



Statement of Committee Organization

1. Statement Information

Date: 6/6/14
Type: [X] New [] Amended (if amending, enter MEC ID C141393 & section changed)

2. Committee Information

Missouri AG PAC

Name of Committee: P.O. Box 555 Perryville, MO 63775
Telephone Number: (573) 846-7992 X

Official Committee Email Address: Randy Taylor
County Clerk or Board of Election Commissioners

Committee Type: [] Campaign [] Candidate [X] Continuing (PAC) [] Debt Service [] Exploratory [] Political Party

3. Treasurer/Deputy Treasurer Information

Sarah Steelman

Treasurer's Name (First & Last): 11820 Springhouse Lane, Rolla, MO 65401
Treasurer's Email Address (optional): 573 368-8346
Treasurer's Home Telephone Number: ()
Treasurer's Work Telephone Number: ()

Deputy Treasurer's Name (if one appointed): 1705 PCR 206, Perryville, MO 63775
Deputy Treasurer's Email Address (optional): 573 547-9326
Dep. Treasurer's Home Telephone Number: ()
Dep. Treasurer's Work Telephone Number: (573) 846-7992

4. Additional Committee Information

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

CANDIDATES: Do you have more than one candidate committee? [] Yes (refer to instructions on back) [X] 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
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)

Name of Ballot Measure
Election Date & Political Subdivision
Support or Oppose

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

[X] 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.

Committee Treasurer: [Signature]
Candidate (Candidate Committees Only)