



MISSOURI ETHICS COMMISSION
STATEMENT OF COMMITTEE ORGANIZATION

MEC ID # C101151

OFFICE USE ONLY
Bob *JA*

STATEMENT DATE <u>3/6/10</u>	TYPE OF STATEMENT (CHECK ONE) <input checked="" type="checkbox"/> NEW <input type="checkbox"/> AMENDED	IF AMENDED, LIST ITEMS CHANGED (LINE NUMBERS)
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3. FULL NAME OF COMMITTEE Jarrett For Judge

4. COMMITTEE MAILING ADDRESS ADDRESS: <u>501 Turnberry Drive</u> CITY / STATE / ZIP: <u>Jefferson City, MO 65109</u>	5. TELEPHONE NUMBER <u>573-353-6353</u>
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6. TREASURER'S NAME Tom Kolb

7. TREASURER'S MAILING ADDRESS ADDRESS: <u>509 Turnberry Drive</u> CITY / STATE / ZIP: <u>Jefferson City, Mo 65109</u>	8. TELEPHONE NUMBER HOME: <u>573-635-5885</u> WORK:
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9. DEPUTY TREASURER'S NAME CHECK IF NO DEPUTY TREASURER

10. DEPUTY TREASURER'S ADDRESS ADDRESS: <u>N/A</u> CITY / STATE / ZIP:	11. TELEPHONE NUMBER HOME: <u>N/A</u> WORK:
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12. OTHER COMMITTEE OFFICERS (IF ANY) A. NAME B. ADDRESS C. TITLE	13. IF CANDIDATE HAS OTHER COMMITTEES, IS THIS COMMITTEE DESIGNATED AS THE AGGREGATING COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A
<u>N/A</u>	

14. OFFICIAL FUND DEPOSITORY: CHECKING ACCOUNT FIRST, THEN ANY SAVINGS ACCOUNT(S)		
A. NAME & ADDRESS OF BANK, SAVING & LOAN, OR CREDIT UNION <u>Hawthorn Bank</u> <u>132 E. High</u> <u>Jefferson City, MO 65101</u>	B. ACCOUNT NAME <u>Jarrett for Judge</u>	C. ACCOUNT NO.

15. TYPE OF COMMITTEE
 CANDIDATE POLITICAL PARTY CONTINUING CAMPAIGN EXPLORATORY DEBT SERVICE

16. CANDIDATE SUPPORTED (CANDIDATE COMMITTEES ONLY)			
A. NAME <u>Terry Jarrett</u>	B. ADDRESS <u>501 Turnberry Drive, Jefferson City, MO (SAD)</u>	C. TELEPHONE NO. <u>573-353-6353</u>	D. POLITICAL PARTY <u>Republican</u>

17. CONNECTED ORGANIZATION (IF ANY) (CONTINUING COMMITTEES ONLY)	
A. NAME <u>N/A</u>	B. ADDRESS

18. CANDIDATES SUPPORTED OR OPPOSED				CHECK ONE	
A. NAME(S) OF CANDIDATE(S) <u>Terry Jarrett</u>	B. ELECTION DATE <u>8/3/10</u>	C. OFFICE SOUGHT <u>Circuit Court Judge</u>	D. POLITICAL SUBDIVISION <u>19th Circuit</u>	E. SUPPORT <input checked="" type="checkbox"/>	F. OPPOSE <input type="checkbox"/>

19. BALLOT MEASURE(S) SUPPORTED OR OPPOSED				CHECK ONE	
A. NAME(S) OF MEASURE(S) <u>N/A</u>	B. ELECTION DATE	C. SUBJECT AND POLITICAL SUBDIVISION	E. SUPPORT <input type="checkbox"/>	F. OPPOSE <input type="checkbox"/>	

20. COMMITTEE TREASURER'S SIGNATURE

I CERTIFY THAT THIS STATEMENT IS COMPLETE, TRUE AND ACCURATE.

Thomas L. Kolb
TREASURER'S SIGNATURE

21. CANDIDATE'S SIGNATURE (CANDIDATE COMMITTEES ONLY)

I CERTIFY THAT THIS STATEMENT IS COMPLETE, TRUE AND ACCURATE.

Terry Jarrett
CANDIDATE'S SIGNATURE

HAND DELIVERED
MAR 24 2010