



Missouri Ethics Commission (MEC)
PO Box 1370, Jefferson City MO 65102, (800) 392-8660, www.mec.mo.gov

Office Use: *SB DL*

Statement of Committee Organization

1. Statement Information

Date: 12/11/2012

Type: ☐ New ☒ Amended (if amending, enter MEC ID C091080 & section changed 6 only)

2. Committee Information

Missourians for Mike Cierpiot

Name of Committee

Committee Mailing Address, City, State, & Zip

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Telephone Number

Official Committee Email Address

County Clerk or Board of Election Commissioners

Committee Type: ☐ Campaign ☒ Candidate ☐ Debt Service ☐ Exploratory ☐ Political Action (PAC) ☐ Political Party

3. Treasurer/Deputy Treasurer Information

Treasurer's Name (First & Last)

Treasurer's Email Address (optional)

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

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Treasurer's Home Telephone Number Treasurer's Work Telephone Number

Deputy Treasurer's Name (if one appointed)

Deputy Treasurer's Email Address (optional)

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

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Dep. Treasurer's Home Telephone Number Dep. Treasurer's Work Telephone Number

4. Additional Committee Information

Additional Committee Officer's Name (if any)

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)

Name & Mailing Address, City, State, & Zip of Financial Institution

Account Name

Account Number

6. Candidate Supported or Opposed (candidate committees must include self, if candidate)

Self

(816) 289-5117 ()
Telephone Number (Candidate Committees Only)

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

Aug. 5, 2014 House Dist 30

Republican Strongly support

Election Date

Office Sought & Political Subdivision

Political Party

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/We certify that this statement is complete, true and accurate.

☐ e-File: This committee is required by law to file with the MEC and will file all future campaign finance reports using the MEC's electronic filing system.

Committee Treasurer

Candidate (Candidate Committees Only)