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. Tom Guild for Congress PO Box 6621 ADDRESS (number and street) (Check if address is changed) Edmond 73083 OK CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS cwelch@ctpok.net (Check if address is changed) Optional Second E-Mail Address tomguild@sbcglobal.net COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 05 2020 C00741173 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. Guild, Thomas, E,, Guild Type or Print Name of Treasurer Guild, Thomas, E, , Guild [Electronically Filed] 03 2020 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

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		COMMITTEE e Committee:	
(a)	×	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b) Nam	ne of	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.) Guild, Thomas, E, ,	
Can	didate		_
	didate y Affiliatio	Office State)K 5
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Can	e of didate		
Par	ty Con	nmittee: (National, State (Democratic,	
(d)		This committee is a or subordinate) committee of the Republican, etc.) Pa	rty.
Poli	itical A	Action Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is	s a:
		Corporation Corporation w/o Capital Stock Labor Organization	1
		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 pa committee. (i.e., nonconnected committee)	rty
		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	draising 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	nmittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		Ī

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nares	
	n BAC Sponsor
ganization, Anniated Committee, John Fundraising Representative, or Leadersin	p FAC Spoilsoi
	_ -
CITY STATE Z	IP CODE
Organization Affiliated Committee Joint Fundraising Representative Lead	ership PAC Sponsor
fy by name, address (phone number optional) and position of the person in posso	ession of committee
as, E, , Guild	.
PO Box 6621	
Edmond OK 73083	
CITY STATE Z	IP CODE
Telephone number 405 – 92	21 3811
address (phone number optional) of the treasurer of the committee; and the nam sistant treasurer).	e and address of
as, E, , Guild	
as, E, , Guild PO Box 6621	
PO Box 6621 Edmond OK 73083	P CODE
	Affiliated Committee Joint Fundraising Representative Lead by by name, address (phone number optional) and position of the person in posses beas, E, , Guild by Do Box 6621 CITY STATE Z Telephone number optional) of the treasurer of the committee; and the name

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Full Name of Designated	1	
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
safety deposit b	r Depositories: List all banks or other depositories in which the committee deposits funds, lookes or maintains funds. Depository, etc.	
safety deposit b	Depository, etc. Bank of Oklahoma 499 W Sheridan	
safety deposit b Name of Bank,	Depository, etc. Bank of Oklahoma 1499 W Sheridan	
safety deposit b Name of Bank,	Depository, etc. Bank of Oklahoma 499 W Sheridan	
safety deposit b Name of Bank, Mailing Address	Depository, etc. Bank of Oklahoma 499 W Sheridan Oklahoma City OK OK 7310	01
safety deposit b Name of Bank, Mailing Address	Depository, etc. Bank of Oklahoma 499 W Sheridan Oklahoma City OK 7310	01
safety deposit b Name of Bank, Mailing Address	Depository, etc. Bank of Oklahoma 499 W Sheridan Oklahoma City CITY STATE Depository, etc.	01 ZIP CODE
safety deposit b Name of Bank, Mailing Address Name of Bank,	Depository, etc. Bank of Oklahoma 499 W Sheridan Oklahoma City CITY STATE Depository, etc.	01 ZIP CODE
safety deposit b Name of Bank, Mailing Address Name of Bank,	Depository, etc. Bank of Oklahoma 499 W Sheridan Oklahoma City CITY STATE Depository, etc.	01