



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

MISSOURI ETHICS COMMISSION

FEB 04 2019

Statement of Committee Organization

1. Statement Information

Date: 01/29/2019

Type: New Amended (if amending, enter MEC ID C161051 & section changed _____)

2. Committee Information

Missourians For Cody Smith

Name of Committee

1012 Euclid Blvd, Carthage, MO 64836

Committee Mailing Address, City, State, & Zip

(417) 291-0200

Telephone Number

Official Committee Email Address

Charlie Davis, County Clerk, Jasper County

County Clerk or Board of Election Commissioners

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

3. Treasurer/Deputy Treasurer Information

Kevin Hardy

Treasurer's Name (First & Last)

2430 S Jackson Ave, Joplin, MO 64804

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

Treasurer's Email Address (optional)

(417) 540-3722

Treasurer's Home Telephone Number

(417) 782-4919

Treasurer's Work Telephone Number

Deputy Treasurer's Name (if one appointed)

Deputy Treasurer's Email Address (optional)

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Dep. Treasurer's Home Telephone Number

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Dep. Treasurer's Work Telephone Number

4. Additional Committee Information

Additional Committee Officer's Name & Title (if any)

AMENDMENT

Additional Committee Officer's Mailing Address, City, State, & Zip

Connected Organization's Name

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)

David Cody Smith, 1012 Euclid Blvd, Carthage, MO 64836

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

(417) 291-0200

Telephone Number (Candidate Committees Only)

08/04/2020

Election Date

State Representative, 163rd District

Office Sought & Political Subdivision

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)