FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. OKLAHOMA LEADERSHIP COUNCIL 4031 N. LINCOLN BOULEVARD ADDRESS (number and street) (Check if address is changed) OKLAHOMA CITY 73105 OK CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address JOHNELLIOTT@OKGOP.COM is changed) Optional Second E-Mail Address OKGOP@REDCURVE.COM COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2024 C00167213 FEC IDENTIFICATION NUMBER > 3. X 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 ELLIOTT, JOHN,, Date 04 02 2024 Signature of Treasurer ELLIOTT, JOHN, , , NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

EC	Form	1 (Revised 03/2022)	Page 2			
Т	YPE C	OF COMMITTEE:				
C	andid	date Committee:				
(a	a)	This committee is a principal campaign committee. (Complete the candidate information below.)				
(b	p)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the information below.)	ne candidate			
	Name Candid	1				
	Candid Party	date Office House Senate President	State District			
(c	c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.				
		ne of Ididate				
P	Party (Committee:				
(c		This committee is a STA (National, State REP)	c, , etc.) Party			
P	olitica	al Action Committee (PAC):				
(€	e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is a:			
		Corporation Corporation w/o Capital Stock Labor C	Organization			
		Membership Organization Trade Association Coopera	ative			
		In addition, this committee is a Lobbyist/Registrant PAC.				
(f	()	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)	ed 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.)				
(9	g)	This committee is an independent expenditure-only political committee (Super PAC).				
	In addition, this committee is a Lobbyist/Registrant PAC.					
(h	1)	This committee is a political committee with both contribution and non-contribution accounts (Hybrid P.	AC).			
		In addition, this committee is a Lobbyist/Registrant PAC.				
J	oint F	Fundraising Representative:				
(i))	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political			
(j))	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political			
	Com	nmittees Participating in Joint Fundraiser				
	1.	C				

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٧	Vrite or Type Committe	e Name								
	OKLAHOM	A LEADERSHIP COUNCIL								
6.	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor									
	TRUMP 47 CC	DMMITTEE								
	Mailing Address									
	maining / tadiooc									
		ARLINGTON	L L	22216						
		CITY ▲	STATE ▲	ZIP CODE ▲						
	Relationship: Co	onnected Organization Affiliated Organization X Joint Fundraising	g Representative	Leadership PAC Sponso						
7.	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.									
	books and records.									
	Full Name	LLIOTT, JOHN, , ,								
		,18508 ALBERTO PLACE								
	Mailing Address									
		EDMOND	OK	73012						
		0.000								
	Title or Position ▼	CITY ▲	STATE ▲	ZIP CODE ▲						
	TREASURER		₁ 405	650 4984						
	IREASORER	Telephone nur	mber 403							
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 ELLIOTT, JOHN, , ,									
	of Treasurer									
	Mailing Address	18508 ALBERTO PLACE								
		1								
		EDMOND	OK	73012						
		CITY ▲	STATE ▲	ZIP CODE ▲						
	Title or Position ▼									
	TREASURER	Telephone nur	mber 405	- 650 - 4984						

Telephone number

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	Full Name of Designated Agent	PEPPE, DANNY, , ,					
	Mailing Address	RED CURVE SOLUTIONS 138 CONANT STREET SUITE 401					
			MA ⊥ ATE ▲	01915	ZIP CODE ▲		
	Title or Position ▼		~! L _		211 0002 =		
	ACCOUNTING M	ANAGER		978	836 - 8360		
•		Depositories: List all banks or other depositories in which the committee des or maintains funds.	eposits	funds, hold	s accounts, rents		
	Name of Bank, Depository, etc.						
		ARVEST BANK					
	Mailing Address	PO BOX 55500					
		OKLAHOMA CITY	OK	73155			
		CITY ▲ STA	ATE A		ZIP CODE ▲		
	Name of Bank, Depository, etc.						
		CHAIN BRIDGE BANK					
	Mailing Address	1445-A LAUGHLIN AVENUE					
		MCLEAN	VA	22101			
		CITY ▲ STA	ATE A		ZIP CODE ▲		