



Statement of Committee Organization

1. Statement Information

Date: 10/03/2016

Type: New Amended (if amending, enter MEC ID C000915 & section changed 2, 3, 4,)

2. Committee Information

St. Francois County Democratic Central Committee

Name of Committee

5737 Highway DD Farmington, MO 63640

Committee Mailing Address, City, State, & Zip

(573) 631-9645

Telephone Number

St. Francois County

County Clerk or Board of Election Commissioners

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

3. Treasurer/Deputy Treasurer Information

Lisa Y. Pratt-Swoboda

Treasurer's Name (First & Last)

525 N. Jefferson St. Farmington, MO 63640

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

(573) 218-9575

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)

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

Dep. Treasurer's Home Telephone Number

Dep. Treasurer's Work Telephone Number

4. Additional Committee Information

Laura Byron-Chair

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

5737 Highway DD Farmington, MO 63640

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

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 punishable under Ch. 575 RSMo.

Lisa Y. Pratt-Swoboda
 Committee Treasurer

Candidate (Candidate Committees Only)