FEC FORM 1

NAME OF

09/04/2013 13:10 PAGE 1 / 4 STATEMENT OF **ORGANIZATION** Office Use Only (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) OKLAHOMA INDEPENDENT PETROLEUM ASSOCIATION FEDERAL PAC (OIPA FEDERAL PAC) 500 N.E. 4th Street ADDRESS (number and street) Suite 200 (Check if address is changed) Oklahoma City 73104 OK CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS cwelch@ctpok.net (Check if address is changed) Optional Second E-Mail Address |dmckee@ctpok.net COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) M M / D D / Y Y Y Y C00444430

2.	DATE	09	04	2013

FEC IDENTIFICATION NUMBER > 3.

X IS THIS STATEMENT NEW (N) OR 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.

Jeff Wilson Type or Print Name of Treasurer

Signature of Treasurer

Jeff Wilson

[Electronically Filed]

Date

09

2013

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.

Of	ffice		For further information contact:
ılu	Jse		Federal Election Commission
0	Only		Toll Free 800-424-9530 Local 202-694-1100

	EEC Ea	rm 1 (Pavisad 02/2000)	Page 2
		rm 1 (Revised 02/2009) OMMITTEE	raye Z
Car	ndidate	Committee:	
(a)		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. (Con information below.)	nplete the candidate
Nam Cand	e of didate		
	didate / Affiliati	on Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)	\times	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected 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 scommittee. (i.e., nonconnected committee)	egregated 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.)	
Join	t Fund	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for troommittees/organizations, at least one of which is an authorized committee of a federal candidate.	
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

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Write or Type Committee Name	raye 3
OKLAHOMA INDEPENDENT PETROLEUM ASSOCIATION FEDERAL PAC (OIPA F	EDEDAL DACI
·	·
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadersh	ip PAC Sponsor
Oklahoma Independent Petroleum Association (OIPA)	
500 NE 4th Street Mailing Address	
Suite 200 Oklahoma City OK 73104	
CITY STATE 2	ZIP CODE
Relationship: X Connected Organization Affiliated Committee Joint Fundraising Representative Lead	dership PAC Sponsor
 Custodian of Records: Identify by name, address (phone number optional) and position of the person in poss books and records. 	session of committee
Professionals, LLC Campaign Technology	1
Full Name2601 NW Expressway	
Mailing Address Suite 503W	
Oklahoma City OK 73112	
Title or Position CITY STATE Z	ZIP CODE
Bookkeeper Telephone number 405 - 2	286 2686
3. Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name any designated agent (e.g., assistant treasurer).	ne and address of
Full Name Jeff Wilson	ı
of Treasurer 500 NE 4th Street	
Mailing Address	
Suite 200	
Oklahoma City OK 73104	
Title or Position	O1 - 2112

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Full Name of Designated M Agent	flike Terry	
Mailing Address	500 N.E. 4th Street	
	Suite 200	
	Oklahoma City CITY STATE	104 ZIP CODE
Title or Position President	Telephone number 405	_ 942 _ _ 2334
Banks or Other De	epositories: List all banks or other depositories in which the committee deposits funds,	holds accounts, rents
safety deposit boxes Name of Bank, Dep	ository, etc.	
safety deposit boxes Name of Bank, Dep	s or maintains funds. pository, etc. BancFirst	
safety deposit boxes Name of Bank, Dep	ository, etc.	
safety deposit boxes Name of Bank, Dep	s or maintains funds. pository, etc. BancFirst	
safety deposit boxes Name of Bank, Dep	Sor maintains funds. PO Box 26788	126-0788
safety deposit boxes Name of Bank, Dep	Sor maintains funds. PO Box 26788	126-0788 ZIP CODE
safety deposit boxes Name of Bank, Dep	Sor maintains funds. POBox 26788 Oklahoma City CITY STATE	
safety deposit boxes Name of Bank, Dep Mailing Address	Sor maintains funds. POBox 26788 Oklahoma City CITY STATE	
safety deposit boxes Name of Bank, Dep Mailing Address	Sor maintains funds. POBox 26788 Oklahoma City CITY STATE	
Name of Bank, Dep Mailing Address Name of Bank, Dep	Sor maintains funds. POBox 26788 Oklahoma City CITY STATE	
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