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. Edwards for OK 2018 PO Box 12164 ADDRESS (number and street) (Check if address is changed) Oklahoma City 73157 OK CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS dejuane3@gmail.com (Check if address is changed) Optional Second E-Mail Address cwelch@ctpok.net COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 08 2018 C00678250 FEC IDENTIFICATION NUMBER > 3. 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. Edwards, DeJuan, , , Type or Print Name of Treasurer Edwards, DeJuan, , , [Electronically Filed] 05 2018 Signature of Treasurer Date 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

F	EC Fo	rm 1 (Revised 02/2009)	Page 2
		COMMITTEE	
	x	Committee:	
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)	
(b) Name	of	This committee is an authorized committee, and is NOT a principal campaign committee. (Comp information below.) Edwards, DeJuan, , ,	lete the candidate
Candi	date		
Candi Party	date Affiliati	ion REP Office Sought: X House Senate President	State OK
(0)	п	This committee supports/appaces only one condidate and is NOT an authorized committee	District
(c) Name	of	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Candi			
Part	y Con	nmittee:	
(d)		· · · ·	Democratic, lepublican, etc.) Party.
Polit	ical A	action Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.	ected 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 separate seg committee. (i.e., nonconnected committee)	regated 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.)	
Joint	Fund	draising Representative:	
(g)		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.	o or more political
(h)		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.	FEC ID number	
	2.	FEC ID number C	
	3.		

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Write or Type Committee Name	
Edwards for OK 2018	
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Repr	resentative, or Leadership PAC Sponsor
NONE	
Mailing Address	
	CTATE ZID CODE
CITY	STATE ZIP CODE
Relationship: Connected Organization Affiliated Committee Joint Fundraising	Representative Leadership PAC Sponsor
 Custodian of Records: Identify by name, address (phone number optional) and positi books and records. 	on of the person in possession of committee
Edwards, DeJuan, , ,	
Full Name PO Box 12164	
Mailing Address	
Oldshams City	OK , ,73157 , ,
Oklahoma City	OK 73157
Title or Position CITY	STATE ZIP CODE
Chair/Treasurer Telephone num	nber 405 - 204 - 2590
3. Treasurer: List the name and address (phone number optional) of the treasurer of the any designated agent (e.g., assistant treasurer).	committee; and the name and address of
Full Name Edwards, DeJuan, , , of Treasurer	
Mailing Address PO Box 12164	
Oklahoma City	OK 73157
CITY	STATE ZIP CODE
Title or Position Chair/Treasurer Telephone num	aber 405 - 204 - 2590

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Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		ZIP CODE
	Telephone number	
-	poxes or maintains funds. Depository, etc.	
-	Depository, etc. BancFirst PO Box 26788	
Name of Bank,	Depository, etc. BancFirst PO Box 26788	
Name of Bank,	Depository, etc. BancFirst PO Box 26788	
Name of Bank,	Depository, etc. BancFirst PO Box 26788	Sip Code
Name of Bank, Mailing Address	Depository, etc. BancFirst PO Box 26788 Oklahoma City OK 73126	
Name of Bank, Mailing Address	Depository, etc. BancFirst PO Box 26788 Oklahoma City OK T3126	
Name of Bank, Mailing Address Name of Bank,	Depository, etc. BancFirst	
Name of Bank, Mailing Address	Depository, etc. BancFirst	
Name of Bank, Mailing Address Name of Bank,	Depository, etc. BancFirst	