FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS 13 JUL - 1 AM 9: 37 For Other Than An Authorized Committee FEC HAIL CENTER Use Only

RECEIVED

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2.	FEC ID	ENTIFICATION N	UMBER ▼	· . · · . 	CITY 🛦		S	TATE A	ZI	P CODI	E A
٠.		0,53,40			3. IS THIS REPORT	. 18 3	NEW (N) OR	AM (A)	ENDED		
4.	TYPE (Choose	OF REPORT	(b) Mo	nthly port	Feb 20 (M2)	74-39	May 20 (M5)	Aug	20 (M8)	(Nov 20 (M11) Non-Bection
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		July 15 Quarterly Report (Q2)	PRE-Election	fleco23	. 1	CERTIFIES .			1, • 5	
		October 15 Quarterly Report ((Q3)	Report for t	ne.	Convention	(12C)	Special (120)		
		January 31 Year-End Report		. •	Election on	IN N /		engensurystrumpeere Audum (oud-to-AudumAu	2	n the State of	
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5.	Coverin	g Period 🛴	. 3	[7] [2]	کڙيو	through	0,6	24	ľàoï	3	
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NO	TE: Subn	nission of false, erro	neous, or in	complete info	rmation may s	ubject the pe	rson signing thi	s Report to t	he penalties	of 2 U.	S.C. §437g.
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Page 2

W	rite	or	Type	Committee	Ν	lame
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CITIZENS

ADVANCING

OKLAHOMA

Report Covering the Period:

From:

01 01 2013

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2013		51388
	(b) Cash on Hand at Beginning of Reporting Period	game representation and the conference of the co	
•	(c) Total Receipts (from Line 19)	$\int_{0}^{\infty} (1-x)^{n-1} dx = \int_{0}^{\infty} (1-x)^{n-$	
3	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	The standard of the standard o	jamen ja var egemen, paras opasas prosessiones per esta p
7.	Total Disbursements (from Line 31)	51388	51378
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	Secretary and the secretary of the secre	samentalpoinine france of the Samen of some police and the same of
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	and the rest and the first term of the rest term of the r	
E CONTRACTOR OF THE CONTRACTOR	This committee has qualified as a multic	candidate committee. (see FEC FORM 1M)	

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

15051081564

DETAILED SUMMARY PAGE

of Receipts

Page 3

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Write	or	Type	Committee	Name
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CITIZENS ADVANCING

OKLAHOMA

Report Covering the Period:

From:

DI bi aois

To:

56 24

2013

(ii) Uniternized (iii) TOTAL (add Lines 11(a)ft) and (ii)		I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Than Political Committees (i) Itemized (use Schedule A)	11.	Contributions (other than loans) From:	:	•
(i) Itermized (use Schedule A) (ii) Uniternized (iii) TOTAL (add Lines 11(a)(i) and (ii)		(a) Individuals/Persons Other	:	
(ii) Uniternized (iii) TOTAL (add Lines 11(a)(i) and (ii)	•	Than Political Committees	Insulandon in the control of the con	g in manag na a ng garangangang magangang manggang na ang an ang ana a ang ana ang ang
(iii) TOTAL (add Lines 11(a)(i) and (ii)	•. •	(i) Itemized (use Schedule A)		
(iii) TOTAL (add Lines 11(a)(i) and (ii)		(ii) Unitemized	0.0.	0.0
(b) Political Party Committees (c) Other Political Committees (such as PACs). (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5). 12. Transfers From Affiliated/Other Party Committees. 13. All Loans Received. 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5). 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees. 17. Other Federal Receipts (Dividends, Interest, etc.) (Dividen		(iii) TOTAL (add	Date was the first of the control of	transferentiamitikosta taritikosta taritikosta taritikosta taritikosta taritikosta taritikosta taritikosta tar Para taritikosta taritikosta taritikosta taritikosta taritikosta taritikosta taritikosta taritikosta taritikos
(c) Other Political Committees (such as PACs)		Lines 11(a)(i) and (ii)		paragram and the state of the s
(c) Other Political Committees (such as PACs)		(b) Political Party Committees	0.0	0.0
(such as PACs) (d) Total Contributions (add Lines 11(d), [d)] (d) Total Federal Receipts (sudfulled Hs)			Commendiate to the contract of	The second secon
(d) Total Contributions (add Lines 11(a)(ii), (b), and (c)) (Carry Totals to Line 33, page 5)			0.0	
Totals to Line 33, page 5)	·		- American de Comercia (1900) (1906) de Comercia de Comercia de Comercia de Comercia de Comercia de Comercia d Comercia de Comercia de Co	Service and Securior (Chamber) & Property Services and Se
Totals to Line 33, page 5)			CONTRACTOR OF THE STATE OF THE	And the state of the second se
12. Transfers From Affiliated/Other Party Committees			1	[O.O.
13. All Loan Repayments Received	12.	Transfers From Affiliated/Other	Invariles at a makas at managen until and an alles als and an attenda	
13. All Loans Received		Party Committees	0.0	0.0
14. Loan Repayment's Received				
14. Loan Repayment's Received	13.	All Loans Received		
14. Loan Repayments Received				
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	14.	Loan Repayments Received	$\mathcal{O}\mathcal{O}$	0.5
Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)			Care of San Crant Daniel San Street Christian San San San San San San San San San S	Secretaria de la complementa de la comp
(Carry Totals to Line 37, page 5)		•	Decrease and the contract of the activities of the contract of	,
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			DA	OD
to Federal Candidates and Other Political Committees	16.		de medice idea iddi indiana discarda handa midda di di di indiana d	Termille will be with a with a self-through a self-
17. Other Federal Receipts (Dividends, Interest, etc.)		to Federal Candidates and Other	Same an introductions alternate invarializate antiterra of promptions talents in the second	ें बरूब क्षीताकरिकार क्षी का ीकामर्थ कालको ं कराई। कर्
(Dividends, Interest, etc.)		Political Committees	0.0	0.0
18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3)	17.	Other Federal Receipts	Surfaces and compared to the c	Sungapulan ang Proposity sa na Papanan Papanan Papanan Papanan Papanan Papanan Papanan Papanan Papanan Papanan Papanan papanan ng Proposity sa nanang pananan papanan na Papanan Papanan Papanan Papanan Papanan Papanan Papa
(a) Non-Federal Account (from Schedule H3)		(Dividends, Interest, etc.)	0.0	O.D.
(from Schedule H3)	18.	Transfers from Non-Federal and Levin Funds	Survey of the control	Bernelland Des Remideration Landon distribution
(b) Levin Funds (from Schedule H5)	1,		Commission of the second section of execution afternal	
(b) Levin Funds (from Schedule H5)		(from Schedule H3)	0.0.	0.0
(c) Total Transfers (add 18(a) and 18(b)) 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) 20. Total Federal Receipts (subtract Line 18(c) from Line 19)			Leaden Cathridikkaas liikutakik neditah matatah matatah matatah matatah matatah matatah matatah matatah matatah matatah matatah matatah matatah mendelah matatah matat	Section 2015 and the section of the section is the section of the
(c) Total Transfers (add 18(a) and 18(b)) 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) 20. Total Federal Receipts (subtract Line 18(c) from Line 19)	•	(b) Levin Funds (from Schedule H5)		0.0
(c) Total Transfers (add 18(a) and 18(b)) 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) 20. Total Federal Receipts (subtract Line 18(c) from Line 19)				Secure and the control of the contro
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))		(c) Total Transfers (add 18(a) and 18(b))	D_{D}	0.0
12, 13, 14, 15, 16, 17, and 18(c))				See allowed weed Developed benefit in the See See See
12, 13, 14, 15, 16, 17, and 18(c))				•
12, 13, 14, 15, 16, 17, and 18(c))			ea '	•
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	19.	Total Receipts (add Lines 11(d),		houselson elice solline oli molline oli monthe and an afex solline o
(subtract Line 18(c) from Line 19)▶	77	12, 13, 14, 15, 16, 17, and 18(c))▶	0.0	0.0
(subtract Line 18(c) from Line 19)▶	20.	Total Federal Receipts		Secretarian and improve the secretarian and secretarian and the secretarian and secretarian an
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DETAILED SUMMARY PAGE

of Disbursements

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Page 4

erating Expenditures: Allocated Federal/Non-Federal Activity (from Schedule H4) (i) Federal Share	Total This Period Total This Period The second of the se	Calendar Year-to-Date
(i) Federal Share		
Other Federal Operating Expenditures Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))		
Expenditures Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ansfers to Affiliated/Other Party mmittees		
Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶ ansfers to Affiliated/Other Rarty mmittees		0.0
(add 21(a)(i), (a)(ii), and (b))▶ ansfers to Affiliated/Other Rarty mmittees		<i>O</i> .0
ansfers to Affiliated/Other Rarty mmitteee ntributions to		Samueline and Jacob Super Control Property States Control States C
mmitteesntributions to	00	Transfero-e Transferoresmental mention at the confine of the confine of
ntributions to dwrai Candidates/Committees	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Marchite agenticans & borning times (2 areas to a grain of 2
dela Candidates/Committees	American de mandre de mandre de mandre de la contraction de la contraction de mandre d	0.0
d Other Political Committees	Superior and Comment District Comment	
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ordinated Party Expenditures	Bound by months and approximation of the months and advance about the same state and the	An analysis of the second control of the sec
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Than Political Committees	Landing Darker Buckhard School Street	
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(such as PACs)	Leaving Law Change Complement Com	C O
Total Contribution Refunds	Estranolismoste services estrates estra	- Bananastin mastinamastin venetli romani urasari evenetlimen millemanastilla kente senera
(add Lines 28(a), (b), and (c))▶	Landa de la Carlo de Carlo de la Carlo de	
her Disbursements	there is the transfer of the t	513.88
deral Flortion Activity (2.115.C. \$431/20\)		
(from Schedule H6)	Banamiliana and an accident an insert and bana and bana and a second a	The contraction of the contracti
(i) Federal Share	.0.0.	0. b
(II) III ordell Chara	The darkers of the section of the se	\wedge
	L. A. Martin B. M. A. S. Ust Oa.	
With Federal Funds	UV	0.0
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Lines 30(a)(i), 30(a)(ii) and 30(b))▶		L. 4
tal Disbursements (add Lines 21(c), 22,	general angeneral agrandam gandam gandam ganda en egyana en egyana en egyana en egyana en egyana en egyana en egy	incantentiamententiamenteration opposite meterationamentalismus opposite transformentalismus of it see
3, 24, 25, 26, 27, 28(d), 29 and 30(c))	513.88	51,388
tal Endard Dishurancests	स्था भागता के राज्यभवति प्राप्त स्थापक कर्षा स्थाप प्राप्त प्राप्त स्थापक <mark>प्राप्त स्थापक स्</mark>	हे तिकार क्षेत्र के प्रकार क्षा भिक्ष पर क्षा में किया भाग कि का अन्य क्षा क्षा के प्रकार कि का का किया किया क विकार के किया कि किया किया किया किया किया किया क
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DETAILED SUMMARY PAGE

of Disbursements

Page 5

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III	Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Total Contributions (other than loans) (from Line 11(d), page 3)	per ten ega te En ega ten ega	Amerikan di Sama Sama Sama Sama Sama Sama Sama Sam
34.	Total Contribution Refunds (from Line 28(d))	0.0	0.0
35 .	Net Contributions (other than loans) (subtract Line 34 from Line 33)		рания при
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶		60
37.	Offsets to Operating Expenditures (from Line 15, page 3)		0.0
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	0.0	, , , 0.0

ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Statements ma or for commercial purposes, other than using the name and a		rson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		
CITIZENS ADVANC	ang okl	AHOM
Full Name (Last, First, Middle Initial) A	E	Date of Receipt
Mailing Address		M M / 6 0 / V V V V V
City State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	ละการการการการการการการการการการการการการก	Amount of Each Hecelpt this Penod
Name of Employer Occupation)	
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Full Name (Last, First, Middle Initial)		Date of Receipt
B. Mailing Address		Date of Receipt
City State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing	na ga a sa ga bankanga mangga man Mangga a sa sa ga sa	Amount of Each necessit this Felico
Name of Employer Occupation		1
Primary General	Year-to-Date ▼	
Full Name (Last, First, Middle Initial) C.		Date of Receipt
Mailing Address		
City State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	nageningening mingenergenings ranges range	The second secon
Name of Employer Occupation	1	
Primary General Primary Other (specify) ▼	Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)		
TOTAL This Period (last page this line number only)	>	and the second s

TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)			
	Detailed Summary Page	21b 27	22 23 24 25 26 28a 28b 28c 29 30b			
Any information copied from such Reports and Statem or for commercial purposes, other than using the name	nents may not be sold or used e and address of any political	by any person	n for the purpose of soliciting contributions solicit contributions from such committee			
NAME OF COMMITTEE (In Full)	*					
CITIZENS ADVA	NCING OK	LAHON	LA			
Full Name (Last, First, Middle Initial)			Date of Disbursement			
" ED CADENHEAD	>					
Mailing Address 410 N. WAIN	· .		06 24 2013			
	State Zip Code					
Purpose of Disbursement			Amount of Each Disbursement this Period			
CONSULTING Candidate Name		Category/	Amount of Each Disbursement this Penod			
N/A		Type	5,13,8,8			
Office Sought: House Disbursen Senate	nent For: Primary General					
President State: District:	Other (specify) ▼					
Full Name (Last, First, Middle Initial)	<u> </u>					
3.	12 12 12		Date of Disbursement			
Mailing Address			M. M. M. A. D. D. J. A. M.			
City	State Zip Code					
Purpose of Disbursement						
		***********	Amount of Each Disbursement this Period			
Candidate Name		Category/ Type	and and and are described bankered to the lands			
Office Sought: Honse Disbursement For: Senate Primary General						
President	Other (specify)					
State: District:		· ·				
Full Name (Last, First, Middle Initial) C.	후 		Date of Disbursement			
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Purpose of Disbursement		ni weed near the result				
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President State: District:	Other (specify)		•			
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SUBTOTAL of Disbursements This Page (optional)			1			
TOTAL This Period (last page this line number only)		51388			
		· · · · · · · · · · · · · · · · · · ·				

SCHEDULE C (FEC Form 3X) LOANS

LOANS	Use separate schedule(s) PAGE OF		
NAME OF COMMITTEE (In Full)			
CITIZENS ADVANCING OKL	AHOM A		
LOAN SOURCE Full Name (Last, First, Middle Initial)		ection:	
NONE		Primary General	
Mailing Address		Other (specify) ▼	
City State ZIP Code	e		
Original Amount of Loan Cumulative Payment To D		Outstanding at Close of This Period	
The second control of		in the second state of the second	
TERMS Date Incurred Date Due	Interest Rate	Secured:	
		% (apr) Yes No	
List All Endorsers or Guarantors (if any) to Loan Source			
Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation	·	
	B	manthanese dinament semantani manthan melianese Simement	
City State ZIP Code	Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City State ZIP Code	Amount Guaranteed Outstanding:	nd in suggestion was of the internal of grounds and suggestion of the suggestion of the internal of the intern	
3. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
·	Amount	THE RULL OF SHARE SELL AS SHIEROUGH SELL AND AS A LIBERT AND A	
City State ZIP Code	Guaranteed	raped annual and Star and armed an about the company	
4. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
	Amount		
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SUBTOTALS This Period This Page (optional)	- Cutting to the control of the cont		
Carry outstanding balance only to LINE 3, Schedule D, for this line if n	Bananakhann		

SCHEDULE C-1 (FEC Form 3X) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for Information found on Page \ of Schedule C

Federal Election Commission, Washington, D.C. 20463	•	
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER
CITIZENS ADVANCIA	JG OKLAHO	UA CO.05340.24
LENDING INSTITUTION (LENDER)	Amount of Loan	Interest Rate (APR)
Full Name NONE	पुरस्य प्रशासी के कार्य के का	
Mailing Address	•	<u> </u>
	Date Incurred or Established	Bassas Bassas Anno a Consort Bassas Canada C
City State Zip Code	Date Due	
A. Has loan been restructured? No Yes	If yes, date originally incurred	Maria Maria Control Control Control Control
B. If line of credit, Amount of this Draw:	Total Outstanding Balance:	par any management of the second seco
Abstraction of the institution of Management and an extension of the institution of the i	The state of the s	第二十四十分のできるができますが、日本には、日本になって、日本になって、日本になって、日本になって、日本になって、日本になって、日本になって、日本になって、日本になって、日本になって、日本になって、日本によりによりによって、日本によりによりによりによりによりによりによりによりによりによりによりによりによりに
C. Are other parties secondarily liable for the debt incurred No Yes (Endorsers and guarantors mu	ed? st be reported on Schedule C.)	
D. Are any of the following pledged as collateral for the lo		What is the value of this collateral?
property, goods, negotiable instruments, certificates of stocks, accounts receivable, cash on deposit, or other	deposit, chattel papers,	gunterangen aug gezett is ture i generatigen ingeneratigen mengenan augstune zig menenganiere en g
No Yes If yes, specify:		Does the lender have a perfected security
		interest in it? No Yes
E. Are any future contributions or future receipts of intere collateral for the loan? Ne Yes If yes, s		What is the estimated value?
	. 9	Consideration of the color of t
A depository account must be established pursuant to 11 CFR 100.82(c)(2) and 100.142(e)(2).	Location of account:	
Date account established:	Address:	
THE POST OF THE PO	City, State, Zip:	
F. If neither of the types of collateral described above was the loan amount, state the basis upon which this loan		
	19	
G. COMMITTEE TREASURER		DATE
Typed Name Signature		Them, lead, lander and
Signature		The second secon
H. Attach a signed copy of the loan agreement.		
TO BE SIGNED BY THE LENDING INSTITUTION: To the best of this institution's knowledge, the te are accurate as stated above.	rms of the loan and other inform	nation regarding the extension of the loan
II. The loan was made on terms and conditions (in similar extensions of credit to other borrowers of	comparable credit worthiness.	
III. This institution is aware of the requirement that complied with the requirements set forth at 11 C	a loan must be made on a basis	s which assures repayment, and has
AUTHORIZED REPRESENTATIVE		DATE
Typed Name Autumn Wile		06 24 2013
Signature	1) STYPO SU YPY	100 27 2013

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

PAGE I

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	10

OF

xcluding Loans		'	numb	ered line)	•	10
NAME OF COMMITTEE (In Full)	· ·			****		
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	ONE					
Mailing Address	Ÿ		.			Ĭ
City State	Zip Code					
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B. Full Name (Last, First, Middle Initial) of Debt	tor or Creditor			Nature of De	ot (Purpose):	
						:
Mailing Address					. •	
City State	Zip Code					
Outstanding Balance Beginning This Period processor construction of the second construction of the sec			, American	Research for made non	g Balance at Close	mail immeritanamentican weste
C. Full Name (Last, First, Middle Initial) of Del	btor or Creditor			Nature of De	bt (Purpose):	
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4) ADD 2) and 3) and carry forward to appropria	ate line of Summary P	age (last page o	niy) ▶		Marellood or Olera Lo	200

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TE	MIZED INDEPENDENT EXPENDITURES			PAGE FOR LINE	OF CALL OF FORM 3X
ÑΑ	ME OF COMMITTEE (In Full)			FEC IDENTIFICATI	ION NUMBER V
	CITIZENS ADVANCING	OKLA	HOMA	0.05.3	54,024
Ch	eck if 24-hour report 48-hour report New report	Amends repor	t filed on	** / D** 0 /	
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	Mailing Address				
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	City State Zip	Code		mallamatinus franctics at to	anadhmumallangadhamani samaf
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	Purpose of Expenditure Catego	rv/ P	Office Sough	ht: House	State:
:		pe .		Senate	District:
٠	Name of Federal Candidata Supported or Opposed by Expenditure:			President	
			Check One:	Support	Oppose
	Calendar Year-To-Date Per Election for Office Sought		Disbursemer	- ا	General
	Commentation of the second control of the se			ther (specify)	
	Full Name (Last, First, Middle Initial) of Payee	•	Date		
i				/ M / D 4 D	, V & V 3 V 3 V 3 V 1
	Mailing Address		į ž		
			Amou	int 	
	City State Zip	Code			
	Purpose of Expenditure Categor	ory/	Office Soug	ht: House	State:
	, <u>"</u>	pe		Senate	District:
	Name of Federal Candidate Supported or Opposed by Expenditure:		Oh Iv On -	President	
		•.	Check One:	Support	Oppose
	Calendar Year-To-Date Per Election	~·····	Disburseme	nt For: Primary	General
	for Office Sought	A_i_	_ o	ther (specify)	
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			\$2000 P1000P1		
	(b) SUBTOTAL of Unitermized Independent Expenditures	••••••••••••	>		
		•			
	(c) TOTAL Independent Expenditures	······	>	en Marail Ziranda van Seria Zir	
3		<u> </u>			
	Under penalty of pedury I certify that the independent expenditures repwith, or at the request or suggestion of, any candidate or authorized corparty committee) any political party committee or its agent.				
			deport our bary from the section	2000	Orlands WHAT WATER
ľ		Date	, M.A.M.,		
	Signature		the statement	Recently former to the second	endrement comments .

SCHEDULE F (FEC Form 3X)

ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)

	N BEHALF OF CANDIDATES FOR FEDERAL OFFICE							
	by Political Committees in the Gene	ral Election) FOR LINE 25 OF FORM 3X						
NAME OF COMMITTEE (In Full)								
CITIZENS ADVANCE		Λ Η						
	Full Name of Subordinate Committee							
coordinated expenditures by a political party committee?	N()NE						
	Mailing Address							
·.	City	State ZIP Code						
		<i>:</i>						
Full Name (Last, First, Middle Initial) of Each Payee		Purpose of Expenditure						
		Category/						
Mailing Address		Туре						
City State	Zip Code	Date						
Name of Federal Candidate Supported Office Sough		Amount						
	Senate District:	garannigkaninganinnganinnganingka rangan in inganiningan Anaganin katamin Organisa. Ta						
Aggregate General Election	เกตารณ์สามสหรับ กละเลกับงากเกลื่อนคละเสรียล กละเลือง เกตเลือง เกตารณ์สามสหรับ กละเลกับงากเกลื่อนคละเสรียล กละเลือง เกตเลือง	Encocidence of Secret S						
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Mailing Address		Category/ Type						
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Mailing Address	· · · · · · · · · · · · · · · · · · ·	Category/ Type						
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City State	Zip Code	MAN (COND.) / COND.						
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Aggregate General Election Expenditure for this Candidate ▶		<u> </u>						
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SUBTOTAL of Expenditures This Page (optional)	, , , , , , , , , , , , , , , , , , ,	ร์ เราะสมเกิดของเป็นกระบบเรื่องสมเด็จตองเปล่า และ เรื่องสมเกิดของเกล โดยสามาร์ เพลา เมื่องสามาร์ (พระบบค่ำ พระสมว เราะสมเกิดของเป็นกระบบเรียก เพลา เรียก เกลา เราะสมเกิดของ เกลา เราะสมเกิดของ เกลา เราะสมเกิดของ เกลา เราะสมเกิด						
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SCHEDULE H1 (FEC Form 3X)

METHOD OF ALLOCATION FOR:

- ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT AUTIVITY COSTS
- ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE) (Separate Segregated Funds And Nonconnected Committees Only)

NAME	OF COMMITTEE (In Full)
·	CITIZENS ADVANCING OKLAHOMA
	USE ONLY ONE SECTION, A or B
Α.	State and Local Party Committees
·	Fixed Percentage (select one)
4.	Presidential-Only Election Year (28% Federal)
	Presidential and Senate Election Year (36% Federal)
	Senate-Only Election Year (21% Federal)
	Non-Presidential and Non-Senate Election Year (15% Federal)
В.	Separate Segregated Funds and Nonconnected Committees
	Flat Minimum Federal Percentage
	If the committee will allocate using the flat minimum percentage of 50% federal funds, check or
	If the committee is spending more than 50% federal funds, indicate ratio below
	Federal
	Nonfederal %
	This ratio applies to (check all that apply):
	Administrative Generic Voter Drive Public Communications Referencing Party Only

SCHEDULE H2 (FEC Form 3X) ALLOCATION RATIOS

PAGE	OF

NAME OF COMMITTEE (In Full)							
CITIZENS ADVANCING	OKLA HOI	MA J					
RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDAT							
ACTIVITIES APPEARING ON THIS REPORT. Methods of ellocation: DOES NOT APPLY							
Without II allocation.		/					
 FUNDRAISING activities are allocated using the "funds received meth expenses must equal the federal proportion of monies raised. 	lod where the federal pro	oportion of					
II. Shared DIRECT CANDIDATE SUPPORT activities are allocated according where the federal proportion of disbursements is based on the benefit tivity. For PACs Gnly: Direct candidate support includes public commisted and nonfederal candidates, regardless of whether there is a reare allocated using a time/space method.	t derived by federal candi junications or voter drives	dates from the ac- that refer to both					
ACTIVITY OR EVENT IDENTIFIER							
ACTUATY IO	FEDERAL %	NONFEDERAL %					
ACTIVITY IS: Fundraising Direct Candidate Support	%	%					
CHECK IF THE RATIO IS:	- Salamana and American Salamana Salaman						
New Revised Same as Previously Reported							
ACTIVITY OR EVENT IDENTIFIER		 					
	FEDERAL %	NONFEDERAL %					
ACTIVITY IS: Fundraising Direct Candidate Support	Total	Luck (managhanathan i Annada)					
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New Revised Same as Previously Reported							
ACTIVITY OF THE PROPERTY.	·						
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %					
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Fundraising Direct Candidate Support	9%	<u> </u>					
CHECK IF THE RATIO IS: New							
Control Contro		·					
ACTIVITY OR EVENT IDENTIFIER							
	FEDERAL %	NONFEDERAL %					
ACTIVITY IS: Fundraising Direct Candidate Support	%	%					
CHECK IF THE RATIO IS:	76	haman and an all house and 70					
New Revised Same as Previously Reported							
	·						
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %					
ACTIVITY IS:	fraction fraction de	Like Cardinalis I					
Fundraising Direct Candidate Support	hanikariha Edor Fami	%					
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New Revised Same as Previously Reported							
ACTIVITY OR EVENT IDENTIFIER							
	FEDERAL %	NONFEDERAL %					
ACTIVITY IS:	Company of the particular state of the state						
Fundraising Direct Candidate Support CHECK IF THE RATIO IS:	be with median 43 hours paras 96	Less Barrellorers Specialism of %					
New Revised Same as Previously Reported							
Name Name Name Name Name Name Name Name							

SCHEDULE H3 (FEC Form 3X) TRANSFERS FROM NONFEDERAL ACCOUNTS FOR ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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FOR LIN	IE 18	a OF	FORM	3)

NAME OF COMMITTEE (In Full)		
	DVANCING OKL	V 77770
CITIZENS A	DIANCING ORI	-ATOMOT
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ii) Generic Voter Drive	······································	
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lii) Exempt Activities		the results reconstitutional Discountiers and terroral Discountiers as the continues of
iv) Direct Fundraising (List Activity or Event Id	entifier)	
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b)	รู้ รายการและเดินจะ และเดินการเจาตัวการเจาเป็นกุล นา เปลา มาเกล โดกกระหน้า การเจานี้ และเกล นั้น และเลนั้น	ing.
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vi) Public Communications Referring Only to	Party (Made by PAC)	· · · · · · · · · · · · · · · · · · ·
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TOTAL This Period (Exempt Activities)		i i i
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TOTAL This Period (Total Amount Transferred)		International Annual Book Service County Department Annual Services
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SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

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FOR	LINE	21a	OF	FORM	зх

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	ME OF COMMITTEE (IN FUIT) CITIZENS ADVA	NCI	16	OKLAH	DW A
<u>.</u> A.	Full Name (Last, First, Middle Initial)	· 101	<u> </u>	J WLFI VI	Allocated Activity or Event:
· ·	Ton Harrie (Last, 1113t, 1410alo 11110al)	NDN	E		Administrative Fundraising Exempt
	Mailing Address				Voter Drive Direct Candidate Support
	City	State	Zip Code		Public Comm (ref to party only) by PAC
	City	Glate	Zip Code	•	
	Purpose of Disbursement:		6	Book sile zamilannesti	Allocated Activity or Event Year-To-Date
					And the second s
	Activity or Event Identifier:		+4 -	Category/	
		•		Туре	Date Committee C
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В.	Full Name (Last, First, Middle Initial)				Allocated Activity or Event:
	Mailing Address	: : -		· · · · · · · · · · · · · · · · · · ·	Administrative Fundraising Exempt
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	City	State	Zip Code		Public Comm (ref to party only) by PAC
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<u></u>	Full Name (Last, First, Middle Initial)				Allocated Activity or Event:
					Administrative Fundraising Exempt
	Mailing Address				Voter Drive Direct Candidate Support
	City	State	Zip Code		Public Comm (ref to party only) by PAC
٠. '					Allocated Activity or Event Year-To-Date
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	Activity or Event Identifier.		;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;	Category/	
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SCHEDULE H5 (FEC Form 3X)

TRANSFERS OF LEVIN FUNDS RECEIVED FOR ALLOCATED FEDERAL ELECTION ACTIVITY

(To be used by State, District and Local Party Committees Only)

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	FOR LIN	E 18t	OF	FORM	3>
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	AME OF COMMITTEE (In Full)			
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	NONE	MM	generally and grown and months	รู้ โดงสามาริกะ การพัวเทณที่ ที่สามารถในการสามารถที่สามารถใหม่อนก็ที่ นินเทพท์สิทธารการในสมารถให้เป็นการณ์ เราการณำ
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SCHEDULE H6 (FEC Form 3X) DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS FOR ALLOCATED FEDERAL ELECTION ACTIVITY

(To be used by State, District and Local Party Committees Only)

PAGE	1	I OF		l		
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SCHEDULE L (FEC Form 3X)

AGGREGATION PAGE: LEVIN FUNDS

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SCHEDULE L-A (FEC Form 3X) ITEMIZED RECEIPTS OF LEVIN FUNDS

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Any information copied from such Reports and Statements may not be so for commercial purposes, other than using the name and address of a	sold or used by any pers	son for the purpose of soliciting contributions o solicit contributions from such committee.
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SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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OF LEVIN FUNDS Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or 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) OKLAHOMA ITIZENS Full Name (Last, First, Middle Initial) / Full Organization Name A. Date of Disbursement NONE Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Full Name (Last, First, Midrile Initial) / Full Organization Name В. Date of Disbursement Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Full Name (Last, First, Middle Initial) / Full Organization Name Date of Disbursement Mailing Address City State. Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Full Name (Last, First, Middle Initial) / Full Organization Name D. **Date of Disbursement** Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Full Name (Last, First, Middle Initial) / Full Organization Name Date of Disbursement Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement SUBTOTAL of Disbursements This Page (optional).....

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