



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

Office Use: B3 DE

Statement of Committee Organization

1. Statement Information

Date: 12/09/2011
 Type: New Amended (if amending, enter MEC ID C081190 & section changed 3, 6)

2. Committee Information

FRIENDS TO ELECT COLE MCNARY

Name of Committee

Committee Mailing Address, City, State, & Zip _____ Telephone Number _____

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

Clint Tracy
 Treasurer's Name (First & Last)
PO Box 1934, Cape Girardeau, MO 63702
 Treasurer's Mailing Address, City, State, & Zip

Treasurer's Email Address (optional) _____
(573) 334-2553 (573) 334-2553
 Treasurer's Home Telephone Number Treasurer's Work Telephone Number

Deputy Treasurer's Name (if one appointed) _____
 Deputy Treasurer's Mailing Address, City, State, & Zip _____

Deputy Treasurer's Email Address (optional) _____
 Dep. Treasurer's Home Telephone Number _____ Dep. Treasurer's Work Telephone Number _____

4. Additional Committee Information

Additional Committee Officer's Name & Title (if any) _____
AMENDMENT
 Connected Organization's Name (if any) _____

Additional Committee Officer's Mailing Address, City, State, & Zip _____
 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)

Cole McNary
 Name & Mailing Address, City, State & Zip of Candidate _____
08/07/2012 State Treasurer, State of Missouri
 Election Date Office Sought & Political Subdivision

(314) 542-2251 _____
 Telephone Number (Candidate Committees Only)
Republican Support
 Political Party Support or Oppose

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.

[Signature]
 Committee Treasurer

[Signature]
 Candidate (Candidate Committees Only)

Missouri Ethics Commission
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