



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

Office Use:
 C243244

Statement of Committee Organization

1. Statement Information

Date: 12/19/2024
 Type: New Amended (if amending, enter MEC ID _____ & section changed _____)

2. Committee Information

Owner-Operator Independent Drivers Association PAC
 Name of Committee

PO Box 1000 1 Nw Ooida Dr Grain Valley, MO 64029 (816) 229-5791
 Committee Mailing Address, City, State, & Zip Telephone Number

[REDACTED] Federal PAC
 Official Committee Email Address 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

Angela Burnell [REDACTED]
 Treasurer's Name (First & Last) Treasurer's Email Address (optional)

PO Box 1000 1 Nw Ooida Dr Grain Valley, MO 64029 (816) 229-5791 (816) 419-8601
 Treasurer's Mailing Address, City, State, & Zip Phone 1 Phone 2

 Deputy Treasurer's Name (if one appointed) [REDACTED]
 Deputy Treasurer's Email Address (optional)

 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 Address, City, State, & Zip

Owner-Operator Independent Drivers Association | Owner-Operator Independent Drivers Association PAC; Committee ID C00236778 PO Box 1000, 1 NW Ooida Dr Grain Valley, MO 64029 | PO Box 1000, 1 Nw Ooida Dr Grain Valley, MO 64029
 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] [REDACTED] [REDACTED]
 Name & Mailing Address, City, State, & Zip of Financial Institution Account Name Account Number

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

Nick Schroer | Travis Fitzwater | Dave Griffith | Cyndi Buchheit-Courtway | Jonathan Patterson | Ben Baker | Chris Lonsdale | Jeff Myers | Ron Copeland | Brandon Phelps _____
 Name & Mailing address, City, State, & Zip of Candidate Phone 1 Phone 2

_____	Missouri Senate Missouri Senate Missouri House Missouri House Missouri House Missouri House Missouri House Missouri House Missouri House	_____	Support Support Support Support Support Support Support Support
Election Date	Office Sought & Political Subdivision	Political Party	Support or Oppose

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

 Name of Ballot Measure Election Date & Political Subdivision Support or Oppose

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 Dec 19 2024 01:51 PM

Committee Treasurer

ELECTRONICALLY FILED Dec 19 2024 01:51 PM

Candidate (Candidate Committees Only)

MO 300-1308

Packet (Rev. 10/2019)