

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:	
C253629	

1.	Statement Information			
	Date: <u>08/22/2025</u>			
	Type: New Amended (if amending, enter MEC ID	& section cha	nged)	
2.	Committee Information			
	Citizens to Elect Todd Caraway			
	Name of Committee		(550) 215 5720	
	2900 N Lincoln Street Kirksville , MO 63501 Committee Mailing Address, City, State, & Zip		(660) 216-6720 Telephone Number	
	[REDACTED]	Adair County Clerk		
	Official Committee Email Address	County Clerk, Board of Election Commissione		
		(PAC) Debt Service Ex	oloratory Political Pary	
3.	Treasurer/Deputy Treasurer Information			
	Carolyn Chrisman	[REDACTED]		
	Treasurer's Name (First & Last)	Treasurer's Email Address (optional)		
	201 Sandia Cir Kirksville , MO 63501 Treasurer's Mailing Address, City, State, & Zip	(660) 988-0479 Phone 1	Phone 2	
		[REDACTED]		
	Deputy Treasurer's Name (if one appointed)	Deputy Treasurer's Email Address (optional)		
	Deputy Treasurer's Mailing Address, City, State, & Zip	Phone 1	Phone 2	
4.	Additional Committee Information			
	Todd Caraway (President) Angela Caraway (Vice President	Sident 2900 N Lincoln Street Kirksville, MO 63501 2900 N Li Street Kirksville , MO 63501 Additional Committee Officer's Mailing Address, City, State, & Zip		
	<u>J</u> Additional Committee Officer's Name & Title (if any)			
	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 in	committees must include self, if candidate)		
	Todd Caraway 2900 N Lincoln Street Kirksville , MO 63501	(660) 216-6720	212	
	Name & Mailing address, City, State, & Zip of Candidate	Phone 1	Phone 2	
	08/04/2026 Statewide Office Election Date Office Sought & Political Subdivision	Republican Political Party	Support or Oppose	
7	Ballot Measure Supported or Opposed (campaign committees mu	ust complete this section)		
, .	Sanot Measure Supported of Opposed (campaign committees me	ast complete this section;		
	Name of Ballot Measure	Election Date & Political Subdivision	Support or Oppose	
8.	Signature(s) Check certification(s) & sign (required by all committ	tees)		
	■affirm and attest under penalty of perjury that information and		te, true, and accurate. I	
	further acknowledge that I am aware that any false statement or o			
	ELECTRONICALLY FILED Aug 22 2025 06:33 PM	ELECTRONICALLY FILED Aug 22 2025 06:33 PM		
Committee Transurer Candidate (Candidate Committees Only)				