

C201526



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

MO Ethics Commission

Office App: 20 2023

Rec'd by email

Statement of Committee Organization

1. Statement Information

Date: 1/23/2023

Type: [] New [x] Amended (if amending, enter MEC ID C201526 & section changed)

2. Committee Information

JASON WITHINGTON A BETTER CLAY COUNTY

Name of Committee

5413 NE 56TH PLACE, KCMO 64119

(816) 352-1455

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: [x] Campaign [] Candidate [] Continuing (PAC) [] Debt Service [] Exploratory [] Political Party

3. Treasurer/Deputy Treasurer Information

RANDY POGUE

Treasurer's Name (First & Last)

722 SOUTHBROOK PKWY, KEARNEY, MO 64060

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

Treasurer's Email Address (optional)

(816) 804-5453

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

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) [x] No

5. Official Bank Account Information (required by all committees)

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

JASON WITHINGTON, 5413 NE 56TH PLACE, KCMO 64119

(816) 352-1455

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

Telephone Number (Candidate Committees Only)

AUG 6, 2024

CLAY COUNTY WESTERN COMMISSIONER AT-LARGE

NON-PARTISAN

SUPPORT

Election Date

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

Signature (Candidate Committees Only)