



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

I M A G E D

JS 20
 Missouri Ethics Commission
 OCT 11 2016

Statement of Committee Organization

1. Statement Information

Date: 9/24/14

Type: New Amended (if amending, enter MEC ID C161353 & section changed _____)

2. Committee Information

COMMITTEE TO ELECT DAN STALLMAN
 Name of Committee

5201 Hwy H DEOTO, MO. 63020 (636) 586-0267
 Committee Mailing Address, City, State, & Zip Telephone Number

WES WAGNER
 County Clerk or Board of Election Commissioners

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

3. Treasurer/Deputy Treasurer Information

MARY ARNHART
 Treasurer's Name (First & Last)

2198 WILDERNESS TRAIL BARNHART, MO 63012
 Treasurer's Mailing Address, City, State, & Zip

Treasurer's Email Address (optional) _____
(314) 607-9139 _____
 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) _____
 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)

DAN STALLMAN 5201 Hwy H DEOTO, MO. 63020 (636) 586-0267 _____
 Name & Mailing Address, City, State & Zip of Candidate Telephone Number (Candidate Committees Only)

NOV. 8, 2014 (Consulman) #6 Rep. SUPPORT
 Election Date Office Sought & Political Subdivision Political Party Support or Oppose
Jefferson City

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.

Mary Arnhart _____ Dan Stallman _____
 Committee Treasurer Candidate (Candidate Committees Only)