

STATE OF OKLAHOMA
MUNICIPALITY OF Oklahoma City
(Name of Municipality)

CAMPAIGN COMMITTEE STATEMENT OF ORGANIZATION

1. CANDIDATE INFORMATION

AMENDED: ☐

Name as it will appear on the ballot (Last, First, Middle) Holt, David Fuller		Party Affiliation Non-Partisan
Complete name of Office Sought Office of the Mayor		Special or General Election Date February 10, 2026
Candidate Residence Street Address 1 3408 Hickory Stick Road	Candidate Mailing Address 1 3408 Hickory Stick Road	
Candidate Residence Street Address 2	Candidate Mailing Address 2	
Candidate Residence City, State, Zip Code Oklahoma City, OK 73120	Candidate Mailing City, State, Zip Code Oklahoma City, OK 73120	
Phone Number 1 (xxx) xxx-xxxx ext. xxxxx 405-306-2485	Phone Number 2 (xxx) xxx-xxxx ext. xxxxx	Candidate Email Address info@holtformayor.com

2. COMMITTEE INFORMATION

Candidate Committee Name: Holt for OKC 2026		
Committee Physical Street Address 1 3408 Hickory Stick Road	Committee Mailing Address 1 P.O. Box 18366	
Committee Physical Street Address 2	Committee Mailing Address 2	
Committee City, State, Zip Code Oklahoma City, OK 73120	Committee Mailing Address City, State, Zip Code Oklahoma City, OK 73154	
Phone Number 1 (xxx) xxx-xxxx ext. xxxxx 405-306-2485	Phone Number 2 (xxx) xxx-xxxx ext. xxxxx	Committee Email Address info@holtformayor.com
Committee Website Address holtformayor.com	Social Media Account Address	Social Media Account Address
Social Media Account Address	Social Media Account address	Social Media Account Address

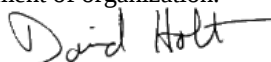
3. COMMITTEE OFFICERS INFORMATION

Chair's Name (First, Middle, Last) David Fuller Holt	Treasurer's Name (First, Middle, Last) Carly Ann Farris	Deputy Treasurer's Name (First, Middle, Last)
Street Address 1 3408 Hickory Stick Road	Street Address 1 3060 Brush Creek Road	Street Address 1
Street Address 2	Street Address 2	Street Address 2
City, State, Zip Code Oklahoma City, OK 73120	City, State, Zip Code Oklahoma City, OK 73120	City, State, Zip Code
Phone Number (xxx) xxx-xxxx ext. xxxxx 405-850-4181	Phone Number (xxx) xxx-xxxx ext. xxxxx 405-306-2485	Phone Number (xxx) xxx-xxxx ext. xxxxx
Email Address info@holtformayor.com	Email Address carly@jamesmartincompany.com	Email Address

4. DEPOSITORY INFORMATION

Account 1	Account 2	Account 3	Account 4
BancFirst			
Street Address 1 11001 N. May Avenue	Street Address 1	Street Address 1	Street Address 1
Street Address 2	Street Address 2	Street Address 2	Street Address 2
City, State, Zip Code Oklahoma City, OK 73120	City, State, Zip Code	City, State, Zip Code	City, State, Zip Code

I, the candidate identified on this form, acknowledge that the information submitted is complete, true and accurate as of the date submitted. I understand the failure to provide such information is a violation of the laws of Oklahoma. I understand that I can update the information above at any time by filing an amended statement of organization.



Signature

10/1/2025

Date

For Municipal use only.

Number assigned: _____