



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

Office Use:
C232436

1. Statement Information

Date: 04/28/2023
Type: New Amended (if amending, enter MEC ID _____ & section changed _____)

2. Committee Information

Missouri Law Enforcement for Good Government
Name of Committee
715 Jefferson Street Jefferson City, MO 65101
Committee Mailing Address, City, State, & Zip
(573) 632-3078
Telephone Number
[REDACTED]
Official Committee Email Address
Cole County Clerk
County Clerk, Board of Election Commissioners, Federal PAC/Out of State Committee
Committee Type: Campaign Candidate Continuing(PAC) Debt Service Exploratory Political Party

3. Treasurer/Deputy Treasurer Information

<u>Stephen Schroeder</u> Treasurer's Name (First & Last)	<u>[REDACTED]</u> Treasurer's Email Address (optional)
<u>715 Jefferson Street Jefferson City, MO 65101</u> Treasurer's Mailing Address, City, State, & Zip	<u>(573) 632-4209</u> Phone 1
	<u>Phone 2</u>
<u>Melissa Largent</u> Deputy Treasurer's Name (if one appointed)	<u>[REDACTED]</u> Deputy Treasurer's Email Address (optional)
<u>PO Box 52 Jefferson City, MO 65102</u> Deputy Treasurer's Mailing Address, City, State, & Zip	<u>(573) 616-1845</u> Phone 1
	<u>Phone 2</u>

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)

[REDACTED]
Name & Mailing Address, City, State, & Zip of Financial Institution
[REDACTED]
Account Name
[REDACTED]
Account Number

6. Candidate Supported or Opposed (candidate committees must include self, if candidate)

<u>Name & Mailing address, City, State, & Zip of Candidate</u>	<u>Phone 1</u>	<u>Phone 2</u>
<u>Election Date</u>	<u>Office Sought & Political Subdivision</u>	<u>Political Party</u>
		<u>Support or Oppose</u>

7. Ballot Measure Supported or Opposed (campaign committees must complete this section)

<u>Name of Ballot Measure</u>	<u>Election Date & Political Subdivision</u>	<u>Support or Oppose</u>
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8. Signature(s) Check certification(s) & sign (required by all committees)

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.
ELECTRONICALLY FILED Apr 28 2023 02:26 PM
Committee Treasurer
ELECTRONICALLY FILED Apr 28 2023 02:26 PM
Candidate (Candidate Committees Only)