation: DENTIST	05/10/94	425.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$	425.00	
PATRICK RCONEY PO BOX 18930 OKLAHOMA CITY, OK 73154	CHARTER NATIONAL BANK Occupation: BANKER	05/10/94	225.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$	225.00	

SUB TOTAL of Receipts This Page (Optional) 2,900.00

TOTAL this Period (Last page) (via line number only)

980031031014-2354

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 2 OF 2
FOR LINE NUMBER 1191

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NAME OF COMMITTEE (in Full)
OBA Fed Elect

A: Full Name, Mailing Address and Zip Code BILL CRUTCHER 8800 HENLEY OKLAHOMA CITY, OK 73131	Name of Employer Oklahoma Bankers Association	Date (Month day, Year) 05/10/94	Amount of Each Receipt this Period 230
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Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 230.00
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B: Full Name, Mailing Address and Zip Code SHIRLEY BARBER HCR 64, BOX 7 CRAWFORD, OK 75638	Name of Employer Security State Bank	Date (Month day, Year) 05/10/94	Amount of Each Receipt this Period 230
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Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 230.00
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C: Full Name, Mailing Address and Zip Code MARY BETH GUARD 201 N.W. 33RD ST. OKLAHOMA CITY, OK 73118	Name of Employer Oklahoma Bankers Association	Date (Month day, Year) 06/27/94	Amount of Each Receipt this Period 75
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Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 650.00
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D: Full Name, Mailing Address and Zip Code ROGER BEVERAGE PO BOX 18426 OKLAHOMA CITY, OK 73154	Name of Employer Oklahoma Bankers Association	Date (Month day, Year) 06/27/94	Amount of Each Receipt this Period 150
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Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 330.00
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E: Full Name, Mailing Address and Zip Code CURTIS HORRALL 1909 SENECA ENID, OK 73703	Name of Employer BANK OF DRUMMOND	Date (Month day, Year) 06/30/94	Amount of Each Receipt this Period 50
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Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 945.00
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F: Full Name, Mailing Address and Zip Code CURTIS HORRALL 1909 SENECA ENID, OK 73703	Name of Employer BANK OF DRUMMOND	Date (Month day, Year) 06/30/94	Amount of Each Receipt this Period 100
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Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 945.00
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G: Full Name, Mailing Address and Zip Code MICHAEL V. EWY 1515 SOUTH MISSION OKMULGEE, OK 7447	Name of Employer First National Bank & Trust of Okmulgee	Date (Month day, Year) 06/30/94	Amount of Each Receipt this Period 70
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Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 370.00
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SUB TOTAL of Receipts This Page (Optional)	85
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TOTAL this Period (Last page of line number only)	3,75
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1191

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 16 OF 18
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in full)
OBA Fed Elect

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
WESTSTAR MMF P.O. BOX 999 BARTLESVILLE, OK 74005	WESTSTAR BANK MONEY MARKET	05/31/94	55
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$	294.48	
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
WESTSTAR MMF P.O. BOX 999 BARTLESVILLE, OK 74005	WESTSTAR BANK MONEY MARKET	06/30/94	60
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$	294.48	
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		

SUB TOTAL of Receipts This Page (Optional) >

TOTAL this Period (Last page this line number only) >

**Federal Election Commission
ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

Hand Delivered

DATE OF RECEIPT

First Class Mail

POSTMARKED

Registered/Certified Mail

POSTMARKED

Oct 5 1996

No Postmark

Postmark Illegible

Received from the House Office of Records and Registration

DATE OF RECEIPT

Received from the Senate Office of Public Records

DATE OF RECEIPT

Other (Specify)

POSTMARKED

and/or DATE OF RECEIPT

US

10-20-96
[Signature]

PREPARED BY

DATE PREPARED