



Statement of Committee Organization

1. Statement Information

Date: 12/22/2016
Type: [X] New [] Amended (if amending, enter MEC ID C/161416 & section changed)

2. Committee Information

Missourians for Worker Freedom
Name of Committee
7509 NW Tiffany Springs Parkway, Suite 300, Kansas City, Missouri 64153 (816) 584-9393
Telephone Number

Official Committee Email Address
County Clerk or Board of Election Commissioners
Committee Type: [X] Campaign [] Candidate [] Continuing (PAC) [] Debt Service [] Exploratory [] Political Party

3. Treasurer/Deputy Treasurer Information

James C. Thomas III
Treasurer's Name (First & Last)
7509 NW Tiffany Springs Parkway, Suite 300, Kansas City, Missouri 64153
Treasurer's Mailing Address, City, State, & Zip
Treasurer's Email Address (optional)
(816) 584-9393
Treasurer's Home Telephone Number
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) [X] 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)

Initiative Petition 2018-092 and 2018-102 and other initiative petitions banning right-to-work and/or government union reform
Name of Ballot Measure
2018, Statewide
Oppose
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.

[Signature] Committee Treasurer
Candidate (Candidate Committees Only)