



MISSOURI ETHICS COMMISSION
STATEMENT OF COMMITTEE ORGANIZATION

MEC ID # C111154

OFFICE USE ONLY
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STATEMENT DATE August 23, 2011	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
Doug Libla for Senate

4. COMMITTEE MAILING ADDRESS ADDRESS: 5287 Hwy 67N CITY / STATE / ZIP: Poplar Bluff, MO 63901	5. TELEPHONE NUMBER 573-714-5555
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6. TREASURER'S NAME
Herman Styles, Jr.

7. TREASURER'S MAILING ADDRESS ADDRESS: 1401 Lurlyn CITY / STATE / ZIP: Poplar Bluff, MO 63901	8. TELEPHONE NUMBER HOME: 573-785-6653 WORK: 573-776-0171
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9. DEPUTY TREASURER'S NAME CHECK IF NO DEPUTY TREASURER
Brent Davis

10. DEPUTY TREASURER'S ADDRESS ADDRESS: 103 Rembrandt CITY / STATE / ZIP: Poplar Bluff, MO 63901	11. TELEPHONE NUMBER HOME: 573-429-0416 WORK: N/A
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12. OTHER COMMITTEE OFFICERS (IF ANY) A. NAME B. ADDRESS C. TITLE <u>LAURA JANE YARBRO</u> <u>79 G Rd 555</u> <u>DEPUTY TREASURER</u> <u>POPLAR BLUFF MO 63901</u> <u>573-785-1144</u>	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	B. ACCOUNT NAME	C. ACCOUNT NO.
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15. TYPE OF COMMITTEE
 CANDIDATE POLITICAL PARTY POLITICAL ACTION (PAC) CAMPAIGN EXPLORATORY DEBT SERVICE

16. CANDIDATE SUPPORTED (CANDIDATE COMMITTEES ONLY)

A. NAME <u>Doug Libla</u>	B. ADDRESS <u>5287 Hwy 67N poplar Bluff mo</u>	C. TELEPHONE NO. <u>573-714-5555</u>	D. POLITICAL PARTY <u>Rep</u>
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17. CONNECTED ORGANIZATION (IF ANY) (CONTINUING COMMITTEES ONLY) 63901

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

A. NAME(S) OF CANDIDATE(S) <u>Doug Libla</u>	B. ELECTION DATE <u>8-7-12</u>	C. OFFICE SOUGHT <u>Senate</u>	D. POLITICAL SUBDIVISION <u>D:st</u> <u>25th</u>	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 <u>8-7-12</u>	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.

Herman Styles Jr
TREASURER'S SIGNATURE

21. CANDIDATE'S SIGNATURE (CANDIDATE COMMITTEES ONLY)

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

Doug Libla
CANDIDATE'S SIGNATURE

Missouri Ethics Commission
AUG 25 2011