NAME: OSEPH MOVINTON

FILING DEADLINE: April 11th by 4:30 p.m.

# Candidates who fail to file their Campaign Reporting Statement by the deadline will be assessed a fine of \$500.

Please see the Osage Nation Election Board Rules and Regulations, Rule Two, Campaign Finance Reporting for requirements.

If you have any questions or need help filling out the Campaign Reporting Statement, please contact the Election Office by emailing electionoffice@osagenation-nsn.gov or calling toll free at (877) 560-5286.

I attest that the attached information is a true and accurate representation of the financial reporting for my campaign.

VCandidate Signature

1- Loi

Date

FOR ELECTION OFFICE USE ONLY

# NAME:

#### **SECTION 1A. CANDIDATE/SELF DONATIONS**

List all donations that the Candidate has contributed to the Candidate's campaign.

DATE	35 0.00
DATE	350.00
TOTAL 1	`

DATE	AMOUNT
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	March on the state (the state of the state of
TOTAL 6	
TOTAL 2	

DATE	AMOUNT
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TOTAL 3	

TOTAL 1	350.00
TOTAL 2	
TOTAL 3	
GRAND TOTAL	350.00

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#### **SECTION 1B. INDIVIDUAL MONETARY DONATIONS**

List all donations that any individual (not business entities) have contributed to the Candidate's campaign.

DATE	FIRST & LAST NAME	EMPLOYER	AMOUNT
4-1	Stanlee Mattingly		100.00
		TOTAL	100.00

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# NAME:

#### **SECTION 1F. TOTAL DONATIONS**

List the totals from each page and add together.

SECTION	AMOUNT
Section 1A. Candidate/Self Donations	350,00
Section 1B. Individual Monetary Donations	100.00
Section 1D. Business Entity Donations	
Section 1E. Anonymous/Unidentifiable Monetary Donations	
TOTAL DONATIONS	450.00

1		
	Section 1C. Individual In Kind Donations	
		1

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#### **SECTION 2. EXPENDITURES**

Including the Filing Fee and other expenses to the Election Office, list all expenditures made for the Candidate's campaign.

DATE	PAID TO	GOOD/SERVICES	AMOUNT
4-10	Plue Sky	Service Change	5,00
		TOTAL	5.00

NAME:

**SECTION 3. SUMMARY FORM** 

REPORTING START DATE  $\frac{3-17.202}{4-11-2022}$ 

SECTION	AMOUNT
Beginning Balance per Bank Documentation	85.00
Total Donations from Section 1F (Do not include Sec. C In Kind.)	450.00
Total Expenditures from Section 2	5.00
Ending Balance per Bank Documentation	00,052

C 1 40 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Section 1C. Individual In Kind Donations	1
Section 16. marriada milita Donations	1
	1

# ATTACH A COPY OF YOUR BANK DOCUMENTATION OR STATEMENT FROM THE REPORTING START DATE TO THE REPORTING END DATE.



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Page: 1 of 3 Account:

PERIODIC STATEMENT Date: Apr 10, 2022

Period: Mar 11, 2022 to Apr 10, 2022

(31 days) Enclosures: 1

JOSEPH A THORNTON

Your Account(s) at a Glance

Deposit Account(s) Regular Checking

Account # CK-

Interest Earned YTD Balance as of 04/10

0.00

530.00

5.00

ACCOUNT #: CK -

1 Service Charge

**Regular Checking** 

Joseph A Thornton

Enclosures: 1

#### **Account Summary**

Beginning Balance	
as of 03/11/22	85.00
Deposits & Other Credits	450.00
Charges & Fees	5.00
Checks & Other Debits	0.00
Average Balance	230.16
Ending Balance	
as of 04/10/22	530.00
Charges And Fees	

#### **Deposits and Withdrawals Transaction Information**

_Date_	Number	Transaction Description	Credit Amount	Debit Amount
04/10		Service Charge		5.00
04/01		Deposit	450.00	

#### **Daily Balance Information**

Date	Balance	Date	Balance	Date	Balance
04/01	535.00	04/10	530.00		







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Page: 2 of 3 Account:

#### **Charges and Fees Related to Overdrafts and Returned Items**

	Total For	This Period	Total Year-to-Date
Total Overdraft Fees:		0.00	0.00
Total Returned Items Fees:		0.00	0.00









Deposit - 101 Transaction Type: Scanitems Item Type: Deposit				
Institution ID: 002995001 Branch Name: 1 - Pawhuska Branch Taller\$, 0125 Employes: 123 - Erin Walker Workstation: PATLR005		DIN: DateTime: Batch ID Transaction#: Sequence#	001010009445 04/01/2022 7	3:12 PM
AUXILIARY	R/T		TC	AMOUNT
TONIE ON T	555555100		101	\$450.00

04/01/2022 Deposit \$450.00

Account:		
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