



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

MISSOURI ETHICS COMMISSION  
 Office Use: Nov 08 2013

# Statement of Committee Organization

HAND DELIVERED

**1. Statement Information**

Date: 11/6/2013  
 Type:  New  Amended (if amending, enter MEC ID C131163 & section changed \_\_\_\_\_)

**2. Committee Information**

**Missouri Early Voting Fund**  
 Name of Committee  
PO Box 1921, Jefferson City, MO 65102  
 Committee Mailing Address, City, State, & Zip  
(417) 844-8271  
 Telephone Number  
Cole County  
 Official Committee Email Address  
 County Clerk or Board of Election Commissioners  
 Committee Type:  Campaign  Candidate  Continuing (PAC)  Debt Service  Exploratory  Political Party

**3. Treasurer/Deputy Treasurer Information**

**Matt Dameron**  
 Treasurer's Name (First & Last)  
PO Box 1921, Jefferson City, MO 65102  
 Treasurer's Mailing Address, City, State, & Zip  
(816) 547-8368  
 Treasurer's Home Telephone Number  
(816) 547-8368  
 Treasurer's Work Telephone Number  
**Ben Jersak**  
 Deputy Treasurer's Name (if one appointed)  
1106 Autumn Ridge Drive, Holts Summit, MO 65043  
 Deputy Treasurer's Mailing Address, City, State, & Zip  
(417) 844-8271  
 Dep. Treasurer's Home Telephone Number  
(417) 844-8271  
 Dep. Treasurer's Work Telephone Number

**4. Additional Committee Information**

Additional Committee Officer's Name & Title (if any) \_\_\_\_\_  
 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 Member 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 \_\_\_\_\_ Telephone Number (Candidate Committees Only) \_\_\_\_\_  
 Election Date \_\_\_\_\_ Office Sought & Political Subdivision \_\_\_\_\_ Political Party \_\_\_\_\_ Support or Oppose \_\_\_\_\_

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

**Early Voting Amendment**  
 Name of Ballot Measure  
November 4, 2014  
 Election Date & Political Subdivision  
Statewide  
**Support**  
 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.

Matt Dameron  
 Committee Treasurer  
 Candidate (Candidate Committees Only)