

C232611



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:

OC 18 2024

Received by Email

1. Statement Information

Date: 10/17/2024

Type: ☐ New ☒ Amended (if amending, enter MEC ID C232611 & section changed Committee Address)

2. Committee Information

Citizens for Jeremy Dean

Name of Committee

PO Box 6321 Springfield MO 65801

(417) 350-7644

Telephone Number

Greene

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

Kyler Sherman-Wilkins

Treasurer's Name (First & Last)

1321 Sieger Springfield MO, 65804

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

Treasurer's Email Address (optional)

(708) 308-3239

Treasurer's Home Telephone Number

() 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)

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

Jeremy Dean, PO Box 6321 Springfield Mo 65801

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

11/05/2024

Election Date

Missouri House of Representatives District 132

Office Sought & Political Subdivision

(417) 350-7644

Telephone Number (Candidate Committees Only)

Democrat

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)

☒ 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)