

Statement of Committee Organization

1.	Statement Information	
	Type: ☐ New ☐ Amended (if amending, enter MEC ID C201	429 & section changed 5
2.	Committee Information	& section changed
	Name of Committee	
	Committee Mailing Address, City, State, & Zip	Telephone Number
	Official Committee Email Address	County Clerk, Board of Election Commissioners, or Federal PAC/Out of State Committee
	Committee Type: ☐ Campaign ☐ Candidate ☐ Continuing (PA	AC) 🗆 Debt Service 🗀 Exploratory 🗔 Political Party
3.	Treasurer/Deputy Treasurer Information	
	Treasurer's Name (First & Last)	Treasurer's Email Address (optional)
	Treasurer's Mailing Address, City, State, & Zip	Treasurer's Home Telephone Number Treasurer's Work Telephone Number
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	Deputy Treasurer's Name (if one appointed)	Deputy Treasurer's Email Address (optional)
	Deputy Treasurer's Mailing Address, City, State, & Zip	Dep. Treasurer's Home Telephone Number Dep. Treasurer's Work Telephone Number
4.	Additional Committee Information	
	Additional Committee Officer's Name & Title (if any)	Additional Committee Officer's Mailing Address, City, State, & Zip
		The state of the s
	Connected Organization's Name (if any)	Connected Organization's Mailing Address, City, State, & Zip
_	CANDIDATES: Do you have more than one candidate committee?	☐ Yes (refer to instructions on back) ☐ No
5.	Official Bank Account Information (required by all committees)	
		ACCOUNT NUMBER
6.	Candidate Supported or Opposed (candidate committees must i	
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	Name & Mailing Address, Gty/State & Zip of Candidates O 1	Telephone Number (Candidate Committees Only)
	Election Date Office Sought & Political Subdivision	Political Party Support or Oppose
7.	Ballot Measure Supported or Opposed (campaign committees m	ust complete this section)
	Name of Ballot Measure	Election Date & Political Subdivision Support or Oppose
8.	Signature(s) Check certification(s) & sign (required by all comm	litteës)
	Affirm and attest under penalty of perjury that information and	d facts in this report are complete, true, and accurate.
	further acknowledge that I am aware that any false statement or d	leclaration made herein is punishable under Ch. 575 RSMo.
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	Committee Treasurer	Candidate (Candidate Committees Only)