



MISSOURI ETHICS COMMISSION
STATEMENT OF COMMITTEE ORGANIZATION

MEC ID # C081145

OFFICE USE ONLY
LA *KE*

STATEMENT DATE August 9 2010		TYPE OF STATEMENT (CHECK ONE) <input type="checkbox"/> NEW <input checked="" type="checkbox"/> AMENDED		IF AMENDED, LIST ITEMS CHANGED (LINE NUMBERS) Bank Account	
3. FULL NAME OF COMMITTEE Citizens to Elect Kurt Schaefer					
4. COMMITTEE MAILING ADDRESS ADDRESS: PO Box 1614 CITY / STATE / ZIP : Columbia, MO				5. TELEPHONE NUMBER (573) 817-3201	
6. TREASURER'S NAME Tom Atkins					
7. TREASURER'S MAILING ADDRESS ADDRESS: 1123 WILKES BLVD #12 CITY / STATE / ZIP : COLUMBIA MO 65201				8. TELEPHONE NUMBER HOME: (573) 256-6000 WORK: (573) 874-4000	
9. DEPUTY TREASURER'S NAME <input type="checkbox"/> CHECK IF NO DEPUTY TREASURER Yancy Williams					
10. DEPUTY TREASURER'S ADDRESS ADDRESS: PO Box 1614 CITY / STATE / ZIP : Columbia, MO 65205				11. TELEPHONE NUMBER HOME: 573-291-2631 WORK:	
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	
14. OFFICIAL FUND DEPOSITORY: CHECKING ACCOUNT FIRST, THEN ANY SAVINGS ACCOUNT(S) A. NAME & ADDRESS OF BANK, SAVING & LOAN, OR CREDIT UNION : B. ACCOUNT NAME : C. ACCOUNT NO. Boone County National Bank : Citizens to Elect Kurt Schaefer PO Box 678 Columbia, MO 65205					
15. TYPE OF COMMITTEE <input checked="" type="checkbox"/> CANDIDATE <input type="checkbox"/> POLITICAL PARTY <input type="checkbox"/> CONTINUING <input type="checkbox"/> CAMPAIGN <input type="checkbox"/> EXPLORATORY <input type="checkbox"/> DEBT SERVICE					
16. CANDIDATE SUPPORTED (CANDIDATE COMMITTEES ONLY) A. NAME : B. ADDRESS : C. TELEPHONE NO. : D. POLITICAL PARTY Kurt Schaefer : (573) 817-3201 : Republican					
17. CONNECTED ORGANIZATION (IF ANY) (CONTINUING COMMITTEES ONLY) A. NAME : B. ADDRESS :					
18. CANDIDATES SUPPORTED OR OPPOSED A. NAME(S) OF CANDIDATE(S) Kurt Schaefer		B. ELECTION DATE 8/7/12		C. OFFICE SOUGHT State Senate	
				D. POLITICAL SUBDIVISION Republican	
				CHECK ONE E. SUPPORT <input checked="" type="checkbox"/> F. OPPOSE <input type="checkbox"/>	
19. BALLOT MEASURE(S) SUPPORTED OR OPPOSED A. NAME(S) OF MEASURE(S)		B. ELECTION DATE		C. SUBJECT AND POLITICAL SUBDIVISION	
				CHECK ONE 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. TREASURER'S SIGNATURE			21. CANDIDATE'S SIGNATURE (CANDIDATE COMMITTEES ONLY) I CERTIFY THAT THIS STATEMENT IS COMPLETE, TRUE AND ACCURATE. CANDIDATE'S SIGNATURE		

AMENDMENT

Missouri Ethics Commission
AUG 25 2010