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FEC
FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4MS

Doug Dodd for Congress Committee

ADDRESS (number and street) 1408 South Denver, 3rd Floor

(Check if address is changed)

Tulsa OK 74119

CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

committee@dodd4congress.com
(under construction)

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.dodd4congress.com
(under construction)

2. DATE 06 25 2001

3. FEC IDENTIFICATION NUMBER C 00366575

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 William D. Lohrey, CPA

Signature of Treasurer  Date 06 25 2001

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.

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 Deougl Doud

Candidate Party Affiliation Democrat Office Sought House Senate President State OK District 1st District

- (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

Write or Type Committee Name

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 | W i l l i a m D L o h r e y |

Mailing Address | 1 9 2 4 S o u t h U t i c a |

| S u i t e 9 0 0 |

| T u l s a | O L K | 7 4 1 0 4 |

Title or Position | CITY | STATE | ZIP CODE

Treasurer | Telephone number | 9 1 8 - 7 4 3 - 1 8 9 0 0 |

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 | W i l l i a m D L o h r e y |

Mailing Address | 1 9 2 4 S o u t h U t i c a |

| S u i t e 9 0 0 |

| T u l s a | O L K | 7 4 1 0 4 |

Title or Position | CITY | STATE | ZIP CODE

Treasurer | Telephone number | 9 1 8 - 7 4 3 - 1 8 9 0 0 |

Full Name of Designated Agent

Mailing Address

Title or Position | CITY | STATE | ZIP CODE

Telephone number

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, N.A.

Mailing Address

P.O. Box 21300

Tulsa OK 74192

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲


STATE ▲

ZIP CODE ▲

Federal Election Commission

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FOR INCOMING DOCUMENTS**

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