



C222141

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

MO Ethics Commission
Office Use:
JUL 22 2024
Rec'd by email

1. Statement Information

Date: 07/12/2024
Type: [ ] New [x] Amended (if amending, enter MEC ID C222141 & section changed 3)

2. Committee Information

Freedom Principle MO Missouri First PAC
Name of Committee
PO Box 15095/St. Louis, MO 63110 (314) 402-0655
Committee Mailing Address, City, State, & Zip Telephone Number
St. Louis County Board 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

Shad McGuire
Treasurer's Name (First & Last)
1015 State Highway MM
Treasurer's Mailing Address, City, State, & Zip
Springfield, MO 65802
Treasurer's Email Address (optional)
(417) 350-6148
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

Byron Keelin (President)
Additional Committee Officer's Name & Title (if any)
Freedom Principle MO
Connected Organization's Name (if any)
PO Box 15095/St. Louis, MO 63110
Additional Committee Officer's Mailing Address, City, State, & Zip
PO Box 15095/St. Louis, MO 63110
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)

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

Name & Mailing Address, City, State & Zip of Candidate
Telephone Number (Candidate Committees Only)
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)

[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.
Committee Treasurer
Candidate (Candidate Committees Only)