



Office Use **JUL 08 2019**

Statement of Committee Organization

1. Statement Information

Date: 6/19/19
 Type: New Amended (if amending, enter MEC ID C190895 & section changed _____)

2. Committee Information

BOLD PAC

Name of Committee
6850 E Iris Meadow Lane, Rogersville, MO 65742 (417) 827-8256
Telephone Number

Official Committee Email Address _____
 County Clerk or Board of Election Commissioners Shane Schoeller

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

3. Treasurer/Deputy Treasurer Information

Miles Ross

Treasurer's Name (First & Last) _____
6850 E Iris Meadow Lane, Rogersville, MO 65742
Treasurer's Mailing Address, City, State, & Zip (417) 827-8256
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)

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.

[Signature]
 Committee Treasurer _____ Candidate (Candidate Committees Only) _____