



JUN 08 2023

Statement of Committee Organization

1. Statement Information

Date: June 1, 2023
 Type: New Amended (if amending, enter MEC ID C141292 & section changed 2, 3, 5, 6)

2. Committee Information

Fowler for Kansas City
 Name of Committee
5312 NW 85th Steet, Kansas City, MO 64154 (816) 813-0543
 Committee Mailing Address, City, State, & Zip Telephone Number
Platte County Board of Elections
 Official Committee Email Address 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

Robin Lamb
 Treasurer's Name (First & Last)
7815 NW 76th Place, Kansas City, MO 64152
 Treasurer's Mailing Address, City, State, & Zip
(816) 590-1151 ()
 Treasurer's Home Telephone Number Treasurer's Work Telephone Number
 Deputy Treasurer's Name (if one appointed)
 Deputy Treasurer's Mailing Address, City, State, & Zip
 Deputy Treasurer's Email Address (optional)
() ()
 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)

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)

Daniel Fowler, 5312 NW 85th Street, Kansas City, MO 64154 (816) 813-0543 (816) 880-0811
 Name & Mailing Address, City, State & Zip of Candidate Telephone Number (Candidate Committees Only)
June 18, 2019 Kansas City Missouri City Council, Second District-District 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.

Robin Lamb
 Committee Treasurer

Daniel L. Fowler
 Candidate (Candidate Committees Only)