

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM

Oct 23 9 36 AM '95



**OKLAHOMA
BANKERS ASSOCIATION**

*P.O. Box 18246
Oklahoma City, Oklahoma 73154-0246
(405) 424-5252
FAX (405) 424-4518*

October 18, 1995

Federal Election Commission
Reports Analysis Division
Washington, D.C. 20463

Dear Reports Analyst:

Please find enclosed an Amended copy of our Mid-Year Report(1/1/95-6/30/95).
We have corrected the mistakes and hope that we have not caused to much confusion.
Please accept our apologies and if you have any questions please feel free to contact me at
(405) 424-5252.

Sincerely,

A handwritten signature in black ink, appearing to read 'Ryan J. Humphrey'.

Ryan J. Humphrey
Accounting Clerk-Fed Pac

encls.

9 5 0 3 0 0 4 5 4 7 2

SEMI-ANNUAL REPORT NOTICE

FEDERAL ELECTION COMMISSION

PARTIES AND PACS

July 7, 1995

REPORT	REPORTING PERIOD*	REG./CERT. MAILING DATE**	FILING DATE
Mid-Year	01/01/95 - 06/30/95	07/31/95	07/31/95

WHO MUST FILE

Party committees and PACs (nonconnected committees and separate segregated funds) which normally file on a quarterly basis must file a Mid-Year Report in July.

INDEPENDENT EXPENDITURES

Any PAC that makes independent expenditures in connection with a special election may have to file a 24 hour report. This reporting requirement will be triggered if the committee makes independent expenditures aggregating \$1,000 or more after the 20th day, but more than 24 hours, before the election.

CHANGE IN FILING FREQUENCY

Committees wishing to change their reporting schedule (for example, from semiannual to monthly) must notify the Commission in writing when filing a report due under their current reporting schedule. Committees may change their filing frequencies no more than once per calendar year.

LABEL

Committees should affix the peel-off label from the envelope to Line 1 of the report. Corrections should be made on the label.

COMPLIANCE

Treasurers of political committees are responsible for filing all reports on time. Failure to do so is subject to enforcement action. Committees filing illegible reports or using non-FEC forms (except for FEC approved computer generated forms) will be required to refile.

*These dates indicate the beginning and the end of the reporting period. A reporting period always begins the day after the closing date of the last report filed. If the committee is new and has not previously filed a report, the first report must cover all activity that occurred before the committee registered.

**Reports sent by registered or certified mail must be postmarked by the mailing date; otherwise, they must be received by the filing date.

FOR INFORMATION, CALL: 800/424-9530 or 202/219-3420



35030043403

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) OBA FED ELECT	2. FEC IDENTIFICATION NUMBER C00139477
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 643 NE 41ST	3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)
CITY, STATE and ZIP CODE Oklahoma City, OK 73105	

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:
- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31 |
- Twelfth day report preceding _____ (Type of Election)
 election on _____ in the State of _____
- Thirtieth day report following the General Election on _____
 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 <u>1/1/95</u> through <u>6/30/95</u>		\$ 14157.59
6. (a) Cash on Hand January 1, 19 <u>95</u>	\$ 14157.59	
(b) Cash on Hand at Beginning of Reporting Period	\$ 4832.13	\$ 4832.13
(c) Total Receipts (from Line 19)	\$ 18989.72	\$ 18989.72
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 169.84	\$ 169.84
7. Total Disbursements (from Line 30)	\$ 18819.88	\$ 18819.88
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 0	For further information contact: Federal Election Commission 999 E. Street, NW Washington, DC 20483 Toll Free 800-424-9630 Local 202-219-3420
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0	

I 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 Beverage

Signature of Treasurer

Date
10/12/95
7/31/95

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

2 3 4 5 6 7 8 9 0 1 2 3 4 5 6 7 8 9 0

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/91)

P COMMITTEE OBA Fed Elect		REPORT COVERING PERIOD		
		FROM 1/1/95	TO 6/30/95	
		COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts				
11.	Contributions (other than loans) From:			
a.	Individual/Persons Other Than Political Committees	2000.00	2000.00	11(a)(i)
	i. Itemized (use Schedule A)	2520.00	2520.00	11(a)(ii)
	ii. Unitemized	4520.00	4520.00	11(a)(iii)
	iii. Total (add i and ii) >			11(b)
b.	Political Party Committees			11(c)
c.	Other Political Committees (such as PACs)	4520.00	4520.00	11(d)
d.	Total Contributions (add a (i, b and c) >			12
12.	Transfers From Affiliated/Other Party Committees			13
13.	All Loans Received			14
14.	Loan Repayments Received			15
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)			16
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees	312.13	312.13	17
17.	Other Federal Receipts (Dividends, Interest, etc.)			18
18.	Transfers from Nonfederal Account for Joint Activity	4832.13	4832.13	19
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	4832.13	4832.13	20
20.	Total Federal Receipts (subtract line 18 from line 19) >			
II. Disbursements				
21.	Operating Expenditures:			21(a)(i)
a.	Shared Federal/Non-Federal Activity (from Schedule H4)			21(a)(ii)
	i. Federal Share			21(b)
	ii. Non-Federal Share	169.84	169.84	21(c)
b.	Other Federal Operating Expenditures	169.84	169.84	22
c.	Total Operating Expenditures (add a i, ii, and b) >			23
22.	Transfers to Affiliated/Other Party Committees			24
23.	Contributions to Federal Candidates/Committees and Other Political Committees			25
24.	Independent Expenditures (use Schedule E)			26
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			27
26.	Loan Repayments Made			28(a)
27.	Loans Made			28(b)
28.	Refunds of Contributions To:			28(c)
a.	Individual/Persons Other Than Political Committees			28(d)
b.	Political Party Committees			29
c.	Other Political Committees (such as PACs)			30
d.	Total Contribution Refunds (add a, b and c) >			31
29.	Other Disbursements	169.84	169.84	
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	169.84	169.84	
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >			
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans) (from line 11d)	4520.00	4520.00	32
33.	Total Contribution Refunds (from line 28d)	0.00	0.00	33
34.	Net Contributions (other than loans) (subtract line 33 from 32)	4520.00	4520.00	34
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	169.84	169.84	35
36.	Total Federal Operating Expenditures	0.00	0.00	36
37.	Offsets to Operating Expenditures (from line 15)	169.84	169.84	37
37.	Net Operating Expenditures (subtract line 36 from 35) >			

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)

OBA Fed Elect

6
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1
0
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2
1
0

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles Hall P.O. Box 18246 Oklahoma City, OK 73154	Okla Bankers Assoc	1/27/95	400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation lobbyist	Aggregate Year-to-Date > \$ 400.00	
B. Full Name, Mailing Address and ZIP Code Don Sherman P.O. Box 351 Purcell, OK 73080	McClain County National Bank	3/21/95	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation banker	Aggregate Year-to-Date > \$ 200.00	
C. Full Name, Mailing Address and ZIP Code Don Sherman II 708 N. 6th Purcell, OK 73080	McClain County National Bank	3/21/95	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation banker	Aggregate Year-to-Date > \$ 200.00	
D. Full Name, Mailing Address and ZIP Code Karla Brakefield Route 1, Box 136 Washington, OK 73093	McClain County National Bank	3/21/95	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation banker	Aggregate Year-to-Date > \$ 200.00	
E. Full Name, Mailing Address and ZIP Code Mary Angus Sherman 221 Olde Brook Norman, OK 73072	McClain County National Bank	3/21/95	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation banker	Aggregate Year-to-Date > \$ 200.00	
F. Full Name, Mailing Address and ZIP Code Perry Nemecek 716 Harrison Purcell, OK 73080	McClain County National Bank	3/21/95	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation banker	Aggregate Year-to-Date > \$ 200.00	
G. Full Name, Mailing Address and ZIP Code Philip Pedlow 131 W. Main Purcell, OK 73080	McClain County National Bank	3/21/95	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation banker	Aggregate Year-to-Date > \$ 200.00	

SUBTOTAL of Receipts This Page (optional) 2000.00

TOTAL This Period (last page this line number only) 2000.00

MODULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 2
FOR LINE NUMBER 11a

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NAME OF COMMITTEE (in Full)

OBA Fed Elect

2
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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Steve Sherman P.O. Box 545 Purcell, OK 73080 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	McClain County National Bank Occupation: banker Aggregate Year-to-Date: \$ 200.00	3/21/95	200.00
Thomas Sherman 2811 Majesty Ct. Norman, OK 73072 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	McClain County National Bank Occupation: banker Aggregate Year-to-Date: \$ 200.00	3/21/95	200.00
C. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date: \$	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date: \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date: \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date: \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date: \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)
 TOTAL This Period (last page this line number only) 2000.00

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11A

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)

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 Bank, N.A. P.O. Box 53425 Oklahoma City, OK 73152	Occupation	1/31/95	41.35
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): MM Interest	Aggregate Year-to-Date \$ 41.35		
B. Full Name, Mailing Address and ZIP Code WestStar Bank, N.A. P.O. Box 53425 Oklahoma City, OK 73152	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): MM Interest	Occupation	2/28/95	38.15
Aggregate Year-to-Date \$ 79.50			
C. Full Name, Mailing Address and ZIP Code WestStar Bank, N.A. P.O. Box 53425 Oklahoma City, OK 73152	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): MM Interest	Occupation	3/31/95	44.90
Aggregate Year-to-Date \$ 124.40			
D. Full Name, Mailing Address and ZIP Code WestStar Bank, N.A. P.O. Box 53425 Oklahoma City, OK 73152	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): MM Interest	Occupation	4/30/95	49.08
Aggregate Year-to-Date \$ 173.48			
E. Full Name, Mailing Address and ZIP Code WestStar Bank, N.A. P.O. Box 53425 Oklahoma City, OK 73152	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): MM Interest	Occupation	5/31/95	69.95
Aggregate Year-to-Date \$ 243.43			
F. Full Name, Mailing Address and ZIP Code WestStar Bank, N.A. P.O. Box 53425 Oklahoma City, OK 73152	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): MM Interest	Occupation	6/30/95	68.70
Aggregate Year-to-Date \$ 312.13			
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 type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date \$			

SUBTOTAL of Receipts This Page (optional) 312.13

TOTAL This Period (last page this line number only) 312.13



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20461

RQ-2

Roger M. Beverage, Treasurer
Oklahoma Bankers Association
Fed Elect
643 NE 41st Street
Oklahoma City, OK 73105

10/11/95

10/11/95

10/11/95

Identification Number: C00139477

Reference: Mid-Year Report (1/1/95-6/30/95)

Dear Mr. Beverage:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-Your calculations for Line 11(d), Columns A and B appear to be incorrect. FEC calculations disclose this amount to be \$4,520.00. Please provide the corrected total on the Detailed Summary Page.

-Your report disclosed a category of financial activity that has been reflected on the wrong line of the Detailed Summary Page. Bank Interest should be properly disclosed on a separate Schedule A, supporting Line 17 of the Detailed Summary Page. Please refer to the instructions contained on the forms to determine the proper categorization when preparing your next filing.

A written response or an amendment to your original report(s) correcting the above problem(s) should be filed with the Federal Election Commission within fifteen (15) days of the date of this letter. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530. My local number is (202) 219-3580.

Sincerely,

Andrea Silcox
Reports Analyst
Reports Analysis Division

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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

10/13/95

Registered/Certified Mail

POSTMARKED

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

E.S.

PREPARER

10/23/95

DATE PREPARED

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