



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

Office: APR 05 2018
 [Signature]

Statement of Committee Organization

1. Statement Information

Date: 3-28-18
 Type: New Amended (if amending, enter MEC ID C180227 & section changed _____)

2. Committee Information

Name of Committee: Pollitt for House of Representatives
 Committee Mailing Address, City, State, & Zip: 2900 Katy Trail Ave Sedalia MO 65301 Telephone Number: (660) 221-7633
 Official Committee Email Address: _____
 County Clerk or Board of Election Commissioners: Pettis
 Committee Type: Campaign Candidate Continuing (PAC) Debt Service Exploratory Political Party

3. Treasurer/Deputy Treasurer Information

Treasurer's Name (First & Last): Nathan Beard Treasurer's Email Address (optional): _____
 Treasurer's Mailing Address, City, State, & Zip: 26279 Prairie Rd Sedalia MO 65301 Telephone Number: (660) 221-9578
 Deputy Treasurer's Name (if one appointed): Pamela Moon Deputy Treasurer's Email Address (optional): _____
 Deputy Treasurer's Mailing Address, City, State, & Zip: P.O. Box 1824 Sedalia MO 65302 Dep. Treasurer's Home Telephone Number: (660) 221-3708 Dep. Treasurer's Work Telephone Number: (660) 829-6450

4. Additional Committee Information

Additional Committee Officer's Name & Title (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)

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

Name & Mailing Address, City, State & Zip of Candidate: <u>Bradley Pollitt # 2900 Katy Trail Ave Sedalia MO 65301</u>	Telephone Number (Candidate Committees Only): <u>(660) 221-7633</u>	Telephone Number (Candidate Committees Only): <u>(660) 221-3708</u>
Election Date: <u>Aug. 7, 2018</u>	Office Sought & Political Subdivision: <u>State Representative Republican</u>	Support or Oppose: <u>Support</u>

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 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 Ch. 575 RSMo.

Committee Treasurer: Pamela S. Moon Candidate (Candidate Committees Only): Bradley Pollitt