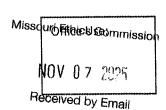


Rev. 08/2025

Page 1 of 2

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

## **Statement of Committee Organization**



CONTINUED ON PAGE 2 ->

		PARTY TO A STREET MAN		
1. STATEMENT INFORMATION			<u> </u>	
Date: 11 / 23	***************************************	. 1	2	
Type: New Amended (if amending, enter N	C201534	& section(s) changed	)	
2. COMMITTEE INFORMATION				
Leadership Counts	<u> </u>			
Name of committee				
Committee mailing address, city, state, & ZIP code	Amendn	nent Telephone nu	umber	
Official committee email address			nmissioners, or Federal PAC/Out-of-state	
Committee Type: Campaign Candidate		mittee : Service Exploratory	Political Party	
3. TREASURER/DEPUTY TREASURER INFORMATION				
Patrick McCarmy				
Treasurer's name (first & last)	Treasurer's mailing address, city, s	state, & ZIP code		
Treasurer's email address (optional)	Treasurer's home telephone number  Treasurer's work telephone number  Treasurer's work telephone number			
Deputy treasurer's name (if one is appointed)	Deputy treasurer's mailing address, city, state, & ZIP code  3 14 767 - 7324  3 14 767 - 7324			
Deputy treasurer's email address (optional)	Dep. treasurer's home telephone	number Dep. ti	reasurer's work telephone number	
4. ADDITIONAL COMMITTEE INFORMATION			2.111金。2.111年至16日基礎學	
Additional committee officer's name & title (if any)	Additional committ	Additional committee officer's mailing address, city, state, & ZIP code		
Connected organization's name (if any)	Connected organiza	ation's mailing address, city, sta	ate, & ZIP code	
CANDIDATES: If the candidate for which this committee is formed				
name & address along with the name, address, & phone number		regating committee on an attac	ched sheet.	
5. OFFICIAL BANK ACCOUNT INFORMATION (requir	a for all committees)		entral frame frame facilities in productive section of the section	
Name & mailing address, city, state, and & ZIP code of financial in	stitution Account nar	ne	Account number	
6. COMMITTEE CREDIT CARD(s)				
Account number of committee credit card (if any)	Issuer of	committee credit card (if any)		
7. CANDIDATE SUPPORTED OR OPPOSED (candidate	committee must include se	lf, if candidate)		
Name & mailing address, city, state, & ZIP code of candidate	Telephone numbe	r (candidate committees only)		
Election date Office sought & political subdivisio	Political party		Support or oppose	



### Missouri Ethics Commission (MEC)

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## Statement of Committee Organization, cont.

Office Use:	

S. BALLOT MEASURE SUPPORTED OR OPPOSED (C	ampaign committees must complete this section)	
lame of ballot measure	Election date & political subdivision	Support or oppose
Ballot measure summary		
). SIGNATURE(S) AND CERTIFICATION(S) (require	d for all committees)	
ALL COMMITTEES: I affirm and attest under penalty of pe aware that any false statement or declaration made here	erjury that information and facts in this report are complete, true, a sin is punishable under Chapter 575, RSMo	and accurate. I further acknowledge that I am
CONTINUING (PACS), CAMPAIGN, & POLITICAL PARTY C Indirectly (see § 130.170, RSMo, for complete definitions	OMMITTEES ONLY: I certify that no preliminary activity was funder of "preliminary activity," "prohibited sources," & "directly or indir	d by prohibited sources, whether directly or ectly." )
Committee treasurer (regulred for all committees)	Candidate (required for candidate con	nmittees only)
Missouri Ethics Co	ommission (MEC) 10 65102, Fax: 573-526-4506, helpdesk@mec.mo.gov	Office Use:
Electronic Filing	Agreement	
This agreement is to be completed	d by local campaign committees to support or oppose	local ballot measures.
1. AGREEMENT INFORMATION		
Date: MECID (if known):	<u>C201534</u>	Accession to the control of the cont
Type: New Amended		
2. COMMITTEE INFORMATION		
Name of committee		
Official committee email address (this address is used for con	nmunication from MEC and is part of your login to the campaign fir	nance electronic filing system)
3. ELECTRONIC FILING AGREEMENT		
This committee agrees to file all future campaign finance rep	orts using the Missouri Ethics Commission's (MEC) electronic filing required to file a perp format copy of its campaign finance reports	
Name of local election authority (county clerk or board of ele	ection commissioners) - The MEC will give notice of this agreement	to this entity.
	Signature & title (treasurer or deputy treasurer)	

#### **VETERANS INFORMATION**

If you are a Veteran in the state of Missouri and are interested in learning more about benefits and resources available to you and your dependents, visit https://mvc.dps.mo.gov/MoVeteransinformation/Survey/MEC