## STATE OF OKLAHOMA MUNCIPALITY OF Tuisa

|   |                        | IEE STIT   | TEMENT OF O                      | NOAME   |  |  |  |
|---|------------------------|--|----------------------------------|---|--|--|--|
| 1. CANDIDATE INFORM   | MATION                 |  |                                  | AMENDE  | ED:  |  |  |
| Name as it will appear on the ballot (L                           |                        |  | Party Affiliation                |   |  |  |  |
| FRANSEIN, MOTTHE  | JAI                    | nes  |                                  | Non-Partisan  |  |  |  |
| Complete name of Office Sought                                    |                        |  | Special or General Election Date |   |  |  |  |
| Candidate Residence Street Address I                              | . 4                    |  |                                  | 08(2  | 3/22/11/08/22  |  |  |
|   | _                      | Candidate Mailing Address I                          |                                  |   |  |  |  |
| 727 S. LOUISVILLE AVE   |                        |  | 727 S. LOUISVICLE AVE            |   |  |  |  |
| Candidate Residence Street Address 2                              |                        |  | Candidate Mailing Address 2      |   |  |  |  |
| Candidate Residence City, State, Zip Code                         |                        |  |                                  | Candidate Mailing City, State, Zip Code   |  |  |  |
| TULSA, OK 74112   |                        |  | TULSA, O                         | TUSA, OK 74112<br>x) xxx-xxxx ext. xxxxx   Candidate Email Address  |  |  |  |
| Phone Number 1 (xxx) xxx-xxxx ext                                 | t. xxxxx               | Phone Number 2 (x:                                   | xx) xxx-xxxx ext. xxxxx          |   | EIN4 COUNTILE GMAIL-C  |  |  |
| 2. COMMITTEE INFOR  | MATION                 |  |                                  | I KAN   | DE IN TOUNCTE OGNITHE.   |  |  |
| Candidate Committee Name:   |                        |  |                                  |   |  |  |  |
| FRANSEIN FOR  | COUNCIL                | DISTRICT 4   | 2022                             |   |  |  |  |
| Committee Physical Street Address 1                               |                        | Committee Mailing Address 1                          |                                  |   |  |  |  |
| 727 S. Louisville   | BUE                    |  | Committee Melling Address 2      |   |  |  |  |
| Committee Physical Street Address 2                               |                        | Committee Mailing                                    | Committee Mailing Address 2      |   |  |  |  |
| Committee City, State, Zip Code                                   |                        |  | Committee Mailing                | Address City,   | State, Zip Code  |  |  |
| Phone Number I (xxx) xxx-xxxx ext                                 | 2                      | The Note of  |                                  | 10.5  | E -21711   |  |  |
|   | I. XXXXX               | Phone Number 2 (x)                                   | xx) xxx-xxxx ext. xxxxx          |   | e Email Address  |  |  |
| Committee Website Address   |                        | Social Media Accou                                   | nt Address                       | Address Social Media Account Address  |  |  |  |
| FRANSEIN4Cancil.  |                        |  |                                  |   |  |  |  |
| Social Media Account Address                                      | COLL                   | Social Media Accou                                   | nt address                       | Social Media Account Address  |  |  |  |
|   |                        |  |                                  |   |  |  |  |
| 3. COMMITTEE OFFIC  | ERS INFO               | RMATION  |                                  |   |  |  |  |
| Chair's Name (First, Middle, Last)                                |                        | Treasurer's Name (First, Middle, Last)               |                                  | Deputy Treasurer's Name (First, Middle, Last)   |  |  |  |
| MATTHEW FRANSEIN Street Address 1                                 |                        | DORIS FRANSEIN                                       |                                  |   |  |  |  |
|   |                        | Street Address 1                                     |                                  | Street Add  | Street Address I   |  |  |
| 727 S. LOUISVILLE DUE   |                        | 7604 S. TRENTON AVE<br>Street Address 2              |                                  | Commercial Additional Commercial |  |  |  |
| Street Address 2  | treet Address 2 Street |  | reet Address 2                   |   | Street Address 2   |  |  |
| City, State, Zip Code   |                        |  | City, State, Zip Code            |   | City, State, Zip Code  |  |  |
| TULSA, OK 74112   |                        | TULSA OK 74134                                       |                                  |   |  |  |  |
| Phone Number (xxx) xxx-xxxx ext. xxxxx                            |                        | Phone Number (xxx) xxx-xxxx ext. xxxxx  918 810 9244 |                                  | Phone Nur   | Phone Number (xxx) xxx-xxxx ext. xxxxx                             |  |  |
| 918 - 810 - 9344<br>Email Address                                 |                        | Email Address  |                                  | Email Add   | Email Address  |  |  |
| MERANSE INCGMAILICOM  |                        | DERANSEIN & YAHOO. LOM                               |                                  | Eman Address  |  |  |  |
| 4. DEPOSITORY INFOR   |                        | DA KAN SEIN  | e parcos con                     |   |  |  |  |
| Account 1   | Account 2              |  | Account 3                        |   | Account 4  |  |  |
|   |                        |  |                                  |   |  |  |  |
| Street Address 1  | Street Addre           | ss 1   | Street Address 1                 |   | Street Address 1   |  |  |
| Street Address 2  | Street Address 2       |  | Street Address 2                 |   | Street Address 2   |  |  |
|   |                        |  | C. S. T. C. I                    |   | C'. C  |  |  |
| City, State, Zip Code   | City, State, Zip Code  |  | City, State, Zip Code            |   | City, State, Zip Code  |  |  |
| late submitted. I understand the can update the information_above | failure to p           | provide such information by filing an amende         | ation is a violation o           | of the laws of  | lete, true and accurate as of the of Oklahoma. I understand that I |  |  |

Candidate Committee Statement of Organization version 2015.1

## STATE OF OKLAHOMA MUNICIPALITY OF

(Name of Municipality)

Officer's signature v 2021.1

## CANDIDATE COMMITTEE CONTRIBUTIONS AND EXPENDITURES REPORT

| Full Legal                      | Name of Candidate  |                                  | AMENDED:            |  |
|---------------------------------|--|----------------------------------|---------------------|--|
| Full Name                       | e of Committee   |                                  |                     |  |
| Complete                        | Name of Office Sought  | Special or General Election Date |                     |  |
| ype of Report Reporting Period: |  |                                  |                     |  |
|                                 | ACTIVITY This Committee did not be a second district of the second d |                                  |                     |  |
|                                 | <b>DACTIVITY.</b> This Committee did not receive any funds or contributions, i ring this reporting period.   | neur any toans, o                | or expend any runds |  |
|                                 | NAL REPORT. This Committee dissolved in accordance with the Ethics Ru  | iles and has no fu               | nds remaining.      |  |
|                                 | <b>DEBT.</b> This Committee dissolved with outstanding debt which was re   |                                  |                     |  |
|                                 | DEDT. This Committee dissolved with outstanding debt which was to  | REPORTING                        |                     |  |
|                                 | SCHEDULE SUMMARY   | PERIOD<br>TOTAL                  | AGGREGATI<br>TOTAL  |  |
| 1.                              | REPORTING PERIOD BEGINNING BALANCE:  |                                  |                     |  |
| 2.                              | Surplus Funds Transferred from Prior Committee [Schedule B]  |                                  |                     |  |
| 3.                              | Monetary Contributions from Individuals [Schedule A]   |                                  |                     |  |
| 4.                              | Monetary Contributions from PACs [Schedule A]  |                                  |                     |  |
| 5.                              | Monetary Contributions from a Political Party [Schedule A]   |                                  |                     |  |
| 6.                              | All Other Funds [Schedule B]   |                                  |                     |  |
| 7a.                             | Loans [Schedule C]   |                                  |                     |  |
| 7b.                             | Loan Forgiveness [Schedule C] Enter as a negative number and add to Schedule A as a contribution.  |                                  |                     |  |
| 8.                              | TOTAL FUNDS RECEIVED:  |                                  |                     |  |
| 9.                              | In Kind Contributions [Schedule D]   |                                  |                     |  |
| 10.                             | Transfer of Assets from Prior Committee (Schedule B)   |                                  |                     |  |
| 11.                             | TOTAL FUNDS AND IN KIND CONTRIBUTIONS RECEIVED:  |                                  |                     |  |
| 12.                             | Campaign Expenditures Made [Schedule E] Add loan payments to Schedule E  |                                  |                     |  |
| 13.                             | Contributions to Candidate Committees [Schedule E]   |                                  |                     |  |
| 14.                             | Officeholder Expenses [Schedule F]   |                                  |                     |  |
| 15.                             | Surplus Funds [Schedule H or Schedule B for transfers to new committee]  |                                  |                     |  |
| 16.                             | TOTAL FUNDS EXPENDED:  |                                  |                     |  |
| 17.                             | In-Kind Expenditures [Schedule E or H for In-Kind Surplus Funds]   |                                  |                     |  |
| 18.                             | Transfer of Assets to New Committee (Schedule B)   |                                  |                     |  |
| 19.                             | Refunds issued [Calculated in Schedules A and B]   |                                  |                     |  |
| 20.                             | Debt from Prior Committee  |                                  |                     |  |
| 21.                             | REPORTING PERIOD ENDING BALANCE: [Line 1 + Line 8 - Line 16]   |                                  |                     |  |
| By sign                         |  |                                  |                     |  |

Date submitted