

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

Office 016 3 0 2019
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Statement of Committee Organization

1.	Statement Information	e Kalanda Santa	THE PROPERTY.
	Date: <u>08/21/2019</u>		
	Type: New Amended (if amending, enter MEC ID CLS	8 section cha	nged)
2.	Committee Information		
	Bennie Cook for State Representative		
	Name of Committee		/417\ 200 2202
	P.O. Box 41 Houston, MO 65483 Committee Mailing Address, City, State, & Zip		(417) 260-2382 Telephone Number
		Texas County Clerk	
	Committee Type: Campaign Candidate Continuing	County Clerk or Board of Election Commission (PAC) Debt Service Ex	ploratory Political Pary
2	Treasurer/Deputy Treasurer Information	(i, r, re)	Tollean Annual Control of the Contro
э.			Participation of August Angles (Angles
	Amanda Cook Treasurer's Name (First & Last)	Headurer o committee and the	
	P.O. Box 41 Houston, MO 65483	(417) 260-2382	
	Freasurer's Mailing Address, City, State, & Zip	Phone 1	Phone 2
	Deputy Treasurer's Name (if one appointed)	Deputy Treasurer's Email Address (optional)	
	grant for a		
	Deputy Treasurer's Mailing Address, City, State, & Zip	Phone 1	Phone 2
4.	Additional Committee Information		
	Additional Committee Officer's Name & Title (if any)	Additional Committee Officer's Mailing Addr	acs City State & Zin
	Additional committee officer's Name & Title (if diff)	Additional confinences officer 3 Maining Addi	ess, city, state, & zip
	Connected Organization's Name (if any)	Connected Organization's Mailing Address, City, State, & Zip	
	${\tt CANDIDATES:}\ {\tt Do\ you\ have\ more\ than\ one\ candidate\ committee?}$	Yes (refer to instructions	on back) No
5	Official Bank Account Information (required by all committees)	the state of the first of the	A comment of the second of the
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Э.	Candidate Supported or Opposed (candidate committees must in	(/// 2) 21 A 222	(117) 21 2 77/1
	Bennie Cook 7580 Chestnut Ra Name & Mailing address, City, State, & Zio of Candidate Houston, Mo 45483	Phone 1	Phone 2
	August 4, 2020 State Rapresentative	Republican	Support
	Slection Date Office Sought & Political Subdivision 142	Political Party	Support or Oppose
7.	Ballot Measure Supported or Opposed (campaign committees m	ust complete this section)	
	Name of Ballot Measure	Election Date & Political Subdivision	Support or Oppose
3.	Signature(s) Check certification(s) & sign (required by all commit		The state of the s
٠,	#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	· · · · · · · · · · · · · · · · · · ·	
	_ Munda I Carl	Bennie Cov	le l
	Committee Treasurer	Candidate (Candidate Committees Only)	

MO 300-1308 Packet (Rev. 01/2016)