

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:	
C242694	

Southern Missouri Conservatives PAC Name of Committee 1,004 Manchester Road Saint Louis, MO 63122    Committee Mailing Address, City, State, & Zip   St. Louis County Board of Elections   Controlled Committee From Andreas   County Gelf, Board of Elections   Controlled Committee From Andreas   County Gelf, Board of Elections   Controlled Committee From Andreas   County Gelf, Board of Elections   County Gelf, Board of Elections County Gelf, Board of Elections   County Gelf, Board of Elections County Gelf, Board of Elections   County Gelf, Board of Elections County Gelf, Board of Elections County Gelf, Board of Elections County Gelf, Board of Elections County Gelf, Board of Elections County Gelf, Board of Elections County Gelf, Board of Elections County Gelf, Board of Elections County Gelf, Board of Election County Gelf, Board of Elect	1.	Statement Information			
Southern Missouri Conservatives PAC Temes of Committee Committee Committee Committee Name and Saint Louis, MO 63122  Committee Name and Additional Committee		Date: <u>01/19/2024</u>			
Southern Missouri Conservatives PAC Name of Committee Name of State & Zip Name & Zip & Zi		Type: New Amended (if amending, enter MEC ID	& section changed		
St. Louis County Board of Election	2.	Committee Information			
1004 Manchester Road Saint Louis, MO 63122   (314) 394-3370   Telephone Number					
Telephone Number   Telephone N			(214) 204 2270		
Committee Trail Address Committee Trail Address Committee Trail Address Committee Type: Campaign Candidate Continuing(PAC) Debt Service Exploratory Political Pary  Ireasurer Deputy Treasurer Information  Mark Million  [REDACTED] Treasurer's Name (First & Last)  11004 Manchester Road Saint Louis, MO 63122 Treasurer's Malling Address, City, State, & Zip  Deputy Treasurer's Name (If one appointed)  Deputy Treasurer's Name (If one appointed)  Deputy Treasurer's Name (If one appointed)  Deputy Treasurer's Malling Address, City, State, & Zip  Phone 1  Phone 2  Additional Committee Officer's Name & Title (If any)  Additional Committee Officer's Malling Address, City, State, & Zip  Connected Organization's Name (If any)  Connected Organization's Name (If any)  Connected Organization's Malling Address, City, State, & Zip  Connected Organization's Malling Address, C					
Committee Type:					
Treasurer   Deputy Treasurer   Information					
REDACTED   Treasurer's Name (First & Last)   Treasurer's Name (First & Last)   Treasurer's Malling Address, City, State, & Zip   Phone 2	_		(TAC) Debt service Exploratory Trouticarrary		
Treasurer's Rame (First & Last)  11004 Manchester Road Saint Louis, MO 63122  Treasurer's Mailing Address, City, State, & Zip  Deputy Treasurer's Mailing Address, City, State, & Zip  Deputy Treasurer's Mailing Address, City, State, & Zip  Phone 1  Phone 2  [REDACTED]  Deputy Treasurer's Email Address (optional)  Phone 2  Additional Committee Officer's Inalian Address (optional)  Additional Committee Officer's Name (if one appointed)  Additional Committee Officer's Name (if any)  Additional Committee Officer'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  Official Bank Account Information (required by all committees)  [REDACTED]  Name & Mailing Address, City, State, & Zip of Financial Institution  Account Number  Candidate Supported or Opposed (candidate committees must include self, if candidate)  Travis Smith  None & Mailing Address, City, State, & Zip of Candidate  Phone 1  Senate District 33  Office Sought & Political Suddivision  Name of Ballot Measure  Ballot Measure Supported or Opposed (campaign committees must complete this section)  Name of Ballot Measure  Election Date & Political Subdivision  Support or Oppose  Ballot Measure Supported or Opposed (campaign committees must complete this section)  Electron Date & Political Subdivision  Support or Oppose  Electron Date & Political Subdivision  Electron Date Support 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 Jan 19 2024 08:38 AM  ELECTRONICALLY FILED Jan 19 2024 08:38 AM	3. Treasurer/Deputy Treasurer Information				
Treasurer's Mailing Address, City, State, & Zip  Deputy Treasurer's Mailing Address, City, State, & Zip  Phone 1  [REDACTED] Deputy Treasurer's Mailing Address, City, State, & Zip  Phone 1  Phone 2  Additional Committee Information  Additional Committee Officer's Name & Title (if any)  Additional Committee Officer's Name & Title (if any)  Additional Committee Officer's Name & Title (if any)  Connected Organization's Mailing Address, City, State, & Zip  CANDIDATES: Do you have more than one candidate committees?  Yes (refer to instructions on back)  No  Official Bank Account Information (required by all committees)  REDACTED] Name & Mailing Address, City, State, & Zip of Financial Institution  Account Name  Account Name  Account Name  Account Name  Account Name & Additional Committees  Phone 1  REDACTED]  Name & Mailing Address, City, State, & Zip of Candidate  Travis Smith  Name & Mailing Address, City, State, & Zip of Candidate  Phone 1  Phone 2  Support  Support or Oppose  Ballot Measure Supported or Opposed (campaign committees must complete this section)  Mame of Ballot Measure  Election Date & Political Suddivision  Support or Oppose  Signature(s) Check certification(s) & sign (required by all committees)  Account Name of Ballot Measure  Election Date & Political Suddivision  Support or Oppose  Signature(s) Check certification(s) & sign (required by all committees)  Account Name of Ballot Measure  Election Date & Political Suddivision  Support or Oppose  Electron Date & Political Suddivision  Account Name of Ballot Measure  Electron Date & Political Suddivision  Support or Oppose			<u></u>		
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Senate District 33  Election Date  Support Support or Oppose  Ballot Measure Supported or Opposed (campaign committees must complete this section)  Name of Ballot Measure  Election Date & Political Subdivision  Support or Oppose  Election Date & Political Subdivision  Election Date & Political Subdivision  Support or Oppose  Election Date & Political Subdivision  Electio					
Election Date  Office Sought & Political Subdivision  Political Party  Support or Oppose  Election Date & Political Subdivision  Name of Ballot Measure  Election Date & Political Subdivision  Support or Oppose  Support or Oppose  Support or Oppose  Election Date & Political Subdivision  Election Date & Political Subdivision  Support or Oppose  Election Date & Political Subdivision  Election Date & Political Party  Election Date & Political Par			Phone 1 Phone 2		
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			declaration made herein is punishable under Ch. 575 RSMo.		
		ELECTRONICALLY FILED Jan 19 2024 08:38 AM Committee Treasurer	ELECTRONICALLY FILED Jan 19 2024 08:38 AM Candidate (Candidate Committees Only)		