FEC FORM 1	_	TATEMEN RGANIZA		-		RECEIVED 2012 JAN 12 AM 9: 21			
1. NAME OF COMMITTEE (ir		(Check if name is changed)		nple:If typing, type the lines.	12FE4N	PECUNANUL CENTER			
Donna Bebo for Congress									
• • • • • • • • •	<u> </u>	<u></u>		<u></u>					
ADDRESS (number a	504	Cedar Rid	lge	Rd					
(Check if a is changed)	ddress	cher	173541						
		c	YTY		STATE	ZIP CODE			
COMMITTEE'S E-MA (Check if is change COMMITTEE'S WEB (Check if is change 2. DATE 3. FEC IDENTIFIC		naBebo@	Bet ess		SŞ.ÇQN	p			
4. IS THIS STATE		/ (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. Type or Print Name of Treasurer Jason Bebo								
Signature of Treasure	Signature of Treasurer Ason Babo Date 01 '04' 2012								
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.									
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FEC Form 1 (Revised 02/2009)

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5.			DMMITTEE								
	Can		Committee:								
	(a)	\mathbf{X}	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. (Complete the candidate information below.)								
	Name Candi										
	Candi Party	idate Affiliatio	n Office State State State State State State District								
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.								
	Name Candi										
	Party Committee:										
	(d)		This committee is a (National, State (Democratic, or subordinate) committee of the Republican, etc.) Party.								
	Polit	ical Ac	tion Committee (PAC):								
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:								
		1993	Corporation Corporation w/o Capital Stock								
			Membership Organization								
			In addition, this committee is a Lobbyist/Registrant PAC.								
	(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)								
			In addition, the committee is a Lobbyist/Registrant PAC.								
			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)								
	Joint	Fund	raising Representative:								
	(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one political sommittees of a federal candidate.								
	(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.								
		Comr	nittees Participating in Joint Fundraisar								
		1.									
		2.									
		З.	FEC ID number								
		4.									

Write or Type Committee Name

Donna Bebo for Congress

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

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	Relationship:																																											

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name	Bebo		_1_1_1_	
Mailing Address	504 Cedar Ridge Rd			<u> </u>
			OK	73541
Title or Position	CITY		STATE	ZIP CODE
Treasurer	Telep	hone num	_{iber} [580	

8. Treasurer: List the name and address (phone number - optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name Jaso	n Bebo	<u> </u>	<u></u>
Mailing Address	504 Cedar Ridge Rd		<u> </u>
-			
			73541 _
Title or Position	CITY	STATE	ZIP CODE
		Telephone number	580,[549,]_[6245,]

Page 3

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	Full Name of Designated Agent	Donna	а Веро, , , , , , , , , , , , , , ,			
	Mailing Address		504 Çedar Ridge Rd			
			[73541,
			CITY	┟╼┉╺┠╾╾╌╿╖╺╼╼┦	STATE	ZIP CODE
	Title or Position			Telephone nur	nber 580	0_]-[549_]-[6245_]
9.	Banks or Other safety deposit bo Name of Bank, I	oxes or main		nich the commit	ee deposits	funds, holds accounts, rents
		-				
			ational Bank & Trust Co	<u> </u>		
	Mailing Address		P.O. Box 2009			
					OK	173502 - 2009
			CITY		STATE	ZIP CODE
	Name of Bank,	Depository, e	etc.			
				<u></u>	┖═╌┞╶╌┠╍┨╺╉	
	Mailing Address					
					LIIII	
			CITY		STATE	ZIP CODE

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Postmark Illegible									
No Postmark									
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Ne	ext Business Day Delivery								
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PREPARER (3/2005)	DATE PREPARED								

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