



MISSOURI ETHICS COMMISSION  
STATEMENT OF COMMITTEE ORGANIZATION

MEC ID # C101457

OFFICE USE ONLY  
*[Handwritten mark]*

STATEMENT DATE 6-1-10	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 Missouri Farmers Care

4. COMMITTEE MAILING ADDRESS ADDRESS: <u>6235 W. Cunningham Drive</u> CITY / STATE / ZIP: <u>Columbia, MO 65202</u>	5. TELEPHONE NUMBER <u>573-445-8375</u>
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6. TREASURER'S NAME  
Dale Ludwig

7. TREASURER'S MAILING ADDRESS ADDRESS: <u>3337 Emerald Lane</u> CITY / STATE / ZIP: <u>Jefferson City, MO 65109</u>	8. TELEPHONE NUMBER HOME: WORK: <u>573-635-3819</u>
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9. DEPUTY TREASURER'S NAME  CHECK IF NO DEPUTY TREASURER

10. DEPUTY TREASURER'S ADDRESS ADDRESS: CITY / STATE / ZIP:	11. TELEPHONE NUMBER HOME: 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 type="checkbox"/> N/A
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14. OFFICIAL FUND DEPOSITORY: CHECKING ACCOUNT FIRST, THEN ANY SAVINGS ACCOUNT(S)

A. NAME & ADDRESS OF BANK, SAVING & LOAN, OR CREDIT UNION <u>Jefferson Bank of Missouri</u> <u>700 Southwest Blvd., PO Box 600</u> <u>Jefferson City, MO 65102</u>	B. ACCOUNT NAME <u>Missouri Farmers Care PAC</u>	C. ACCOUNT NO.
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15. TYPE OF COMMITTEE  
 CANDIDATE  POLITICAL PARTY  CONTINUING  CAMPAIGN  EXPLORATORY  DEBT SERVICE

16. CANDIDATE SUPPORTED (CANDIDATE COMMITTEES ONLY)

A. NAME	B. ADDRESS	C. TELEPHONE NO.	D. POLITICAL PARTY
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17. CONNECTED ORGANIZATION (IF ANY) (CONTINUING COMMITTEES ONLY)

A. NAME	B. ADDRESS
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18. CANDIDATES SUPPORTED OR OPPOSED

A. NAME(S) OF CANDIDATE(S)	B. ELECTION DATE	C. OFFICE SOUGHT	D. POLITICAL SUBDIVISION	E. SUPPORT <input type="checkbox"/>	F. OPPOSE <input type="checkbox"/>
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19. BALLOT MEASURE(S) SUPPORTED OR OPPOSED

A. NAME(S) OF MEASURE(S)	B. ELECTION DATE	C. SUBJECT AND POLITICAL SUBDIVISION	E. SUPPORT <input type="checkbox"/>	F. OPPOSE <input type="checkbox"/>
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20. COMMITTEE TREASURER'S SIGNATURE

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

Dale Ludwig

TREASURER'S SIGNATURE

21. CANDIDATE'S SIGNATURE (CANDIDATE COMMITTEES ONLY)

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

[Signature]

CANDIDATE'S SIGNATURE

Missouri Ethics Commission  
JUL 12 2010