

Committee Treasurer

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:	I
C253536	

1. Statement Info	ormation			
Date: <u>06/11/20</u>				
Type: New	Amended (if amending, enter MEC ID	& section	changed)	
2. Committee Info	ormation			
Tina Goodrick fo	or Missouri			
	ird Ln Saint Joseph, MO 64506		(816) 617-4012	
Committee Mailing Add	ress, City, State, & Zip	Telephone Number		
[REDACTED] Official Committee Email	il Address	Buchanan County Clerk County Clerk, Board of Election Commis	ssioners, Federal PAC/Out of State Committee	
Committee Type	e: Campaign Candidate Continuir	g(PAC) Debt Service	Exploratory Political Pary	
B. Treasurer/Depu	uty Treasurer Information			
Frederick Farris		[REDACTED]		
Treasurer's Name (First		Treasurer's Email Address (optional)		
310 Grand DD S Treasurer's Mailing Add	SE Faucett, MO 64448 ress, City, State, & Zip	(816) 248-1108 Phone 1	Phone 2	
		[REDACTED]		
Deputy Treasurer's Nam	ne (if one appointed)	Deputy Treasurer's Email Address (opti-	onal)	
Deputy Treasurer's Mail	ing Address, City, State, & Zip	Phone 1	Phone 2	
. Additional Com	mittee Information			
David Martin (S	Secretary)	5217 E 28th street Kans	as City, MO 64128	
Additional Committee O	officer's Name & Title (if any)	Additional Committee Officer's Mailing	Address, City, State, & Zip	
Connected Organization	nnected Organization's Name (if any) Connected Organization's Mailing Address, City, State, & Zip			
CANDIDATES: D	o you have more than one candidate committee?	Yes (refer to instruction	ons on back) No	
5. Official Bank Ac	ccount Information (required by all committees)		_	
[REDACTED]		[REDACTED]	[REDACTED]	
	s, City, State, & Zip of Financial Institution	Account Name	Account Number	
	ported or Opposed (candidate committees must	· · · · · · · · · · · · · · · · · · ·		
64506	102 Mockingbird Lane Saint Joseph, MO	(816) 617-4012	_	
	s, City, State, & Zip of Candidate	Phone 1	Phone 2	
08/04/2026	State	Republican	_	
	Representative/Missouri House of Representatives			
Election Date	Office Sought & Political Subdivision	Political Party	Support or Oppose	
7. Ballot Measure	Supported or Opposed (campaign committees r	nust complete this section)		
Name of Ballot Measure	2	Election Date & Political Subdivision	Support or Oppose	
B. Signature(s) Ch	eck certification(s) & sign (required by all commi			
	■affirm and attest under penalty of perjury that information and facts in this report are complete, true, and accurate. I			
	rledge that I am aware that any false statement o			
ELECTRONICAL	LY FILED Jun 11 2025 11:52 AM	ELECTRONICALLY FILED Ju	ın 11 2025 11:52 AM	

Candidate (Candidate Committees Only)

MO 300-1308 Packet (Rev. 10/2019)