Missouri Ethics Commission

Missouri Ethics Commission (MEC) C222240

PO Box 1370, Jefferson City MO 65102, Fax: 573-526-4506, helpdesk@mec.mo.gov

Statement of Committee Organization

Office Use:

Received by Email

1. STATEMENT INFORMATION

Date: 10/23/2026

Type: [ ] New [X] Amended (If amending, enter MEID C222240 & section(s) changed 2 & 5)

2. COMMITTEE INFORMATION

Forward PAC

Name of committee

P.O. Box 10183

Committee mailing address

417-844-5539

Telephone number

Springfield, MO 65808

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 [X] 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.

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

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)

[X] **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

[X] **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.")

Committee treasurer (required for all committees) | 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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