

48-HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

1. NAME OF COMMITTEE IN FULL MULLIN FOR AMERICA				
ADDRESS (number and street) PO BOX 3681				
CITY MUSKOGEE	STATE OK	ZIP CODE 74402-3681		
2. NAME OF CANDIDATE MULLIN, MARKWAYNE, , MR.,		3. OFFICE SOUGHT (State and District) Senate OK		4. FEC IDENTIFICATION NUMBER C00498345
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON ____ / ____ / ____				

A. FULL NAME BRAVO, MATTHEW, , ,			Name of Employer S-3 GROUP	Date (month, day, year) 06/15/2022	Amount 1000.00
MAILING ADDRESS 307 KENTUCKY AVE			Transaction ID : 66F3CA31035414863		
CITY ALEXANDRIA	STATE VA	ZIP CODE 22305-1739	Occupation CONSULTANT		
B. FULL NAME CARD, BRAD, , ,			Name of Employer CARD ASSOCIATES	Date (month, day, year) 06/16/2022	Amount 1000.00
MAILING ADDRESS 15356 FIDDLESTICKS BLVD			Transaction ID : 67ED13FE28ADC44F		
CITY FORT MYERS	STATE FL	ZIP CODE 33912-3925	Occupation LOBBYIST		
C. FULL NAME BODE, DENISE, , ,			Name of Employer MICHAEL BEST	Date (month, day, year) 06/16/2022	Amount 2900.00
MAILING ADDRESS 28389 CATALPA POINT RD			Transaction ID : 60BD072B0138E4716		
CITY EASTON	STATE MD	ZIP CODE 21601-8579	Occupation PARTNER		
D. FULL NAME BODE, DENISE, , ,			Name of Employer MICHAEL BEST	Date (month, day, year) 06/16/2022	Amount 2900.00
MAILING ADDRESS 28389 CATALPA POINT RD			Transaction ID : 6C39A5B3E3E1F484C		
CITY EASTON	STATE MD	ZIP CODE 21601-8579	Occupation PARTNER		
E. FULL NAME LIBERTY FUND; THE			Name of Employer	Date (month, day, year) 06/16/2022	Amount 2900.00
MAILING ADDRESS PO BOX 1992			Transaction ID : 6F555F2E0E80147C9		
CITY VANCOUVER	STATE WA	ZIP CODE 98668-1992	Occupation		
SIGNATURE (optional) LISKER, LISA, , ,			DATE 06/17/2022	For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100	
<i>[Electronically Filed]</i>					

Any information copied from reports and statements filed under the Federal Election Campaign Act 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.

FEC FORM 6

(Revised 03/2016)

48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

1. NAME OF COMMITTEE IN FULL MULLIN FOR AMERICA			
ADDRESS (number and street) PO BOX 3681			
CITY, STATE, and ZIP CODE MUSKOGEE OK 74402-3681			
2. NAME OF CANDIDATE MULLIN, MARKWAYNE, , MR.,		3. OFFICE SOUGHT (State and District) Senate OK	
4. FEC IDENTIFICATION NUMBER C00498345		continuation page	
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____			

A. FULL NAME, MAILING ADDRESS AND ZIP CODE LIBERTY FUND; THE PO BOX 1992 VANCOUVER WA 98668-1992	Name of Employer Transaction ID : 66271EF9D064547D4961 Occupation	Date (month, day, year) 06/16/2022	Amount 2900.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE BODE, JOHN, , MR., 26389 CATALPA POINT RD. EASTON MD 21601	Name of Employer CORN REFINERS ASSOCIATION Transaction ID : 6FAC2054A0BC14CE0A94 Occupation ASSOCIATION EXECUTIVE	Date (month, day, year) 06/16/2022	Amount 2900.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE BODE, JOHN, , MR., 26389 CATALPA POINT RD. EASTON MD 21601	Name of Employer CORN REFINERS ASSOCIATION Transaction ID : 62E08001659F143888B0 Occupation ASSOCIATION EXECUTIVE	Date (month, day, year) 06/16/2022	Amount 2900.00
D. FULL NAME, MAILING ADDRESS AND ZIP CODE MORRISEY, DENISE, H., MS., 7400 PARK TERRACE DR ALEXANDRIA VA 22307-2039	Name of Employer CAPITOL COUNSEL Transaction ID : 6FD7D84CF3AE44AE18B4 Occupation PARTNER	Date (month, day, year) 06/16/2022	Amount 2000.00
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount