

C243093



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

Missouri Ethics Commission

Office Use:
OCT 21 2024
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Statement of Committee Organization

1. Statement Information

Date: 10/18/2024
Type: [] New [x] Amended (if amending, enter MEC ID C243093 & section changed Section 2)

2. Committee Information

Vote No on 3
Name of Committee: 7509 NW Tiffany Springs Pkwy., Ste. 300, Kansas City, MO 64153
Telephone Number: (816) 584-9393
Official Committee Email Address:
Committee Type: [] Campaign [] Candidate [x] Continuing (PAC) [] Debt Service [] Exploratory [] Political Party

Platte County Board of Election Commissioners
County Clerk, Board of Election Commissioners, or Federal PAC/Out of State Committee

3. Treasurer/Deputy Treasurer Information

Jim Cole
Treasurer's Name (First & Last)
9924 Vasel Drive, St. Louis, MO 63123
Treasurer's Mailing Address, City, State, & Zip
James C. Thomas III
Deputy Treasurer's Name (if one appointed)
7509 NW Tiffany Springs Pkwy., Ste 300, Kansas City, MO 64153
Deputy Treasurer's Mailing Address, City, State, & Zip
Treasurer's Email Address (optional)
Treasurer's Home Telephone Number
Treasurer's Work Telephone Number: (314) 737-8579
Deputy Treasurer's Email Address (optional)
Dep. Treasurer's Home Telephone Number
Dep. Treasurer's Work Telephone Number: (816) 584-9393

4. Additional Committee Information

Amendment

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)

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: Jim Cole
Candidate (Candidate Committees Only)