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FORM 1STATEMENT OF
ORGANIZATION

2006 JUN 26 A 8:39

Office Use Only

1. NAME OF
COMMITTEE (in full)(Check if name
is changed)Example: If typing, type
over the lines.

12FE4M5

ROY FOR CONGRESS

ADDRESS (number and street)

2625 W SIERRA SPRINGS DR

(Check if address
is changed)

EDMOND

OK

72003

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

JOHNNYROYFORCONGRESS@YAHOO.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

WWW.ROYFORCONGRESS.COM

COMMITTEE'S FAX NUMBER

405-844-2415

2. DATE

06

12

2006

3. FEC IDENTIFICATION NUMBER ▶

C

4. IS THIS STATEMENT



NEW (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

SANDY L. ROY

Signature of Treasurer

Sandy L. Roy

Date

06

12

2006

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.

Office
Use
OnlyFor further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-684-1100FEC FORM 1
(Revised 02/2003)

FECAND48.PDF

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5. TYPE OF COMMITTEE (Check One)

- (a) ☒ 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 of
Candidate

JOHNNY B ROY

Candidate
Party Affiliation

REP

Office
Sought:

House



Senate



President

State

OK

District

05

- (c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of
Candidate

- (d) ☐ This committee is a ☐ (National, State or subordinate) committee of the ☐ (Democratic, Republican, etc.) Party.
- (e) ☐ This committee is a separate segregated fund.
- (f) ☐ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Type of Connected Organization:



Corporation



Corporation w/o Capital Stock



Labor Organization



Membership Organization



Trade Association



Cooperative

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Write or Type Committee Name

Roy for Congress

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

DAVID THOMPSON

Mailing Address

13320 NORTH MACARTHUR

OKLAHOMA CITY

OK

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

ACCOUNTANT

Telephone number

405-603-6400

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

SANDRA L ROY

Mailing Address

2625 W SIERRA SPRINGS DR

EDMOND

OK

73003

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

TREASURER

Telephone number

405-831-2114

Full Name of
Designated
Agent

Mailing Address

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

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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.

BANK OF OKLAHOMA

Mailing Address

1400 E 15TH STREET

EDMOND

OK

73013-

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Federal Election Commission
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 PREPARER	6/26/06 DATE PREPARED

(3/2005)

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