

## Missouri Ethics Commission (MEC) PO Box 1370, Jefferson City MO 65102, Fax: 573-526-4506, helpdesk@mec.mo.gov

## FEB 12 e8 2022

HAND DELIVERED

## **Statement of Committee Organization**

1.	Statement Information			
	Date: $2/27/2022$ Type: $\square$ New $\square$ Amended (if amending, enter MECID $CROORO$ & section changed $\square$			
2.	Committee Information	TOOR O a section the	anged	
	COMMITTEE TO ELECT JOHN	RIACK		
	Name of Committee	65706		
	PO BOX 244, 1420 BRINR WOOD	MARSHFIRM, NO	(417) 343 <b>7</b> 29/	
	Committee Mailing Address ( the State & 70)		relephone number	
	Official Committee Cital Address	County Clerk, Board of Flection Commissione	rs, or Federal PAC/Out of State Committee	
	Committee Type: 🛘 Campaign 🖫 Candidate 🗋 Continuing (PAC) 🗖 Debt Service 🗖 Exploratory 🗖 Political Party			
3.	Treasurer/Deputy Treasurer Information			
	Treasurer's Name (First & Last)	Treasurer's Email Address (optional)	<del></del>	
		()	()	
	Treasurer's Mailing Address, City. State, & Zip	Treasurer's Home Telephone Number	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	
7	Additional Committee Information	高級人 化二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十		
	Additional Committee Officer's Name & Title (if any)	Additional Committee Officer's Malling Address, City. State, & Zip		
	Connected Organization's Nume (if any)	Connected Organization's Mailing Address, City, State, & Zip		
	ANDIDATES: Do you have more than one candidate committee? 🔲 Yes (refer to instructions on back) 🔲 No			
5.	Official Bank Account Information (required by all committees)		\$	
	Name & Mailing Address, City, State, & Zip of Financial Institution	Account Name	Account Number	
5.	Candidate Supported or Opposed (candidate committees must	include self, if candidate)		
	To it at BLACK, P. Bux 244, mutra/ti-1221/100 Name & Mailing Address, City, State & Zip of Candidate	(4(7) 343 7291 Telephone Number (Candidate Committees	()	
	AUGUST 2 2022 REPESCRIPTIVE, DIST. 129	REPUBLICAN	Suffuri	
	Election Date Office Sought & Political Subdivision	Political Party	Support or Oppose	
7.	allot Measure Supported or Opposed (campaign committees must complete this section)			
	Name of Ballot Measure	Election Date & Political Subdivision	Support or Oppose	
В.	Signature(s) - Check certification(s) & sign (required by all comm	gnature(s) – Check certification(s) & sign (required by all committees)		
	affirm and attest under penalty of perjury that information and facts in this report are complete, true, and accurate. I			
	urther acknowledge that I am aware that any false statement or declaration made herein is punishable under Ch. 575 RSMo.			
	(A) 6 bener	J- I Win		
	Committee Treasurer	Candidate (Candidate Committees Only)	<del></del>	

MO 300-1308 Packet (Rev. 1/2021)