



Missouri Ethics Commission (MEC)
PO Box 1370, Jefferson City MO 65102, (800) 392-8660, www.mec.mo.gov

Office **DEC 15 2020**

Statement of Committee Organization

1. Statement Information

Date: 12/04/2020

Type: ☐ New ☒ Amended (if amending, enter MEC ID C190905 & section changed 3,6)

2. Committee Information

Friends for Ed Lewis

Name of Committee

Po Box 53, Moberly, MO 65270

Committee Mailing Address, City, State, & Zip

(660) 676.3598

Telephone Number

Official Committee Email Address

Will Ellis, Randolph County Clerk

County Clerk, Board of Election Commissioners, or Federal PAC/Out of State Committee

Committee Type: ☐ Campaign ☒ Candidate ☐ Continuing (PAC) ☐ Debt Service ☐ Exploratory ☐ Political Party

3. Treasurer/Deputy Treasurer Information

Sherry Russell

Treasurer's Name (First & Last)

1019 County Road 1635, Cairo, MO 65239

Treasurer's Mailing Address, City, State, & Zip

Treasurer's Email Address (optional)

(660) 651.0037

Treasurer's Home Telephone Number

(660) 295.4213

Treasurer's Work Telephone Number

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

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)

6. Candidate Supported or Opposed (candidate committees must include self, if candidate)

Ed Lewis 322 Epperson St. Moberly, MO 65270

Name & Mailing Address, City, State & Zip of Candidate

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Telephone Number (Candidate Committees Only)

10/2/2022

State Representative District 6

Republican

Election Date

Office Sought & Political Subdivision

Political Party

Support or Oppose

8/2/2022

7. Ballot Measure Supported or Opposed (campaign committees must complete this section)

Name of Ballot Measure

Election Date & Political Subdivision

Support or Oppose

8. Signature(s) Check certification(s) & sign (required by all committees)

☒ I affirm and attest under penalty of perjury that information and facts in this report are complete, true, and accurate. I further acknowledge that I am aware that any false statement or declaration made herein is punishable under Ch. 575 RSMo.

Sherry Russell

Edwin T. Lewis