

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

Office Use: A211925

⁷ Statement of Committee Organization

| 1. | Statement Information | | |
|----|---|---|---------------------------------------|
| | Date: 07/02/2021 | | , |
| | Type: New Amended (if amending, enter MEC ID | & section cha | nged) |
| 2. | Committee Information | | |
| | Friends for Jefferson County Parks Name of Committee | | |
| | PO Box 834 High Ridge, MO 63049 | | (314) 640-8554 |
| | Committee Mailing Address, City, State, & Zip | | Telephone Number |
| | [REDACTED] Official Committee Email Address | Jefferson County Clerk County Clerk, Board of Election Commissione | rs Enderal BAC/Out of State Committee |
| | Committee Type: Campaign Candidate Continuing | | |
| 2 | | | |
| 3. | Treasurer/Deputy Treasurer Information | | |
| | Jerry Rogers Treasurer's Name (First & Last) | [REDACTED] Treasurer's Email Address (optional) | |
| | 2795 High Ridge Blvd High Ridge, MO 63049 | (314) 640-8554 | |
| | Treasurer's Mailing Address, City, State, & Zip | Phone 1 | Phone 2 |
| | Ben Haskins | [REDACTED] | |
| | Deputy Treasurer's Name (if one appointed) | Deputy Treasurer's Email Address (optional) | |
| | 3736 Clearview Dr Byrnes Mill, MO 63051 Deputy Treasurer's Mailing Address, City, State, & Zip | (636) 375-4886 Phone 1 | Phone 2 |
| 4. | | | |
| 4. | · · · · · · | | |
| | Bill Seek (Committee Chair) 18 Howe Crossing Festus, MO 63028 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, C | ity, State, & Zip |
| | CANDIDATES: Do you have more than one candidate committee? | Yes (refer to instructions | on back) No |
| 5. | icial Bank Account Information (required by all committees) | | |
| | [REDACTED] | [REDACTED] | [REDACTED] |
| | Name & Mailing Address, City, State, & Zip of Financial Institution | Account Name | Account Number |
| 6. | Candidate Supported or Opposed (candidate committees must in | clude self, if candidate) | |
| | | | |
| | Name & Mailing address, City, State, & Zip of Candidate | Phone 1 | Phone 2 |
| | Election Date Office Sought & Political Subdivision | Political Party | Support or Oppose |
| 7. | Ballot Measure Supported or Opposed (campaign committees me | ust complete this section) | |
| | Sales Tax for Jefferson County Parks and Recreation | 04/05/2022,Jefferson | Support |
| | | County | 500000 |
| | Name of Ballot Measure | Election Date & Political Subdivision | Support or Oppose |
| 8. | Signature(s) Check certification(s) & sign (required by all commit | tees) | |
| | ■affirm and attest under penalty of perjury that information and facts in this report are complete, true, and accurate. I | | |
| | rther acknowledge that I am aware that any false statement or declaration made herein is punishable under Ch. 575 RSMo. | | |
| | LECTRONICALLY FILED Jul 2 2021 01:54 PM ELECTRONICALLY FILED Jul 2 2021 01:54 PM Candidate (Candidate Committees Only) | | |