



Missouri Ethics Commission (MEC)

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

Statement of Committee Organization

Missouri Ethics Commission

Office Use APR 13 2018

Received by Fax

1. Statement Information

Date: 07/10/2014

Type: ☒ New ☐ Amended (if amending, enter MEC ID A180336 & section changed _____)

2. Committee Information

Committee to Elect Camille Johnston, Amy Mathis, Treasurer

Name of Committee

47266 East Highway DD, Hardin, Missouri 64035

Committee Mailing Address, City, State, & Zip

(660) 909-9970

Telephone Number

Committee Email Address

County Clerk or Board of Election Commissioners

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

3. Treasurer/Deputy Treasurer Information

Amy Mathis

Treasurer's Name (First & Last)

36497 W 140th Rayville, MO

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

Treasurer's Email Address (optional)

(816) 510-4963

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

Dep. Treasurer's Home Telephone Number

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

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)

Camille Johnston, 47266 East Hwy DD, Hardin, Missouri 64035

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

(660) 909-9970

Telephone Number (Candidate Committees Only)

November 4, 2014

Election Date

County Prosecutor

Office Sought & Political Subdivision

Ray City

Republican

Political Party

Support

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 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

Candidate (Candidate Committees Only)