

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) OKROK Inc. Employee Political Action Committee	Jan 75 11 02 AM '94
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 100 West Fifth Street	2. FEC IDENTIFICATION NUMBER 062387
CITY STATE and ZIP CODE Tulsa, OK 74103-4298	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>07/01/93</u> through <u>12/31/93</u>		
6. (a) Cash on Hand January 1, 19 <u>93</u>		\$ 4,297.45
(b) Cash on Hand at Beginning of Reporting Period	\$ 11,915.42	
(c) Total Receipts (from Line 18)	\$ 10,559.18	\$ 19,429.15
(d) Subtotal (and Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 22,474.60	\$ 23,721.60
7. Total Disbursements (from Line 30)	\$ 5,950.00	\$ 7,197.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 16,524.60	\$ 16,524.60
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9630 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$	

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 Claudia Vandiver, Treasurer	
Signature of Treasurer <i>Claudia Vandiver</i>	Date 01/20/94

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

--	--	--	--	--	--	--	--

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE		REPORT COVERING PERIOD	
UNION Inc. Employee Political Action Committee		FROM 07/01/93	TO: 12/31/93
I. Receipts		COLUMN A Total This Period	COLUMN B Calendar Year
1.	Contributions (other than loans) From:		
a.	Individuals/Persons Other Than Political Committees		
i.	Itemized (use Schedule A)	\$ 2,657.50	\$ 2,957.50
ii.	Unitemized	7,735.62	16,196.24
iii.	Total	10,393.12	19,153.74
	(add i and ii) >		
b.	Political Party Committees		
c.	Other Political Committees (such as PACs)		
d.	Total Contributions	10,393.12	19,153.74
	(add a iii, b and c) >		
11.	Transfers From Affiliated/Other Party Committees		
12.	All Loans Received		
14.	Loan Repayments Received		
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)		
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17.	Other Federal Receipts (Dividends, Interest, etc.)	166.06	225.41
18.	Transfers from Nonfederal Account for Joint Activity		
19.	Total Receipts	10,559.18	19,429.15
	(add 11d, 12, 13, 14, 15, 16, 17, and 18) >		
20.	Total Federal Receipts	10,559.18	19,429.15
	(subtract line 18 from line 19) >		
II. Disbursements			
21.	Operating Expenditures:		
a.	Shared Federal/Non-Federal Activity (from Schedule H4)		
i.	Federal Share		
ii.	Non-Federal Share		
b.	Other Federal Operating Expenditures		
c.	Total Operating Expenditures	-	247.00
	(add a i, a ii, and b) >		
22.	Transfers to Affiliated/Other Party Committees		
23.	Contributions to Federal Candidates/Committees and Other Political Committees	4,850.00	5,100.00
24.	Independent Expenditures (use Schedule E)		
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(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	1,100.00	1,850.00
	(add ii, b and c) >		
29.	Other Disbursements	5,950.00	7,197.00
30.	Total Disbursements	5,950.00	7,197.00
	(add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >		
31.	Total Federal Disbursements	5,950.00	7,197.00
	(subtract line 21 a ii from line 30) >		
III. Net Contributions/Operating Expenditures			
32.	Total Contributions (other than loans)(from line 11d)	10,393.12	19,153.74
33.	Total Contribution Refunds (from line 28d)	-	-
34.	Net Contributions (other than loans)(subtract line 33 from 32)	10,393.12	19,153.74
35.	Total Federal Operating Expenditures	-	247.00
	(add 21 a i and 21 b) >		
36.	Offsets to Operating Expenditures (from line 15)	-	-
37.	Net Operating Expenditures	-	247.00
	(subtract line 36 from 35) >		

2
3
4
7
4
1
3
7
9

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 3
FOR LINE NUMBER 11(a)(1)

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)

ONEOK Inc. Employee Political Action Committee

0 4 0 3 8 7 4 1 3 3 0

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
L. W. Brummett 9915 South Braden Tulsa, OK 74136 Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> N/A	ONEOK Inc. Occupation Executive Vice President Aggregate Year-to-Date > \$ 300.00	Monthly payroll deduction	\$150.00 (\$25.00 per month)
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
B. E. Chaffin 1104 South Oak Broken Arrow, OK 74012 Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> N/A	Oklahoma Natural Gas Company Occupation Vice President Customer Services Aggregate Year-to-Date > \$ 300.00	Twice monthly payroll deduction	\$150.00 (\$12.50 per pay period)
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
N. E. Duckworth 6517 East 85th Place Tulsa, OK 74133 Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> N/A	Oklahoma Natural Gas Company Occupation Vice President Human Resources Aggregate Year-to-Date > \$ 287.50	Twice monthly payroll deduction	\$137.50 (\$12.50 and \$10.00 per pay period)
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
J. W. Garrett 2537 West 68th Street Tulsa, OK 74132 Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> N/A	Oklahoma Natural Gas Company Occupation Vice President Operations Aggregate Year-to-Date > \$ 300.00	Monthly payroll deduction	\$150.00 (\$25.00 per month)
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
K. D. Helms 2714 Buford Muskogee, OK 74403 Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> N/A	Oklahoma Natural Gas Company Occupation District Vice President Aggregate Year-to-Date > \$ 300.00	Twice monthly payroll deduction	\$150.00 (\$12.50 per pay period)
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
G. C. Hopper 7743 South Irvington Avenue Tulsa, OK 74102 Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> N/A	Oklahoma Natural Gas Company Occupation Vice President Marketing Aggregate Year-to-Date > \$ 216.00	Twice monthly payroll deduction	\$108.00 (\$9.00 per pay period)
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
G. C. Ingram 3707 South Delaware Place Tulsa, OK 74105 Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> N/A	Retired Occupation Aggregate Year-to-Date > \$ 300.00	08/03/93	\$300.00

SUBTOTAL of Receipts This Page (optional) \$1,145.50

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

SCHEDULE A

ITEMIZED RECEIPTS

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)

ONEOK Inc. Employee Political Action Committee

9
4
0
3
8
7
4
1
3
3
1

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
E. H. Kamphaus 7620 East 67th Place Tulsa, OK 74133	Oklahoma Natural Gas Company	Monthly payroll deduction	\$150.00 (\$25.00 per month)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: President Aggregate Year-to-Date > \$ 300.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
J. R. Musteller 6338 South 112th East Avenue Tulsa, OK 74133	ONEOK Inc.	Monthly payroll deduction	\$150.00 (\$25.00 per month)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: Executive Vice President Aggregate Year-to-Date > \$ 300.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
W. N. Pirtle 3009 Charing Cross Road Oklahoma City, OK 73101	Oklahoma Natural Gas Company	Twice monthly payroll deduction	\$180.00 (\$15.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: Senior Vice President Aggregate Year-to-Date > \$ 360.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
C. L. Probst P.O. Box 1372 Woodward, OK 73802	Oklahoma Natural Gas Company	Twice monthly payroll deduction	\$120.00 (\$10.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: Area Manager Aggregate Year-to-Date > \$ 240.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
W. N. Radmilovich 4922 East 38th Place Tulsa, OK 74135	Oklahoma Natural Gas Company	Monthly payroll deduction	\$150.00 (\$25.00 per month)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: Vice President Corporate Communications Aggregate Year-to-Date > \$ 300.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
J. D. Scott 7845 South 30th West Avenue Tulsa, OK 74132	ONEOK Inc.	Twice monthly payroll deduction	\$300.00 (\$25.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: Chairman of the Board Aggregate Year-to-Date > \$ 600.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Winsford Spears 15108 South Harvard Bixby, OK 74008	Oklahoma Natural Gas Company	Monthly payroll deduction	\$102.00 (\$17.00 per month)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: General Manager LMS Aggregate Year-to-Date > \$ 204.00		

SUBTOTAL of Receipts This Page (optional) \$1,152.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 3
FOR LINE NUMBER 11(a)(i)

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)

ONEOK Inc. Employee Political Action Committee

2
4
0
3
8
7
4
1
3
6
2

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
B. M. VanMeter 7424 South Gary Place Tulsa, OK 74136	Energy Companies of ONEOK	Twice monthly payroll deduction	\$120.00 (\$10.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: President Aggregate Year-to-Date: \$ 240.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
I. C. Walton 1419 Pine Street Clinton, OK 73601	Oklahoma Natural Gas Company	Twice monthly payroll deduction	\$120.00 (\$10.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: Field Superintendent Aggregate Year-to-Date: \$ 240.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
W. L. Watson 10604 East 100th Tulsa, OK 74133	Oklahoma Natural Gas Company	Twice monthly payroll deduction	\$120.00 (\$10.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: Manager Investor Relations Aggregate Year-to-Date: \$ 240.00		
D. 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: \$		
E. 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: \$		
F. 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: \$		
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) \$ 360.00

TOTAL This Period (last page this line number only) \$2,657.50

SCHEDULE B

ITEMIZED DISBURSEMENTS

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)

ONBOK Inc. Employee Political Action Committee

9
4
3
8
7
4
3
3
5

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Robert T. Matsui 2353 Hayburn House Office Bldg. Washington, DC 20515	Candidate for U.S. House of Representatives Dist. 5 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/23/93	\$500.00
Michael A. Andrews 303 Cannon House Office Bldg. Washington, DC 20515	Candidate for U.S. House of Representatives Dist. 25 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/23/93	\$500.00
Peter Hoagland 1710 Longworth House Office Bldg. Washington, DC 20515	Candidate for U.S. House of Representatives Dist. 2 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/23/93	\$500.00
L. F. Payne 1118 Longworth House Office Bldg. Washington, DC 20515	Candidate for U.S. House of Representatives Dist. 5 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/23/93	\$500.00
Gerald D. Kleczka 226 Cannon House Office Bldg. Washington, DC 20515	Candidate for U.S. House of Representatives Dist. 4 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/23/93	\$500.00
William Jefferson 506 Cannon House Office Bldg. Washington, DC 20515	Candidate for U.S. House of Representatives Dist. 2 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/23/93	\$500.00
Greg Laughlin 718 Cannon House Office Bldg. Washington, DC 20515	Candidate for U.S. House of Representatives Dist. 14 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/23/93	\$250.00
Bill Brewster 1404 Longworth House Office Bldg. Washington, DC 20515	Candidate for U.S. House of Representatives Dist. 3 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/23/93	\$500.00
Ernest Istook 1116 Longworth House Office Bldg. Washington, DC 20515	Candidate for U.S. House of Representatives Dist. 5 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) Debt Retirement	07/23/93	\$500.00

SUBTOTAL of Disbursements This Page (optional) \$4,250.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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)
 ONEOK Inc. Employee Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Dave McGurdy 2334 Rayburn House Office Bldg. Washington, DC 20515	Purpose of Disbursement Candidate For U.S. House of Representatives Dist. 4 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/23/93 09/10/93	\$500.00 \$100.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

2 3 4 5 6 7 8 9 10 11 12 13 14

SUBTOTAL of Disbursements This Page (optional)	\$ 600.00
TOTAL This Period (last page this line number only)	\$4,850.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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)

OSEUK Inc. Employee Political Action Committee

5
4
3
2
1
0

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement State Auditor/Inspector - Oklahoma Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
Clifton Scott 3 State Capitol Bldg. 2 State Auditor/Inspector, Room 180 Oklahoma City, OK 73105		07/23/93	\$400.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) \$400.00

TOTAL This Period (last page this line number only) \$400.00

**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

Registered/Certified Mail

POSTMARKED

1/21/94

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

1/25/94
 DATE PREPARED

2 4 3 8 7 4 1 3 3 6