FEC FORM 1	STATEMENT OF ORGANIZATION	PAGE 1 / 4
1. NAME OF COMMITTEE (in full)	(Check if name Example: If typing, type over the lines.	12FE4M5
Oklahomans for	John W. McKenna 2018	
ADDRESS (number and street)	PO Box 5	
(Check if address is changed)		
	Choctaw	OK 73020
		STATE A ZIP CODE A
COMMITTEE'S E-MAIL ADDI	RESS	
 (Check if address is changed) 	ethics@votejohnmckenna.com	
	Optional Second E-Mail Address	
COMMITTEE'S WEB PAGE A	ADDRESS (URL) Jwww.votejohnmckenna.com	
is changed)		
2. DATE 09	27 / Y Y Y Y 2017	
3. FEC IDENTIFICATION	NUMBER ► C C00656454	
4. IS THIS STATEMENT	× NEW (N) OR AMENDED (A)	
I certify that I have examined	I this Statement and to the best of my knowledge and belief it	is true, correct and complete.
Type or Print Name of Treasu	Irer Senn, Madison, , ,	
Signature of Treasurer	nn, Madison, , , [Electronically Filed]	Date 09 27 / Y Y Y Y 2017
NOTE: Submission of false, err	oneous, or incomplete information may subject the person signing ANY CHANGE IN INFORMATION SHOULD BE REPORTED W	
Office Use Only	For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100	

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TYF	PE OF C	OMMITTEE
Ca	ndidate	Committee:
(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.)
	me of ndidate	McKenna, John, W, ,
	ndidate ty Affiliati	on DEM Office Sought: X House Senate President District OK
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.
	me of ndidate	
Pa	rty Con	nmittee:
(d)		This committee is a(National, State or subordinate) committee of the(Democratic, Republican, etc.) Party.
Po	litical A	ction Committee (PAC):
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected 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 segregated fund or party committee. (i.e., nonconnected committee)
		In addition, this committee is a Lobbyist/Registrant PAC.
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)
Joi	nt Fund	raising Representative:
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political 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 two or more political committees/organizations, none of which is an authorized committee of a federal candidate.
	Com	mittees Participating in Joint Fundraiser
	1.	FEC ID number
	2.	
	3.	
	4.	

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Write or Type Committee Name

Oklahomans for John W. McKenna 2018

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address			
	CITY	STATE	ZIP CODE
Relationship: Conne	ected Organization Affiliated Committee	Joint Fundraising Representa	tive Leadership PAC Sponsor
7. Custodian of Records: books and records.	Identify by name, address (phone number)	optional) and position of the po	erson in possession of committee
Senn, Full Name	Madison, , ,		
Mailing Address	PO Box 5		
	Choctaw	ОК	⁷³⁰²⁰
Title or Position	CITY	STATE	ZIP CODE
Treasurer		Telephone number	105 - 356 - 8683
8. Treasurer: List the name any designated agent (e.	and address (phone number optional) of t g., assistant treasurer).	he treasurer of the committee;	and the name and address of
Full Name Senn.	Madison		

Full Name	Senn, Madis	son, , ,																							
of Treasurer																									
Mailing Address																									
	l																								
		Choctaw													ОК		73	3020							
					CI	TΥ								ST/	ATE				Z	IP (COE	ЭE			
Title or Position Treasurer	1 1 1 1		 <u> </u>		[Ţ	Teleț	ohor	ne r	numl	ber		40	5] – [56		I	86	83	_

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Full Name of Designated	Welch, Cath	۱y, , ,																			_
Agent																					
Mailing Address		2601 NW Expressway																			
		STE 503W																			
		Oklahoma City								Ľ	ЭК 		7	3112	2						
			CITY							ST/	ATE				Z	IP (COE	DE			
Title or Position	ent 					Tele	pho	ne	num	ıber		40	5] – [28	36			26	86	

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.

BancF	irst		<u> </u>
Mailing Address	7701 S Sooner Rd		
	Oklahoma City		3135
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY	STATE	ZIP CODE