



Office Use *JB* *an*

Statement of Committee Organization

1. Statement Information

Date: 09/05/2014

Type: New Amended (if amending, enter MEC ID C141520 & section changed _____)

2. Committee Information

Conservatives Protecting Our Local Schools

Name of Committee

P.O. Box 171, Jefferson City, MO 65101

Committee Mailing Address, City, State, & Zip

(816) 314-260-6324
 Telephone Number

Marvin Register

County Clerk or Board of Election Commissioners

Committee Email Address

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

3. Treasurer/Deputy Treasurer Information

Bill Foster

Treasurer's Name (First & Last)

720 Harvest Dr, Jefferson City, MO 65109

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

Treasurer's Email Address (optional)

(573) 778-7079

Treasurer's Home Telephone Number

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Treasurer's Work Telephone Number

Deputy Treasurer's Name (if one appointed)

Deputy Treasurer's Email Address (optional)

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Dep. Treasurer's Home Telephone Number

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Dep. Treasurer's Work Telephone Number

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

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)

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

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

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 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)

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 prohibited by the Missouri Ethics Commission.

Bill F. Foster
 Committee Treasurer

SEP 05 2014
 Candidate (Candidate Committees Only)