



Missouri Ethics Commission (MEC)
 PO Box 1370, Jefferson City MO 65102, (800) 392-8660, www.mec.mo.gov

Office Use: De

Statement of Committee Organization

1. Statement Information

Date: 10/20/2011

Type: New Amended (if amending, enter MEC ID CO61132 & section changed 3,4,6)

2. Committee Information

Name of Committee: Friends of Share Schoeller

Committee Mailing Address, City, State, & Zip

(417) 893-0008
 Telephone Number

AMENDMENT

Official Committee Email Address

County Clerk or Board of Election Commissioners

Committee Type: Campaign Candidate Debt Service Exploratory Political Action (PAC) Political Party

3. Treasurer/Deputy Treasurer Information

Treasurer's Name (First & Last)

Treasurer's Email Address (optional)

Treasurer's Mailing Address, City, State, & Zip

Treasurer's Home Telephone Number: () Treasurer's Work Telephone Number: ()

PAUL CURTMAN
 Deputy Treasurer's Name (if one appointed)

Deputy Treasurer's Email Address (optional)

PO BOX 355, PALIFK, MO 63069
 Deputy Treasurer's Mailing Address, City, State, & Zip

(636) 751-8961 ()
 Dep. Treasurer's Home Telephone Number Dep. Treasurer's Work Telephone Number

4. Additional Committee Information

MAGGIE GRAHAM, SECRETARY
 Additional Committee Officer's Name & Title (if any)

3628 N. SNOWMASS CIRCLE SPRINGFIELD, MO 65803
 Additional Committee Officer's Mailing Address, City, State, & Zip

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)

Name & Mailing Address, City, State, & Zip of Financial Institution

Account Name

Account Number

6. Candidate Supported or Opposed (candidate committees must include self, if candidate)

Name & Mailing Address, City, State & Zip of Candidate

(417) 893-0008 ()
 Telephone Number (Candidate Committees Only)

8-7-12
 Election Date

STATEWIDE
 Office Sought & Political Subdivision

Political Party

Support or Oppose

HAND DELIVERED

7. Ballot Measure Supported or Opposed (campaign committees must complete this section)

Name of Ballot Measure

Election Date & Political Subdivision

Support or Oppose

8. Signature(s) Check certification(s) & sign (required by all committees)

I/We certify that this statement is complete, true and accurate.

e-File: This committee is required by law to file with the MEC and will file all future campaign finance reports using the MEC's electronic filing system.

Paul Curtman
 Committee Treasurer

Share Schoeller
 Candidate (Candidate Committees Only)