



Office Use: *Bob De*

# Statement of Committee Organization

## 1. Statement Information

Date: 12/22/2012  
 Type:  New  Amended (if amending, enter MEC ID C101244 & section changed 1,6)

## 2. Committee Information

Committee to Elect Gail McCann Beatty  
 Name of Committee  
6012 Woodland Ave, Kansas City, MO 64110 (816) 223-8230  
 Committee Mailing Address, City, State, & Zip Telephone Number  
Kansas City Board of Elections  
 County Clerk or Board of Election Commissioners  
 Official Committee Email Address  
 Committee Type:  Campaign  Candidate  Continuing (PAC)  Debt Service  Exploratory  Political Party

## 3. Treasurer/Deputy Treasurer Information

Brandon K. Jordan  
 Treasurer's Name (First & Last)  
313 E. 17th St., Apt 205, Kansas City, Mo 64108  
 Treasurer's Mailing Address, City, State, & Zip  
(913) 484-0833 (913) 484-0833  
 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 Home Telephone Number Deputy Treasurer's Work Telephone Number

## 4. Additional Committee Information

**AMENDMENT**  
 Additional Committee Officer's Name & Title (if any)  
 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)

Gail McCann Beatty, 6012 Woodland, Kansas City, MO 64110 (816) 223-8230 ( )  
 Name & Mailing Address, City, State & Zip of Candidate Telephone Number (Candidate Committees Only)  
August, 2014 State Rep. 26th District Democrat Support  
 Election Date Office Sought & Political Subdivision 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 affirm and attest under penalty of perjury that information and facts in this report are complete, true, and accurate. I further acknowledge that I am aware that any false statement or declaration made herein is punishable under Ch. 575 RSMo.

*Brandon K. Jordan* *Gail McCann Beatty*  
 Committee Treasurer Candidate (Candidate Committees Only)