

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

FEB 3 12 07 PM '98

1. NAME OF COMMITTEE (in full) ORA Fed Elect		2. FEC IDENTIFICATION NUMBER C00139477
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 643 N.E. 41st Street		
CITY, STATE and ZIP CODE Oklahoma City, OK 73105		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

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>01/01/97</u> through <u>12/31/97</u>		
6. (a) Cash on Hand January 1, 19 <u>97</u>		\$ 3,124.48
(b) Cash on Hand at Beginning of Reporting Period	\$ 16,331.48	
(c) Total Receipts (from line 19)	\$ 4,917.87	\$ 18,150.76
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 21,249.35	\$ 21,275.24
7. Total Disbursements (from Line 30)	\$ 16,519.90	\$ 16,545.79
8. Cash on Hand at Close of Reporting Period (Subtract Line 7 from Line 6(d))	\$ 4,729.45	\$ 4,729.45
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$ 0.00	For further information: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9330 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$ 0.00	

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 M. Beverage

Signature of Treasurer

*Roger M. Beverage*

Date

1/29/98

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

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FEC FORM 3X

(Revised 9/93)