

C180724

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DEC 14 2018



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

Statement of Committee Organization

1. Statement Information

Date: 12/7/18
Type: New Amended (if amending, enter MEC ID _____ & section changed _____)

2. Committee Information

Northland Regional Political Action Committee
Name of Committee

110 NW BARRY Rd # 201, Kansas City, MO 64155 (816) 436-9550
Committee Mailing Address, City, State, & Zip Telephone Number

Clay County Board of Election Commissioners
Official 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

Edward F. Ford III
Treasurer's Name (First & Last)

700 NE 93rd Street, Kansas City, MO 64155 (816) 255-2139 (816) 436-9550
Treasurer's Mailing Address, City, State, & Zip 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)

Name & Mailing Address, City, State & Zip of Candidate Telephone Number (Candidate Committees Only)

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 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.

Edward F. Ford III
Committee Treasurer Candidate (Candidate Committees Only)