

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

HAND DELIVERED

Statement of Committee Organization

Statement Information Date: 4-8-2019	161140	H'/
Type: \square New \blacksquare Amended (if amending, enter MEC ID $\overset{f C}{\Box}$	& section & section	on changed #6
Committee Information Citizens for Dan Stacy		The second secon
1215 SW Hillcrest Dr, Blue Springs, MO	64015	(816)820-8092
A contract of the contract of	Jackson County	/ Election Board
fficial Committee Email Address	County Clerk or Board of Election Co	mmissioners
Committee Type: 🗌 Campaign 🔳 Candidate 🔲 Continui	ng (PAC) 🗆 Debt Service 🗀	Exploratory Political Party
reasurer/Deputy Treasurer Information		
₋isa Stacy	7	
easurer's Name (First & Last)	Treasurer's Email Address (optional)	040 000 0000
1215 SW Hillcrest Dr, Blue Springs, MO 64015	(<u>816</u>)228-8670	(<u>816</u>) <u>820-8089</u>
reasurer's Mailing Address, City, State, & Zip	Treasurer's Home Telephone Numbe	er Treasurer's Work Telephone Number
Deputy Treasurer's Name (if one appointed)	Deputy Treasurer's Email Address (o	ptional)
	()	()
eputy Treasurer's Mailing Address, City, State, & Zip	Dep. Treasurer's Home Telephone N	umber Dep. Treasurer's Work Telephone Num
Additional Committee Information		
Additional Committee Officer's Name & Title (if any)	Additional Committee Officer's Maili	ing Address, City, State, & Zip
ionnected Organization's Name (if any)	Connected Organization's Mailing Ad	ddress, City, State, & Zip
CANDIDATES: Do you have more than one candidate commi	ttee? Yes (refer to instruction	ns on back) 🔲 No
Official Bank Account Information (required by all committ		
		,
Candidate Supported or Opposed (candidate committees n	nust include self, if candidate)	
Dan Stacy, 1215 SW Hillcrest Dr, Blue Springs, MO 64015	(816 ₎ 228-8670	(816)820-8092
Iame & Mailing Address, City, State & Zip of Candidate	Telephone Number (Candidate Com	<u> </u>
08-04-2020 State Representative 31	Republican	Support Support or Oppose
Ballot Measure Supported or Opposed (campaign committe	ees must complete this section	n) to describe the second seco
ame of Ballot Measure	Election Date & Political Subdivision	n Support or Oppose
		. заррого от оррозе
signature(s) Check certification(s) & sign (required by all o		
I affirm and attest under penalty of perjury that information	-	•
urther acknowledge that I am aware that any false statemer	nt or declaration made herein i	1
Visa Stacy	')~~	ST CANDIDATE

MO 300-1308 Packet (Rev. 12/2016) Form must be completed in full & contain original signature(s), fax filings are not accepted.