

C191031



Missouri Ethics Commission (MEC)

PO Box 1370, Jefferson City MO 65102, Fax: 573-526-4506, helpdesk@mec.mo.gov

Statement of Committee Organization

MISSOURI ETHICS COMMISSION

Office Use:

JAN 06 2023

HAND DELIVERED

1. Statement Information

Date: 12/12/2022

Type: ☐ New ☒ Amended (if amending, enter MEC ID C191031 & section changed 2, 3, 6)

2. Committee Information

Friends of Michael Davis

Name of Committee

PO Box 1422 Belton, MO 64012

Committee Mailing Address, City, State, & Zip

() Telephone Number

Cass County Clerk

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

Official Committee Email Address

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

3. Treasurer/Deputy Treasurer Information

Skyler Kee

Treasurer's Name (First & Last)

PO Box 1422 Belton, MO 64012

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

Treasurer's Email Address (optional)

() N/A

Treasurer's Home Telephone Number

(913) 850-4621

Treasurer's Work Telephone Number

Deputy Treasurer's Name (if one appointed)

Deputy Treasurer's Email Address (optional)

()

Dep. Treasurer's Home Telephone Number

()

Dep. Treasurer's Work Telephone Number

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

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)

Name & Mailing Address, City, State, & Zip of Financial Institution

Account Name

Account Number

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

Michael Davis PO Box 1422 Belton, MO 64012

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

()

Telephone Number (Candidate Committees Only)

08/06/2024

Election Date

State Representative #56

Office Sought & Political Subdivision

Political Party

Support or Oppose

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.

Committee Treasurer

Candidate (Candidate Committees Only)