

C190934



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

Office Use: Missouri Ethics Commission
JAN 19 2024

Rec'd by email

1. Statement Information

Date: 1/18/2024

Type: [ ] New [X] Amended (if amending, enter MEC ID C190934 & section changed 3, 5, 6)

2. Committee Information

Name of Committee

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

3. Treasurer/Deputy Treasurer Information

Eric Franklin

Treasurer's Name (First & Last)

2315 E Moonlight St., Republic, Mo

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

65738

Treasurer's Email Address (optional)

(417) 353-1606

Treasurer's Home Telephone Number

Treasurer's Work Telephone Number

Teresa Davidson

Deputy Treasurer's Name (if one appointed)

1983 S Farm Rd 69, Republic, Mo 65738

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

Deputy Treasurer's Email Address (optional)

(417) 619-1424

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

Amendment

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)

Bishop Davidson PO Box 803 Republic, Mo 65738

(417) 647-1383

Telephone Number (Candidate Committees Only)

8/6/2024

Election Date

State Rep-130

Office Sought & Political Subdivision

Republican

Political Party

Support

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)

[X] 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.

Eric Franklin

Committee Treasurer

[Signature]

Candidate (Candidate Committees Only)

X