



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:

JAN 13 2026

Received by Email

### 1. STATEMENT INFORMATION

Date: 01/11/2026

Type:  New  Amended (If amending, enter MEID

C190995

& section(s) changed

Sec. 7 / Election Date )

### 2. COMMITTEE INFORMATION

Name of committee

Committee mailing address

Telephone number

Committee city, state, & ZIP code

## Amendment

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

Treasurer's name (first & last)

Treasurer's email address (optional)

Treasurer's telephone number

Treasurer's mailing address, city, state, ZIP code

Treasurer's work telephone number

Deputy Treasurer's name (first & last) - (If one is appointed)

Deputy Treasurer's email address (optional)

Deputy Treasurer's telephone number

Deputy Treasurer's mailing address, city, state, ZIP code

Dep. Treasurer's work telephone number

### 4. ADDITIONAL COMMITTEE INFORMATION

Additional committee officer's name & title (if any)

Additional committee officer's mailing address, city, state, & ZIP code

Connected organization's name (if any)

Connected organization's mailing address, city, state, & ZIP code

CANDIDATES: If the candidate for which this committee is formed has more than one candidate committee (may only have one per office sought) disclose on the committee name & address along with the name, address, & phone number of the treasurer & designate the aggregating committee on an attached sheet.

### 5. OFFICIAL BANK ACCOUNT INFORMATION (required for all committees)

Name of Bank or Financial Institution

Mailing address of Bank or Financial Institution

City, State, ZIP code

Account name

Account number

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## Statement of Committee Organization, cont.

Office Use:

### 5. SAVINGS OR OTHER BANK ACCOUNT INFORMATION

Name of Bank or Financial Institution

Mailing address of Bank or Financial Institution

City, State, ZIP code

Account name

Account number

### 6. COMMITTEE CREDIT CARD(S)

Issuer of committee credit card (Name of bank/Institution that issued card or Amex, Discover/ Etc.)

Account number of committee credit card

Issuer of committee credit card (Name of bank/Institution that issued card or Amex, Discover/ Etc.)

Account number of committee credit card

### 7. CANDIDATE SUPPORTED OR OPPOSED (candidate committee must include self, if candidate)

Name of Candidate

Mailing address of Candidate

City, state, & ZIP code of Candidate

Telephone number (candidate committees only)

Office running for

02/03/2026

Election date

Political Party

Subdivision (e.g. County, City or District where the office is located)

Support or oppose

### 8. BALLOT MEASURE SUPPORTED OR OPPOSED (campaign committees must complete this section)

Name of ballot measure

Election Date

Subdivision (e.g. Statewide, County, City or District)

Support or Oppose

Ballot measure summary

### 9. SIGNATURE(S) AND CERTIFICATION(S) (required for all committees)

**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 Chapter 575, RSMO

**CONTINUING (PACS), CAMPAIGN, & POLITICAL PARTY COMMITTEES ONLY:** I certify that no preliminary activity was funded by prohibited sources, whether directly or indirectly (see § 130.170, RSMO, for complete definitions of "preliminary activity," "prohibited sources," & "directly or indirectly.")

*Ben & Sean*

Committee treasurer (required for all committees)

*Ben & Sean*

Candidate (required for candidate committees only)

### 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>

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