Only

PAGE 1 / 4

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 X COMMITTEE (in full) is changed) over the lines. Mullin For America PO Box 3681 ADDRESS (number and street) (Check if address is changed) Muskogee 74402 OK CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS llisker@hdafec.com (Check if address X is changed) Optional Second E-Mail Address tmoose@hdafec.com COMMITTEE'S WEB PAGE ADDRESS (URL) www.mullinforamerica.com (Check if address is changed) DATE 01 2022 C00498345 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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. Lisker, Lisa, , , Type or Print Name of Treasurer Lisker, Lisa,,, [Electronically Filed] 03 2022 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

		- (P. ) - (-2-2-2-2)	5 6
		rm 1 (Revised 02/2009)	Page <b>2</b>
		OMMITTEE • Committee:	
(a)	X	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. (Con information below.)	nplete the candidate
Nam Cano	e of didate	Mullin, Markwayne, , Mr.,	
	didate / Affiliati	on REP Office Sought: House Senate President	State OK District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Namo	e of didate		
Par	ty Con	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected organization is a:
		Corporation Wo 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 scommittee. (i.e., nonconnected committee)	egregated 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.)	
Join	t Fund	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	•
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number C	
	4.		

FFC Form 1 (Deviced	02/2000)	Daga 2
FEC Form 1 (Revised Write or Type Committee Name		Page <b>3</b>
Mullin For Ame		
	Drganization, Affiliated Committee, Joint Fundraising Representative, or	Loadorchin BAC Spancor
-	organization, Anniated Committee, John Fundralsing Representative, or	Leadership PAC Sportson
Mullin Victory Fund		
Mailing Address	228 S. Washington St	
3	Ste. 115	
	Alexandria	22314
	CITY STATE	ZIP CODE
6.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1		_
Relationship: Connected	d Organization Affiliated Committee X Joint Fundraising Representative	Leadership PAC Sponsor
books and records.  Lisker, Lis  Full Name  Mailing Address	a, , , , , , , , , , , , , , , , , , ,	22314
Title or Position	CITY STATE	ZIP CODE
Treasurer	703 Telephone number	549 7705
3. <b>Treasurer:</b> List the name an any designated agent (e.g.,	d address (phone number optional) of the treasurer of the committee; an assistant treasurer).	d the name and address of
Full Name Lisker, Lis	a, , ,	ı
of Treasurer	228 S. Washington St.	
Mailing Address		
	Ste. 115	
		22314
Title or Position Treasurer	CITY STATE 703  Telephone number	ZIP CODE  - 549 - 7705

TEC FOIII I (Revi	sed 02/2009)		Page <b>4</b>
Full Name of			
Designated Agent			
Mailing Address			
Maining Address			
	CITY	STATE	ZIP CODE
Title or Position			
	Telep	phone number	
	y, etc. ar Bank		
	ar Bank		
Firsta	ar Bank 510 North Main St.	OK 7440	4
Firsta	ar Bank	OK 7440	1
Firsta	ar Bank 510 North Main St.	OK 7440 STATE	1 ZIP CODE
Firsta	Sar Bank  510 North Main St.  Muskogee  CITY		
Firsta Mailing Address  Name of Bank, Depositor	ar Bank  510 North Main St.  Muskogee  CITY  y, etc.		
Firsta	ar Bank  510 North Main St.  Muskogee  CITY  y, etc.		
Firsta Mailing Address  Name of Bank, Depositor	ar Bank  510 North Main St.  Muskogee  CITY  y, etc.		
Firsta Mailing Address  Name of Bank, Depositor	ar Bank  510 North Main St.  Muskogee  CITY  y, etc.		
Firsta Mailing Address  Name of Bank, Depositor	ar Bank  510 North Main St.  Muskogee  CITY  y, etc.		ZIP CODE
Firsta Mailing Address  Name of Bank, Depositor	Sar Bank  510 North Main St.  Muskogee  CITY  y, etc.  t  1445 New York Ave., NW	STATE	ZIP CODE