

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
FEC MAIL CENTER

2019 APR -1 AM 11:02 Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines.

12FE4M5

D.R.I.V.E. Political Fund Chapter 886

ADDRESS (number and street)

3528 W. Reno

Check if different than previously reported. (ACC)

Oklahoma City

OK

73107

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C 00000489

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

- Primary (12P)
- Convention (12C)
- General (12G)
- Special (12S)
- Runoff (12R)

Election on / / in the State of

(d) 30-Day POST-Election Report for the:

- General (30G)
- Runoff (30R)
- Special (30S)

Election on / / in the State of

5. Covering Period

/ / through

/ /

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 Jerry Sims, Jr.

Signature of Treasurer

Jerry Sims, Jr.

Date

/ /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office Use Only

FEC FORM 3X
Rev. 05/2016

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

D.R.I.V.E. Political Fund Chapter 886

Report Covering the Period: From:

M	M
10	

 /

D	D
01	

 /

Y	Y	Y	Y	Y	Y
2	0	1	8		

 To:

M	M
11	

 /

D	D
26	

 /

Y	Y	Y	Y	Y	Y
2	0	1	8		

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

	COLUMN A This Period	COLUMN B Calendar Year-to-Date																										
6. (a) Cash on Hand January 1, <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="padding: 2px;">Y</td><td style="padding: 2px;">Y</td><td style="padding: 2px;">Y</td><td style="padding: 2px;">Y</td><td style="padding: 2px;">Y</td><td style="padding: 2px;">Y</td></tr><tr><td style="padding: 2px;">2</td><td style="padding: 2px;">0</td><td style="padding: 2px;">1</td><td style="padding: 2px;">8</td><td style="padding: 2px;"></td><td style="padding: 2px;"></td></tr></table>	Y	Y	Y	Y	Y	Y	2	0	1	8			<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="padding: 2px;">1</td><td style="padding: 2px;">1</td><td style="padding: 2px;">3</td><td style="padding: 2px;">3</td><td style="padding: 2px;">4</td><td style="padding: 2px;">3</td><td style="padding: 2px;">3</td></tr></table>	1	1	3	3	4	3	3	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="padding: 2px;">1</td><td style="padding: 2px;">1</td><td style="padding: 2px;">3</td><td style="padding: 2px;">3</td><td style="padding: 2px;">4</td><td style="padding: 2px;">3</td><td style="padding: 2px;">3</td></tr></table>	1	1	3	3	4	3	3
Y	Y	Y	Y	Y	Y																							
2	0	1	8																									
1	1	3	3	4	3	3																						
1	1	3	3	4	3	3																						
(b) Cash on Hand at Beginning of Reporting Period.....	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="padding: 2px;">1</td><td style="padding: 2px;">6</td><td style="padding: 2px;">7</td><td style="padding: 2px;">8</td><td style="padding: 2px;">4</td><td style="padding: 2px;">1</td><td style="padding: 2px;">4</td></tr></table>	1	6	7	8	4	1	4																				
1	6	7	8	4	1	4																						
(c) Total Receipts (from Line 19).....	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="padding: 2px;">-</td><td style="padding: 2px;">0</td><td style="padding: 2px;"></td><td style="padding: 2px;"></td><td style="padding: 2px;"></td><td style="padding: 2px;"></td><td style="padding: 2px;"></td></tr></table>	-	0						<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="padding: 2px;">2</td><td style="padding: 2px;">4</td><td style="padding: 2px;">9</td><td style="padding: 2px;">3</td><td style="padding: 2px;">8</td><td style="padding: 2px;">4</td><td style="padding: 2px;">7</td></tr></table>	2	4	9	3	8	4	7												
-	0																											
2	4	9	3	8	4	7																						
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="padding: 2px;">1</td><td style="padding: 2px;">6</td><td style="padding: 2px;">7</td><td style="padding: 2px;">8</td><td style="padding: 2px;">4</td><td style="padding: 2px;">1</td><td style="padding: 2px;">4</td></tr></table>	1	6	7	8	4	1	4	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="padding: 2px;">3</td><td style="padding: 2px;">6</td><td style="padding: 2px;">2</td><td style="padding: 2px;">7</td><td style="padding: 2px;">2</td><td style="padding: 2px;">8</td><td style="padding: 2px;">0</td></tr></table>	3	6	2	7	2	8	0												
1	6	7	8	4	1	4																						
3	6	2	7	2	8	0																						
7. Total Disbursements (from Line 31).....	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="padding: 2px;">3</td><td style="padding: 2px;">0</td><td style="padding: 2px;">4</td><td style="padding: 2px;">4</td><td style="padding: 2px;">0</td><td style="padding: 2px;">1</td><td style="padding: 2px;"></td></tr></table>	3	0	4	4	0	1		<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="padding: 2px;">2</td><td style="padding: 2px;">2</td><td style="padding: 2px;">5</td><td style="padding: 2px;">3</td><td style="padding: 2px;">2</td><td style="padding: 2px;">6</td><td style="padding: 2px;">7</td></tr></table>	2	2	5	3	2	6	7												
3	0	4	4	0	1																							
2	2	5	3	2	6	7																						
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="padding: 2px;">1</td><td style="padding: 2px;">3</td><td style="padding: 2px;">7</td><td style="padding: 2px;">4</td><td style="padding: 2px;">0</td><td style="padding: 2px;">1</td><td style="padding: 2px;">3</td></tr></table>	1	3	7	4	0	1	3	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="padding: 2px;">1</td><td style="padding: 2px;">3</td><td style="padding: 2px;">7</td><td style="padding: 2px;">4</td><td style="padding: 2px;">0</td><td style="padding: 2px;">1</td><td style="padding: 2px;">3</td></tr></table>	1	3	7	4	0	1	3												
1	3	7	4	0	1	3																						
1	3	7	4	0	1	3																						
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="padding: 2px;">-</td><td style="padding: 2px;">0</td><td style="padding: 2px;"></td><td style="padding: 2px;"></td><td style="padding: 2px;"></td><td style="padding: 2px;"></td><td style="padding: 2px;"></td></tr></table>	-	0																									
-	0																											
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="padding: 2px;">-</td><td style="padding: 2px;">0</td><td style="padding: 2px;"></td><td style="padding: 2px;"></td><td style="padding: 2px;"></td><td style="padding: 2px;"></td><td style="padding: 2px;"></td></tr></table>	-	0																									
-	0																											

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
1050 First Street, N.E.
Washington, DC 20463

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

D.R.I.V.E. Political Fund Chapter 886

Report Covering the Period: From: ^{M M / D D / Y Y Y Y} 10 / 01 / 2018 To: ^{M M / D D / Y Y Y Y} 11 / 26 / 2018

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	,	,
(ii) Unitemized	,	,
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	,	,
(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	,	,
14. Loan Repayments 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.).....	,	,
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	,	,
(b) Levin Funds (from Schedule H5)	,	,
(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).....▶	,	,

24,938.47

FORM 3X (REV. 05/2016)

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share		
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))		
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees		
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		
29. Other Disbursements	3,044.01	22,532.67
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	3,044.01	22,532.67
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)		

2007-08-10 10:40:00 AM

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOLIO NUMBER: PAGE 6 OF 8
 11a 11b 11c 12
 13 14 15 16 17

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)

D.R.I.V.E. Political Fund Chapter 886

A.		Date of Receipt
Full Name (Last, First, Middle Initial)		M M / D D / Y Y Y Y
Mailing Address		
City State Zip Code		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		
Name of Employer Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
B.		Date of Receipt
Full Name (Last, First, Middle Initial)		M M / D D / Y Y Y Y
Mailing Address		
City State Zip Code		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		
Name of Employer Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
C.		Date of Receipt
Full Name (Last, First, Middle Initial)		M M / D D / Y Y Y Y
Mailing Address		
City State Zip Code		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		
Name of Employer Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

[Handwritten marks and scribbles]

NOTICE OF CONSENT

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)

D.R.I.V.E. Political Fund Chapter 886

Full Name (Last, First, Middle Initial)

A. *Nikki Nice for Ward 7*

Mailing Address: *PO Box 52961*

City: *OKla. City, OK* State: *OK* Zip Code: *73152*

Purpose of Disbursement: *donation*

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) *▼*

State: _____ District: _____

Date of Disbursement

10/16/2018

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. *Friends of Mike Dover*

Mailing Address: *3406 Venice Blvd*

City: *OKla. City, OK* State: *OK* Zip Code: *73112*

Purpose of Disbursement: *donation*

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) *▼*

State: _____ District: _____

Date of Disbursement

10/17/2018

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. *Mike Shelton for County Assessor*

Mailing Address: *6810 NW 13th St*

City: *OKla. City, OK* State: *OK* Zip Code: *73127*

Purpose of Disbursement: *donation*

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) *▼*

State: _____ District: _____

Date of Disbursement

10/17/2018

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional).....▶

750.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 8 OF 8

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)

D.R.I.V.E. Political Fund Chapter 886

Full Name (Last, First, Middle Initial)

Date of Disbursement

A.

Advancing OK
Mailing Address
713 NW 17th St.

10/24/2018

City *Okla. City* State *OK* Zip Code *73103*

Purpose of Disbursement
donation
Candidate Name

Amount of Each Disbursement this Period
1,500.00

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

Full Name (Last, First, Middle Initial)

Date of Disbursement

B.

Financial Innovations, Inc.
Mailing Address
1 Weingeroff Blvd
City *Cranston* State *RI* Zip Code *02910*

10/29/2018

Purpose of Disbursement
Candidate Name

Amount of Each Disbursement this Period
794.01

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

Full Name (Last, First, Middle Initial)

Date of Disbursement

C.

Mailing Address
City State Zip Code

Purpose of Disbursement
Candidate Name

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

SUBTOTAL of Disbursements This Page (optional).....▶

2,294.01

TOTAL This Period (last page this line number only).....▶

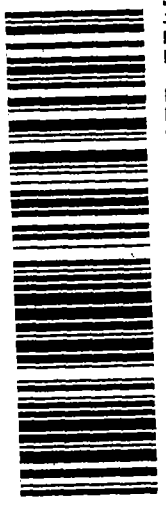
3,044.01

2018-10-24 10:08:00 AM CONN-HWING

TEAMSTERS LOCAL 886
3528 W. Reno
Oklahoma City, OK 73107

6

91 7199 9991 7031 2792 9246



91 7199 9991 7031 2792 9246

Federal Election Committee
999 E Street, NW
Washington, D.C. 20463-0002

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Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked Date of Receipt
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) 3/27/19
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

ES
 PREPARER

4/1/19
 DATE PREPARED

NOT FOR PUBLIC RELEASE