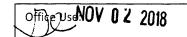


## Missouri Ethics Commission (MEC)

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

**Statement of Committee Organization** 



HAND DELIVERED

|            | pe: New Amended (if amending, enter MEC ID  | 3048 4 & section cha   | anged  |
|------------|---|--|--|
|            | Committee Information  American Dream PAC   |  |  |
|            | O Box 144 Jefferson City, MO 65102  |  | (573 <sub>)</sub> 635-6196                           |
| Comi       | mittee Mailing Address, City, State, & Zip  | Cole County Clerk  | Telephone Number                                     |
| Cor        | mmittee Type: □ Campaign □ Candidate ■ Continuing (P.   | County Clerk or Board of Election Commission  AC) Debt Service Expl  |  |
| Tre        | reasurer/Deputy Treasurer Information   |  |  |
| R          | on Richard  |  |  |
| P          | orer's Name (First & Last) O Box 144 Jefferson City, MO 65102   | Treasurer's Email Address (optional)   | ( <u>417</u> )781-0206                               |
| Jo         | surer's Mailing Address, City, State, & Zip  Ohn Sheehan  uty Treasurer's Name (if one appointed)                                 | Treasurer's Home Telephone Number  Deputy Treasurer's Email Address (optional)   | Treasurer's Work Telephone Number                    |
| P          | O Box 144 Jefferson City, MO 65102  | ( Dep. Treasurer's Home Telephone Number   | (573) 635-2255  Dep. Treasurer's Work Telephone Numb |
|            |   | Dep. Treasurer's nome releptione Number  | pep. Treasurer's Work Telephone Numb                 |
| Ad         | ditional Committee Information  | A STATE OF S |  |
| Addi       | tional Committee Officer's Name & Title (if any)  | Additional Committee Officer's Mailing Addi  | ess, City, State, & Zip                              |
| Conn       | nected Organization's Name (if any)   | Connected Organization's Mailing Address, (  | City, State, & Zip.,                                 |
|            | NDIDATES: Do you have more than one candidate committee?  |  |  |
| Of         | ficial Bank Account Information (required by all committees)  | · 多數可以以及對於的特別的一個   |  |
|            |   | · · · · · · · ·  |  |
| Ca         | ndidate Supported or Opposed (candidate committees must   | nclude self, if candidate)   | State of the state of                                |
|            |   | ()   | ()   |
| Nam        | e & Mailing Address, City, State & Zip of Candidate   | Telephone Number (Candidate Committees   | Only)  |
| Elect      | ion Date Office Sought & Political Subdivision  | Political Party  | Support or Oppose                                    |
| Ba         | llot Measure Supported or Opposed (campaign committees m  | ust complete this section)   | <b>建</b> 整位。1960年11月                                 |
| Name       | e of Ballot Measure   | Election Date & Political Subdivision  | Support or Oppose                                    |
| Sig        | nature(s) Check certification(s) & sign (required by all comm   | ittees)  | TOTAL CONTRACTOR                                     |
|            | affirm and attest under penalty of perjury that information and<br>ther acknowledge that I am aware that any false statement or c | •  |  |
| $\sum_{i}$ | De Son  |  |  |
| (Confi     | mittee Treasurer  | Candidate (Candidate Committees Only)  |  |

Packet (Rev. 12/2016)