



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:

MAR 13 2025

Received by Email

1. Statement Information

Date: 3/12/2025

Type: ☐ New ☒ Amended (If amending, enter MEC ID C253340 & section changed 2)

2. Committee Information

Committee to elect Walter Hayes

Name of Committee

PO Box 37, Carl Junction, MO 64834

Committee Mailing Address, City, State, & Zip

(657) 330-9378

Telephone Number

Official Committee Email Address

Charlie Davis, Jasper County Clerk

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

Regina Hayes

Treasurer's Name (First & Last)

610 Hayes Ave. Carl Junction, MO 64834

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

N/A

Deputy Treasurer's Name (If one appointed)

Treasurer's Email Address (optional)

(417) 825-7311

Treasurer's Home Telephone Number

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Treasurer's Work Telephone Number

Deputy Treasurer's Email Address (optional)

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Dep. Treasurer's Home Telephone Number

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Dep. Treasurer's Work Telephone Number

4. Additional Committee Information

N/A

Additional Committee Officer's Name & Title (If any)

AMENDMENT

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)

Walter Hayes, 610 Hayes Ave. Carl Junction, MO 64834

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

8/2026

Election Date

State Representative Dist 162

Office Sought & Political Subdivision

(417) 649-6776

Telephone Number (Candidate Committees Only)

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)

☒ 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)