



# Statement of Committee Organization

**1. Statement Information**

Date: August 27, 2016

Type:  New  Amended (if amending, enter MEC ID C Ke1348 & section changed 3)

**2. Committee Information**

Friends of Kevin Elmer

Name of Committee

P.O. Box 1315, Nixa, MO 65714

Committee Mailing Address, City, State, & Zip

(417) 725-2580

Telephone Number

Official Committee Email Address

Kay Brown - Christian

County Clerk or Board of Election Commissioners

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

**3. Treasurer/Deputy Treasurer Information**

Helen Elmer

Treasurer's Name (First & Last)

1725 S. Songbird Circle, Nixa, MO 65714

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

Treasurer's Email Address (optional)

(417) 724-8091

Treasurer's Home Telephone Number

( )

Treasurer's Work Telephone Number

Deputy Treasurer's Name (if one appointed)

Deputy Treasurer's Email Address (optional)

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

( )

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**

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)**

Kevin Elmer, P.O. Box 1315, Nixa, MO 65714

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

(417) 725-2580

Telephone Number (Candidate Committees Only)

8-7-2018

Election Date

Assoc. Circuit Judge, Christian Co.

Office Sought & Political Subdivision

Circuit 38

Republican

Political Party

Support

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.

Helen Elmer  
 Committee Treasurer

K. B. E.  
 Candidate (Candidate Committees Only)