FEC FORM 1		_	MENT NIZATI	-			Office Use (PAGE 1 / 4 ——
1. NAME OF COMMITTEE (in	full)	X (Check if n is changed		ample:If typing, er the lines.	type	12FE4M5		
	nunity	Bankers PA	C (BancF	irst Corpo	oration)		
ADDRESS (number an	d street)	PO BOX 26788						
 (Check if a is changed) 								
						OK	73126-0788	
		CITY ▲				STATE ▲	-	ZIP CODE▲
COMMITTEE'S E-MA								
(Check if a is changed)		Randy.McDaniel@	BancFirst.bank					
		Optional Second E Allyson.Halsey@Ban						
COMMITTEE'S WEB	ddress	DRESS (URL)						
2. DATE 05	/ D 06]					
3. FEC IDENTIFIC	ATION NU	MBER 🕨	C C001600	77				
4. IS THIS STATEM	ENT	NEW (N)	OR		ED (A)			
I certify that I have ex	kamined th	is Statement and to	the best of my	knowledge and	d belief it i	s true, correct	and comple	te.
Type or Print Name o	f Treasurer	McDaniel, John, Ra	indall, Mr.,					
Signature of Treasure	McDa	niel, John, Randall, Mr	·,			Date 05	/ D D 16	/ 2024
NOTE: Submission of f	alse, errone	ous, or incomplete info ANY CHANGE IN II						of 52 U.S.C. §3010
Office Use Only				For further info Federal Election Toll Free 800-42 Local 202-694-1	n Commissior 24-9530			FORM 1 ed 06/2012)

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5. TYPE OF COMMITTEE:	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate information b	pelow.)
(b) This committee is an authorized committee, and is NOT a principal campaign committee. information below.)	(Complete the candidate
Name of Candidate	
Candidate Office Party Affiliation Sought: House Senate Pr	State
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee	District
Name of Candidate Image: Conditional state	
(d) This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party
Political Action Committee (PAC):	
(e) X This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
Corporation Corporation w/o Capital Stock	Labor Organization
Membership Organization Trade Association	Cooperative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separ- committee. (i.e., nonconnected committee)	ate segregated fund or party
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
(g) This committee is an independent expenditure-only political committee (Super PAC).	
In addition, this committee is a Lobbyist/Registrant PAC.	
(h) This committee is a political committee with both contribution and non-contribution account	nts (Hybrid PAC).

In addition, this committee is a Lobbyist/Registrant PAC.

Joint Fundraising Representative:

(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
 (j) 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.
 Committees Participating in Joint Fundraiser
 2.

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Write or Type Committee Name	

United Community Bankers PAC (BancFirst Corporation)

б.	Name of Any Connected Or	ganization, Affiliated	Committee,	Joint	Fun	draisi	ng Re	prese	entative,	or	Leadershi	p PAC	Spons	or
	BancFirst Corporation	ן 												
	Mailing Address	PO BOX 26788												
								L	ОК		73126-078	88 -		
			CITY 🔺					ST			Z		DE 🔺	
	Relationship: X Connected	Organization Affilia	ted Organizat	ion		Joint Fu	Indrais	ing R	epresent	ative	e Le	adershi	p PAC S	Sponsor

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

Halsey, Ally	vson, K., Mrs.,
Full Name	
Mailing Address	100 N. Broadway Ave
	Ste 1400
	Oklahoma City OK 73102
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
AA	Image:

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 of Treasurer	McDaniel, John, Randall, Mr.,		
Mailing Address	100 N Broadway Ave		
	Ste 1400		
	Oklahoma City	OK 73102	
	CITY 🔺	STATE A	ZIP CODE
Title or Position	•		
Treasurer	Te	elephone number	218 4163

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Full Name of Designated Agent	Hannah, Dennis, Jay, ,
Mailing Address	100 N Broadway Ave
	Oklahoma City OK 73102
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	
Assitant Treasure	er Telephone number 405 270 1007

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

BancFir	st 		
Mailing Address	100 N Broadway		
	Oklahoma City	OK 73102	
	CITY 🔺	STATE A	ZIP CODE ▲
Name of Bank, Depository, o	etc.		
Mailing Address			
	CITY 🔺	STATE ▲	ZIP CODE ▲