

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:	
C253484	

Statement Informatio	n		
Date: <u>04/07/2025</u>	_		
Type: New	pe: NewAmended (if amending, enter MEC ID		hanged)
. Committee Information	on		
Gudehus for Missouri Name of Committee			
PO Box 9 Edina, MO 63	3537		(660) 341-2896
Committee Mailing Address, City, S			Telephone Number
[REDACTED] Official Committee Email Address		Knox County Clerk	oners, Federal PAC/Out of State Committee
	Campaign Candidate Continu	ing(PAC) Debt Service E	
. Treasurer/Deputy Trea	asurer Information		
Andy Turgeon		[REDACTED]	
Treasurer's Name (First & Last)		Treasurer's Email Address (optional)	
29912 205th St Canton Treasurer's Mailing Address, City, S	,	(573) 248-9392 Phone 1	Phone 2
Keith Gudehus	(a.c.) (a.c.)	[REDACTED]	1110110 2
Deputy Treasurer's Name (if one ap	opointed)	Deputy Treasurer's Email Address (optional)	
47151 Elwood Ave Edir		(660) 341-2896	
Deputy Treasurer's Mailing Address		Phone 1	Phone 2
. Additional Committee	Information		
Additional Committee Officer's Nam	ne & Title (if any)	Additional Committee Officer's Mailing Address, City, State, & Zip	
Connected Organization's Name (if	anvl	Connected Organization's Mailing Address, City, State, & Zip	
	nave more than one candidate committee		· · · · · · · · · · · · · · · · · · ·
. Official Bank Account I	Information (required by all committees		
[REDACTED]		[REDACTED]	[REDACTED]
Name & Mailing Address, City, State	e, & Zip of Financial Institution	Account Name	Account Number
Candidate Supported of	or Opposed (candidate committees mus	· · · · · · · · · · · · · · · · · · ·	
Keith Gudehus 47151 E	Elwood Ave Edina, MO 63537	(660) 341-2896 Phone 1	Phone 2
08/04/2026	State	Republican	THORE 2
06/04/2026	Representative/Missouri	Kepublican	
Floation Data	House of Representatives Office Sought & Political Subdivision	Delitical Deuts	Suppose of Oppose
Election Date Ballot Measure Suppo	rted or Opposed (campaign committees	Political Party must complete this section)	Support or Oppose
	, , , , , , , , , , , , , , , , , , ,	,	
Name of Ballot Measure		Election Date & Political Subdivision	Support or Oppose
. Signature(s) Check cer	tification(s) & sign (required by all comn	nittees)	
	nder penalty of perjury that information a hat I am aware that any false statement o		
ELECTRONICALLY FILED Apr 7 2025 04:24 PM		ELECTRONICALLY FILED Apr 7 2025 04:24 PM	
Committee Treasurer		Candidate (Candidate Committees Only)	