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

Aug 27 2026
Received by Email

1. STATEMENT INFORMATION

Date: 2/27/2026

Type: New Amended (If amending, enter MEID _____) & section(s) changed _____

2. COMMITTEE INFORMATION

Name of committee: Citizens for John Grady Telephone number: 3144406290

Committee mailing address: 210 US 50

Committee city, state, & ZIP code: Rosebud MO 63091

Official committee email address: LESA LIETZOW
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): Kara Grady Treasurer's telephone number: 228-313-5615

Treasurer's mailing address, city, state, ZIP code: 2405 Hwy K Hermann MO 65041

Treasurer's email address (optional): _____ 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): N/A 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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Office Use

Statement of Committee Organization, cont.

5. SAVINGS OR OTHER BANK ACCOUNT INFORMATION

None

Name of Bank or Financial Institution

Mailing address of Bank or Financial Institution

City, State, ZIP code

Account name

Account number

6. COMMITTEE CREDIT CARDS

None

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)

John Grady

210 US 50

Name of Candidate

Mailing address of Candidate

Rosebud MO 63091

3144406290

State Representative

City, state, & ZIP code of Candidate

Telephone number (candidate committees only)

Office running for

August 4, 2026

Republican

Gasconade District 61

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.")

Kara Gray
 Committee treasurer (required for all committees)

[Signature]
 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://mnc.dps.mo.gov/MoVeteransInformationSurvey/MEC>

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