

## **MISSOURI ETHICS COMMISSION**

### INSIDE THIS ISSUE:

Introduction	3
Election Packets	4
Cover Letter & Instructions (AOB \$1 million or under)	5
Cover Letter & Instructions (AOB over \$1 million)	7
Prior to Opening Date	9
Ordinance	9
Personal Financial Disclosure Calendar	10
During Candidate Filing	11
Notice to Candidate	12
Financial Disclosure Statement for Political Subdivisions (PFD Short Form)	13
Personal Financial Disclosure Statement (PFD Long Form)	15
Other resources	19
E-filing Instructions	20
After Closing Date	21
Candidate List	21
Track Your Filers & Miscellaneous	22
Bonus - Campaign Finance	23
Training & Resources	28
Notes/Stay Informed	30

Information about the Missouri Ethics Commission, including forms, publications & other resources, can be found on the Commission's website at <u>www.mec.mo.gov.</u>

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This booklet is intended only as a guide to aid understanding of the Missouri Ethics Laws. For the Law's complete requirements, consult the law itself codified in Chapters 105 & 130 of the Revised Statutes of Missouri.

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## INTRODUCTION

### INTRODUCTION

This booklet provides quick access to the forms used and required by political subdivisions in connection with candidate filing. All of these documents and forms are available on our website (www.mec.mo.gov), and most of this information can be electronically filed in lieu of paper filing, which we strongly recommend. For the most updated versions of any of our forms or resources, always consult our website.

#### MEET OUR DEPARTMENT

Many of you may already be acquainted with our department staff either over the phone, by email, or in person. Anytime you have questions, always feel free to contact us.

Betsy Byers Juanita Mummert	Director of Business Services Trainer
Betty Lohmann	Personal Financial Disclosure
Glenda Elliott	Campaign Finance (Candidate & Campaign Committees)
Sherry Watts	Campaign Finance (PACS & Political Party Committees) & Lobbyists
Contact Us:	800-392-8660 573-751-2020 helpdesk@mec.mo.gov

### Election Packets

In the fall of each year, Missouri Ethics Commission (MEC) sends election packets containing information related to Personal Financial Disclosure (PFD) requirements to subdivisions in preparation for the next year's upcoming elections. The packets are different for subdivisions that indicated they have an annual operating budget (AOB) of \$1 million or under versus those that indicated their AOB as over \$1 million. The mailings include a cover letter to the election authority with instructions and materials:

<b>Required Forms</b> to be given to candidate	AOB \$1 million or under	AOB over \$1 million
Guide to Ethics Laws (annually)	✓	✓
Notice to Candidate	✓	✓
Personal Financial Disclosure form w/ instructions for e-filing		*
Additional Resources included for in- formational purposes for candidate		
"Paid for By" Brochure	✓	✓
When to Form & Register a Committee Brochure		✓
Training Flyer		✓
MoDOT Flyer	✓	✓

Upon receipt and certainly prior to the opening date for candidate filing, the election authority should read and review the letter and contents to check for understanding and quantity according to the number of candidates anticipated.

#### COVER LETTER & INSTRUCTIONS AOB \$1 MILLION OR UNDER



Missouri Ethics Commission (MEC) P.O. Box 1370, Jefferson City MO 65102 www.mec.mo.gov Ph (573) 751-2020 / (800) 392-8660 Fax (573) 526-4506

James Klahr Executive Director

October, 2014

Dear Election Official:

Enclosed please find Candidate Election Packet handouts along with an Election Official Checklist (on back) for the 2015 upcoming Missouri elections. Please review both upon receipt and discard any remaining documents you may have from previous year's election packets. Contact our office if you have any questions, concerns or need additional copies.

Our records indicate that your Annual Operating Budget (AOB) was reported as being 51 million or under; therefore, none of your candidates will be required to file a Personal Financial Disclosure (PFD) statement. However, you are still required to complete a *Notice to Candidate* form for each candidate and we strongly recommend that you give the candidate a copy of their completed form. You must retain the original completed form in your election files.

Read below for further instructions and required actions. If you are not the election official, please forward this information, including enclosures, to the appropriate person. Thank you.

Missouri Ethics Commission

#### INSTRUCTIONS

Notice to Candidate form

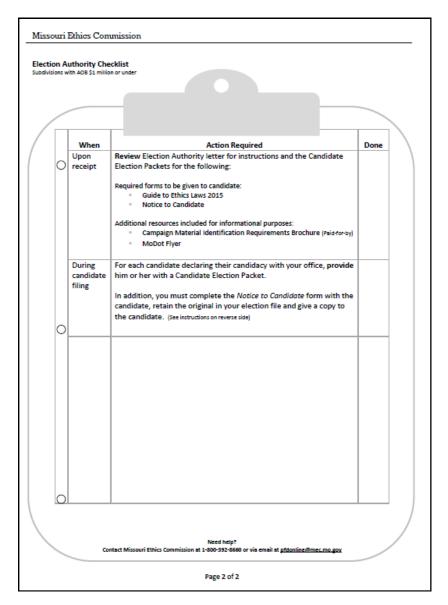
Part One: Candidate Information

- Part Two: Filing Status
  - Under Option A, select Box #1
  - Proceed to Part Three on the form
- Part Three: Acknowledgement
  - Give each candidate a Guide to Ethics Law 2015-A Plain English Summary
  - Have candidate print their name, initial, sign, and date the form in the presence of election official who must also sign as witness. (Email address is optional but preferred to send communications.)
  - Give candidate a copy of the completed Notice to Candidate form and retain original in your election files. Do
    not return a copy to the MEC.

Checklist on back

Page 1 of 2

#### COVER LETTER & INSTRUCTIONS (BACK PAGE) AOB \$1 MILLION OR UNDER



#### <u>Cover Letter & Instructions</u> AOB Over \$1 Million



Missouri Ethics Commission (MEC) P.O. Box 1370, Jefferson City MO 65102 www.mec.mo.gov Ph (573) 751-2020 / (800) 392-8660 Fax (573) 826-4506

James Klahr Executive Director

October, 2014

Dear Election Official:

Enclosed please find Candidate Election Packet handouts along with an Election Official Checklist (on back) for the 2015 upcoming Missouri elections. Please review both upon receipt and discard any remaining documents you may have from previous year's election packets. Contact our office if you have any questions, concerns or need additional copies.

You are required to complete a Notice to Candidate form for each candidate and we strongly recommend that you give the candidate a copy of their completed form. You must retain the original completed form in your election files. Once the filing period has ended you must notify us, within 48 hours, whether or not you have any candidates that are required to file a Personal Financial Disclosure (PFD) statement and if so, you must provide additional information for each. You may file this information electronically by logging in to the Political Subdivision E-Filing system or by sending a completed Candidate List form (found on our website) to our office.

Read below for further instructions and required actions. If you are not the election official, please forward this information, including enclosures, to the appropriate person. Thank you.

Missouri Ethics Commission

#### INSTRUCTIONS

Notice to Candidate form Part One: Candidate Information Part Two: Filing Status

art Two: Filing Status

- Complete Option A or Option B
  - If select option B, complete both Sections 1 & 2
  - For section 2, insert the 14-day and 21-day after close of filing deadlines specific to the election
- If candidate is required to file PFD, give candidate the appropriate blank PFD form (including instructions to e-file)

Part Three: Acknowledgement

- Give each candidate a Guide to Ethics Law 2015-A Plain English Summary
- Have candidate print their name, initial, sign, and date the form in the presence of election official who must also sign as witness. (Email address is optional but preferred to send communications.)
- Give candidate a copy of the completed Notice to Candidate form and retain original in your election files. Do
  not return a Copy to the MEC. (In the event it becomes necessary to dispulify a candidate for failure to file a PFD as
  required by law, the court may require the election authority to produce the original signed Notice to Candidate form.)

#### Candidate List form

Within 48 hours of the closing date of filing, indicate electronically whether you have or don't have any candidates required to file a PFD. For candidates required to file, submit their name, position, mailing address (email address optional).

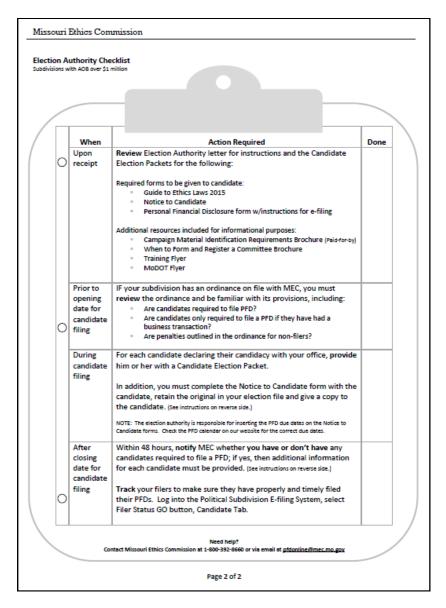
- E-file Instructions: 1. Go to our website at www.mec.mo.gov;
  - 2. Log into the Political Subdivision E-Filing system (use your subdivision's log-in information).
  - 3. Update subdivision contact information (if necessary).
  - 4. Select "Candidate List" button and follow instructions on the screen.

NOTE: If unable to submit electronically, may file on paper by completing the form on our website and either mailing, faxing or hand-delivering the completed form to MEC.

Checklist on back

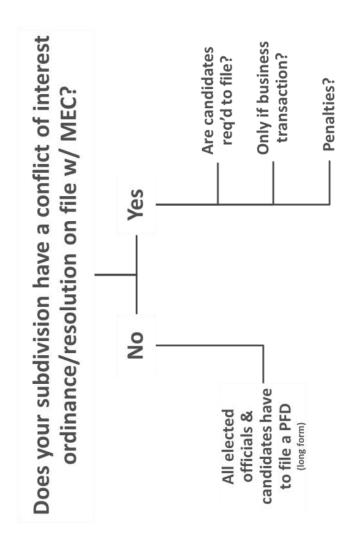
Page 1 of 2

#### COVER LETTER & INSTRUCTIONS (BACK PAGE) AOB OVER \$1 MILLION



## PRIOR TO OPENING DATE

### Conflict of Interest Ordinance AOB Over \$1 Million



## PRIOR TO OPENING DATE

#### REVIEW PERSONAL FINANCIAL DISCLOSURE Reporting dates Calendar

2014-2 Individuals require	015 PERSONAL d to file a Personal Finar are required to	2014-2015 PERSONAL FINANCIAL DISCLOSURE REPORTING DATES ats required to file a Personal Financial Disclosure Statement who are not candidates, newly appointed or newly are required to file after January 1, 2015 and no later than May 1, 2015	2014-2015 PERSONAL FINANCIAL DISCLOSURE REPORTING DATES are required to file a Personal Financial Disclosure Statement who are not candidates, newly appointed or newly employed are required to file after January 1, 2015 and no later than May 1, 2015
	Personal Fins	Personal Financial Disclosure Filing Deadlines for Candidates	for Candidates
STATUTORY ELECTION DATES	CLOSING DATE OF FILING FOR CANDIDACY	PERSONAL FINANCIAL DISCLOSURE STATEMENT FILING DEADLINE <sup>*</sup> (14 DAYS FROM THE CLOSING DATE OF FILING FOR CANDIDACY)	PERSONAL FINANCIAL DISCLOSURE STATEMENT FILING DEADLINE** (21 DAYS FROM THE CLOSING DATE OF FILING FOR CANDIDACY)
February 3, 2015	November 18, 2014	December 2, 2014	December 9, 2014
March 3, 2015 (see charter)	December 16, 2014	December 30, 2014	January 6, 2015
April 7, 2015	January 20, 2015	February 3, 2015	February 10, 2015
August 4, 2015	May 19, 2015	June 2, 2015	June 9, 2015
November 3, 2015	August 18, 2015***	September 1, 2015	September 8, 2015
*FAILURE TO FILE BY FOURT **FAILURE TO FILE BY TWEN Personal Financial Disclosure staten website at <u>www.mec.mo.gov</u> . Perso prior to the report deadline to be cor finely. Section 105.487 (4) RSMo.	E BY FOURTEEN DAY I LE BY TWENTY-ONE D. LE BY TWENTY-ONE D. Sclosure statements may be- mo.gov. Personal Financial dline to be considered time! 87 (4) RSMo.	*FAILURE TO FILE BY FOURTEEN DAY DEADLINE SHALL RESULT IN A LATE FILING FEE OF \$10 PER DAY **FAILURE TO FILE BY TWENTY-ONE DAY DEADLINE SHALL RESULT IN REMOVAL FROM THE BALLOT Personal Financial Disclosure statements may be obtained from your local election authority or by visiting the Missouri Ethics Commission website at <u>www.mec.mo.gov</u> . Personal Financial Disclosure Statements filed by mail MUST be postmarked no later than midnight of the d prior to the report deadline to be considered timely filed. Reports hand delivered on the deadline must be received by 5:00 p.m. to be consid timely. Section 105.487 (4) RSMo.	*FAILURE TO FILE BY FOURTEEN DAY DEADLINE SHALL RESULT IN A LATE FILING FEE OF \$10 PER DAY **FAILURE TO FILE BY TWENTY-ONE DAY DEADLINE SHALL RESULT IN REMOVAL FROM THE BALLOT Personal Financial Disclosure statements may be obtained from your local election authority or by visiting the Missouri Ethics Commission website at <u>www.mec.mo.gov</u> . Personal Financial Disclosure Statements filed by mail MUST be postmarked no later than midnight of the day prior to the report deadline to be considered timely filed. Reports hand delivered on the deadline must be received by 5:00 p.m. to be considered timely. Section 105.487 (4) RSMo.
*** Close of filing fo	r jurisdictions authorized	*** Close of filing for jurisdictions authorized to elect directors in November, such as 911 & Emergency Services directors.	1 & Emergency Services directors.

#### FOR EACH CANDIDATE DECLARING THEIR CANDIDACY WITH YOUR OFFICE, YOU MUST DO THE FOLLOWING:

#### 1. Accept Candidate Declaration form

**Remember**...A person cannot file for office until he or she or the treasurer of the existing candidate committee has filed all required campaign disclosure reports for all prior elections (§130.071.2 RSMo.)

#### 2. Complete Notice to Candidate form

- A. Follow instructions found on cover letter &/or on the form. (The election authority is responsible for inserting the PFD due dates on the form. Check the PFD calendar for the correct due dates specific to the election.)
- B. Retain original notice in your election files

Do not return a copy to MEC (in the event it becomes necessary to disqualify a candidate for failure to file a PFD as required by law, the court may require the election authority to produce the original signed form)

### 3. Give candidate a Candidate Election Packet including:

- A. *Guide to Ethics Law—A Plain English Summary* for the current election year
- B. Copy of completed Notice to Candidate form
- C. PFD form & e-filing instructions (if the candidate is required to file a PFD)
- C. Remaining informational brochures and flyers

### NOTICE TO CANDIDATE

Not	ouri Ethics Commission (MEC) i <b>ice to Candidate</b> mal Financial Disclosure (PFD) (aka: Fi	nancial Interest State	ment)
Part One: Candida	ate Information		
Candidate's Name:		Political Subdivision:	
Office Sought:		Date of Election:	
Part Two: Filing S	tatus (Election Official: Select Option A	or B. If select Option B,	complete Sections 1 & 2)
1. The po 2. The po file with candida	te does not have to file a PFD/Financial II litical subdivision's annual operating budg litical subdivision's AOB is over 51 million th MEC that does not require a candidate thas had a business transaction with the subdivis fice sought is committeeman or committe	et (AOB) is \$1 million or and the subdivision has running for this position on, refer to Option B, Section	under. a conflict of interest ordinance on (office sought) to file. (NOTE: ir
Option B. Candida	te must file a PFD/Financial Interest State	ment with MEC becaus	e:
on file OR 2) : interes twelve 2 The po ordina 3 Candid	litical subdivision has an AOB over \$1 mill with the MEC that specifically 1) requires requires a candidate (including spouse, chile t) that has had a business transaction with months to file pursuant to §105.485.4(1) litical subdivision has an AOB over \$1 mill ance on file with the MEC and the candida late is a new Associate Circuit Judge Candi	a candidate running for ren, parents, or a business the political subdivision RSMo. ion and the subdivision te is required to file pur: late (all other judicial cand	r this position (office sought) to file, in which they owned a substantial in excess of \$500 in the preceding does NOT have a conflict of interest suant to §105.483-§105.492 RSMo. lidates file with the Supreme Court).
1. If PFD/Fin	didates required to file must be informed nancial Interest Statement is not filed by Candidate will be assessed a minimum o	-	(14 days after filing closing date);
	ancial Interest Statement is not filed by	date and his/her name	(21 days after filing closing date); will be removed from the ballot.
1. And the above	subdivision has a conflict of interest ordinancu filing deadlines are not met; penalties (if any) a t also file a copy of his or her PFD with the gov	re assessed by the politica	I subdivision according to its ordinance.
Part Three: Ackno	owledgement (completed by candidate &	witnessed by election	official):
l,		reby acknowledge that	have received:
(Initial) consequent (Initial) Guide to E (Initial) Missouri) al	(httrame) Candidate, (written notice of candidate's obl ces for failure to file on time); and thics Law – A Plain English Summary, (rej d I hereby acknowledge the authority of am filing, in enforcing said laws.	arding laws governing can	didates for election to office in
Signature of Candidat	e	Candidate's Email Add	ress (Optional)
Signature of Election	Official (Witness)	Date	09/2014

# PFD SHORT FORM (FRONT) – Used by those with adopted ordinance & required to disclose business transactions only.

A STATE		cs Commission (MEC) fferson City MO 65102, (800) 392-8	660, www.mec.mo.gov	Office Use:
處		Disclosure Statem		I Subdivisions
-				
1000	tement Information (se			
Тур				
	ng Status & Time Period Filing Status	d Covered (select one & insert time	e period)	
	Annual Filer: file fro Newly Appointed/I Incumbent Candida within 14 days of clos New Candidate: file		e start date, due within 30 day ing date for candidacy (may be osing date for candidacy, due v	γs
1000		rom// to/	/ (mm/dd/yyyy)	75 68 8
File	er Information			
File?	's name (First, Middle, Last)		Spouse's name (First, Middle, Las	at)
Maik	ing address		City, State, 2ip	
Dene	endent child's name" (First, Middle, I	(aut)	Dependent child's name* (First, N	Weidle (ant)
Contra	encent concertainer (Print, Neural, 1		orpandant characteristic press, a	notest, can j
tind	dudes all children, stepchildren, foste instaction Information List the transactions, s	valued at more than \$500, you, you	ng in the person's household and who rec r spouse, or any relative wi	take in excess of 50% of their support from the person.
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# PFD SHORT FORM (FRONT & BACK) – Used by those with adopted ordinance for positions of Chief Administrative Officer & Chief Purchasing Officer.

Lis	mployment st the name and address of e ore during the time period c			e, or dependent child	d(ren) received	d income of \$1,000
	gloyer Name		Employer Address/City/State/Zip		Pengr	's name whom received inco
-	ole Proprietorships		Employer Address/City/State/Zip		Penar	r's name whom received inco
Lis	st each sole proprietorship o atement.	wned by you, your	spouse or dependent cl	hild(ren) during the ti	ime period cov	vered by this
Soli	le Proprietorship Næne		Sale Pro	oprietorship Address/City/State/	ĺΩp	
	le Proprietorship Name		Sala Ba	prietorship Address/City/State/		
	ieneral Partnerships, Joint V	lanturar		the second second second second second	ange -	
Ger	neral Partnership or Joint Venture Name	Address/City/State/Zip	Nature of business	Partner/Coparticipant's N	ame & Address	Party Involved
St	neral Partnership or Joint Venture Name tocks, Bond & Other holding (CEPTION: Interest in any qualified . Limited Partnerships, Clos	plan or annuity pursuant			ISA) is not require	
St	tocks, Bond & Other holding CCEPTION: Interest in any qualified Limited Partnerships, Clos you, your spouse, or dependenting the time period co	s plan or annuity pursuani ely-held Corporatio endent child(ren) ov vered by this staten	t to the Employees Retirement ris: List the name of an vin ten percent (10%) or nent.	at Income Security Act (ER y closely-held corpor more of any class of	ISA) is not require ation/limited ; the outstandi	d to be listed. partnership in whic
St	tocks, Bond & Other holding (CEPTION: Interest in any qualified . Limited Partnerships, Clos you, your spouse, or depe	s plan or annuity pursuani ely-held Corporatio endent child(ren) ov vered by this staten	t to the Employees Retirement ris: List the name of an vin ten percent (10%) or nent.	nt Income Security Act (ER y closely-held corpor	ISA) is not require ation/limited p	d to be listed. partnership in whic
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 $PFD\ LONG\ FORM\ (PG\ 1)$  – Used by those with NO adopted ordinance or with adopted ordinance requiring the long form.

PO Box 1370, Je	ics Commission (MEC) offerson City MO 65102, (80			
Persona	Financial Disc	losure State	ement	
1. Statement Information (s Type: New Amen				
2. Filing Status & Time Perio		cost time period)		
A. Filing Status Annual Filer: file fi Newly Appointed Incumbent Canal within 14 days of cl New Candidate: f	rom Jan 1 to Dec 31 of prior ye /Employed: file for calendar date: file from Jan 1 of prior y osing date for candidacy ile for the 12-month period be	ar (if no longer serving year before start date, ear to closing date for fore the closing date fo	candidacy (may be longer than 12-mo	nth period), due
B. Time Period Covered: F	rom/ to _	//(m	m/dd/yyyy)	
<ol> <li>Filer s Information</li> </ol>				
Filer's name (First, Middle, Last)		Spouw's	ame (First, Middle, Last)	
Mailing address		City/State	/Zp	
Dependent child(ren)'s name* (First, Mi	fdle, Last)	Depender	t child(ren)'s name* (First, Middle, Last)	
Political Subdivision or State Agency	000000000000000000000000000000000000000	Tide (Dec)	ian/Office Seeking)	
Check if spouse is filing sepa			D, this statement MUST disclose his/her in household and who receive in excess of 50% of their	
or more during the time p	eriod covered by this stater	ment.	e or dependent child(ren) received	
Employer Name	Emplo	wer Address/City/State/Zip	Person's name who is	ceived income
Employer Name	Emplo	ayer Address/City/State/Zip	Person's name who re	ceived income
Employer Name	Emplo	ayer Address/City/State/Zip	Person's name who re	ceived income
Employer Name	Emplo	yer Address/City/State/Zip	Person's name who re	ceived income
5. Sole Proprietorships	10.0150		1041 M3702 M0824443	
List each sole proprietorsh statement.	ip owned by you, your spou	ise or dependent chi	ld(ren) during the time period cov	ered by this
Sole Proprietorship Name	H K 6 7 H - C 6 - C 6 - C 6 7 - C	Sale Prop	ietorahip Address/City/State/Zip	
Sole Proprietorship Name		Sale Prop	ietorship Address/City/State/Dp	
	ip and joint venture in whit ered by this statement, and		or dependent child(ren) were a pa ers or co-participants unless such r	
General Partnership or Joint Venture Nar	ne Address/City/State/Zip	Nature of Business	Partner/Coparticipant's Name & Address	Party Involved
General Partnership or Joint Venture Nar	ne Address/City/State/Zip	Nature of Business	Partner/Coparticipant's Name & Address	Party Involved
MO 300-0652 (08/2013)	If additional Form must contain origi	I space is needed, attach separa inal signature, fax fil		Page 1 of

### PFD LONG FORM (PG 2)

	erest in publicly traded corporations	or limited partne			ck exchange o		do not have to repor ation system.
A.	Limited Partnerships, Closely-he you, your spouse, or dependent during the time period covered	child(ren) own	ten percent (				
	Limited Partnership/Closely-held Corporation Na	me Address/City/St	sts/Zip	Nati	ure of Business	Party Involved	
	Umited Partnership/Closely-held Corporation Na	me Address/City/St	ate/Zip	Nati	are of Business	Party Involved	
В.	Publicly Traded Corporation or L which is listed on a regulated st child(ren) own two percent (2% period covered by this statement	ock exchange o ) or more of an	r automated o	uotation syst	em in which	you, your spouse	e or dependent
	Corporation/Limited Partnership Name			Party Involved			
	Corporation/Limited Partnership Name			Party Involved			
	equity interest with a value of m corporation listed on a regulated				overed by th	s statement. If	the entity is a
	Entity Name			Entity Address/Cit	ty/State/Zip		
	Entity Name Iscellaneous Income It the name and address of any so	urce from whic		Entity Address/Ci	6799969211 	en) received \$1.	000 or more durin
List	280/26/2011	ement. If incon	ne is from pub	ouse, or depen licly traded co	ndent child(r rporations o	r limited partner	ships listed on a
List the reg	iscellaneous income t the name and address of any so e time period covered by this state	ement. If incon	ne is from pub system and no	ouse, or depen licly traded co	ndent child(r rporations o	r limited partner	ships listed on a name only.
List the reg Sou	iscellaneous Income t the name and address of any soc e time period covered by this state gulated stock exchange or automa readingme readingme	ement. If incom ted quotation	ne is from pub system and no /0ts/State/Zp	ouse, or depen licly traded co	ndent child(r rporations o	r limited partner his form, list the	ships listed on a name only.
List the reg Sou Re List hav par	Iscellancous Income It the name and address of any sou e time period covered by this state gulated stock exchange or automa readfreame readfreame cal Property tany real property owned by you, ving a fair market value of \$10,000 rtles involved if property was tran bclassifications: Subclass 1 – Resid	ement. If incom ted quotation : Source Address Source Address your spouse, c 0 or more during sferred during	ne is from pub system and no CosySean/Zep CosySean/Zep or dependent of ig the time pea the year cover is 2 – Agricultu	buse, or deper licly traded co t reported els child(ren), loca riod covered b red by this stat	ndent child(r rporations o ewhere on ti ated in Misso ry this staten tement. Miss = – Commerc	r limited partner his form, list the Penar's name who Penar's name who uri, other than p sent. Include na souri law define:	ships listed on a name only. worked income worked income worked income bersonal residence me and address of three eal estate.
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List the reg Sour List hav par sub List	Iscellaneous Income It the name and address of any soo t time period covered by this state gulated stock exchange or automa readingme readingme sal Property t any real property owned by you, ving a fair market value of \$10,000 rtles involved if property was tran bclassifications: Subclass 1 – Resk rtem-County Taxwb-daw Approx. Jay (see	ement. If incon ted quotation : Source Address Source Address your spouse, c 0 or more during dential, Subclas mage, sc bonge, ec) mage, sc bonge, ec)	ne is from pub system and no RoySsaw/Zp or dependent of g the time per the year cover s 2 – Agricultu Major Ingrovini Major Ingrovini vhich you, you	buse, or depen licly traded co t reported els child(ren), locc riod covered b do y this star ral, Subclass 3 mis (Bulding, ec.) mis (Bulding, ec.) ris (Bulding, ec.)	ndent child(r rporations o ewhere on tl ated in Misso y this statem tement. Mis a – Commerc Use of Preperty Use of Preperty	I limited partner his form, list the Penar's new when Penar's new when Penar's new when rent. Include na pient. Include na pient. Include na pient. Include na pient. Include na pient. Seller/Buyer Nerre a Seller/Buyer Nerre a	ships listed on a name only. worked income encoded income encoded income encoded income encoded income and address of Address
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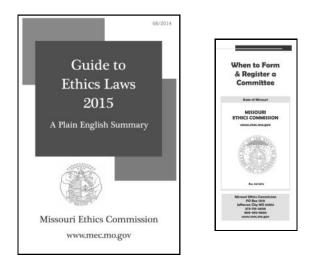
### PFD LONG FORM (PG 3)

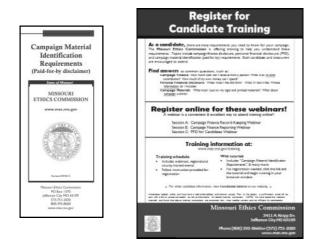
List the name and address of ea						
corporation in which you, your the time period covered by this						
the time period covered by this	statement. Do	not include cho	ren, maternar or :	service orga	anizacions wi	ere no pay was received
Name	Entity Ad	dress/City/State/Zip	Gene	ral Purpose	Party Involved	
Name	Entity Ad	dress/City/State/Zip	Gene	ral Purpose	Party Involved	
Gifts, Honoraria						
List the name and address of an	y source of gift	s or honoraria va	lued at \$200 or r	more receiv	ed by you, yo	our spouse or dependent
child(ren) during the time perio	d covered by th	is statement. De	o not include a g	ift from you	ur spouse, chi	ld(ren), parent, grandpar
grandchild(ren), great grandpa	rent, great gran	dchild(ren), brot	her, sister, aunt,	uncle, niec	e or nephew.	
Donor's Name		Donor's Address/Cit	w/State/Zip		Person's name	who received gift/honoraria
Denor's Name		Donor's Address/Cit	w/State/Zip		Person's name	who received gift/honoraria
Lodging and Travel						
List lodging and travel expenses						
incurred outside Missouri whet						
statement. Do not include exp reimbursed by law, expenses pa						
Chapter 130 RSMo, or expenses						
principal, or officer, director of						
Expenses paid by (name & address)	Party Involved	Date	Amount	Travel location	an	Travel Beason
Expenses paid by (name & address)	arty involved	Dete	Amount	Travel locatio		Travel Beason
Expenses paid by (name & address)	arty Involved	Date	Amount	Travel locato	an	Travel Beason
Trust Assets						
If you, your spouse, or depende						
have been reported elsewhere	on this form, du	iring the time pe	riod covered by	this statem	ent, if they ha	ad not been in the trust.
Trust Assets			Party Involved			
Trust Assets			Party Involved			
Relatives						
List spouse, parent(s), child(ren)	and child(ren)'	s spouse who we	ere employed, du	uring the tir	ne period cov	vered by this statement,
by the State of Missouri, a politi	cal subdivision	or special distric	t, or who were lo	obbyists, or	who were fe	e agents of the Departm
of Revenue.						
Relative's Name		Relationship to filer			Position/Title	
Relative's Name		Relationship to filer			Position/Title	
			1 a la:			
List the name and address of ea			,	-		
committee from which any per- by this statement.	son or corporati	ion listed on this	statement recei	ved payme	nt during the	time period covered
by this statement.						
Committee Name		Committee Address	/City/State/Zip		Person's name	who received payment
Committee Name		Committee Address	hair day a dist			who received payment

### PFD LONG FORM (PG 4)

17. State Tax Credits List any state tax credits of	laimed on the most recent state inc	ome tax return. (Only req	uired to be listed by members	of the
general assembly or any s	state-wide elected public official, the	ir spouse or dependent ch	ild(ren)).	
State Tax Credit Claimed		Person who received credit		
State Tax Credit Claimed		Person who received credit		
18, Signature (select one, sig	zn & date)	Person who receives creat		
further acknowledge t I affirm and attest und my spouse has refused	er penalty of perjury that information that I am aware that any false staten fer penalty of perjury that information d or failed to provide information co erests. I further acknowledge that I 575 RSMo.	nent or declaration made l on and facts in this report, ncerning his or her financi	herein is punishable under Ch , are complete, true, and accur ial interest and that I have no	. 575 RSMo. rate and that working
Filer's Signature (Required)		De	ate (mm/dd/yyyy)	
MO 300-0652 (08/2013)	If additional space is no Form must contain original sign	eded, attach separate sheet. Nature fax filings are not :	arrented	Page 4 of 4
ma 300-0652 (08/2015)	Form must contain original sign	ature, tax mings are not a	accepted.	Fage 4 01 4

#### OTHER RESOURCES INCLUDED IN PACKET





### & MoDOT Flyer

E-FILING INSTRUCTIONS – Attached to the front of each PFD form are instructions for e-filing.

UPDATE: We have a shortcut directly on our home page for filers to submit their PFD E-Filer Account Request.

- 1. Go to our website at www.mec.mo.gov
- 2. Select *PFD E-Filer Account Request* link on left navigation pane under Electronic Filing.
- 3. Complete the required information.
- 4. Submit by selecting Submit Account Information.
- 5. A MEC Online ID and Password will be sent to the email address provided and filer can proceed with filing their PFD online.

# We strongly encourage everyone to e-file their PFD!

### <u>FAQS</u>

WHERE TO FILE? - Candidates are required to file their PFD with MEC & provide a copy to the political subdivision if the subdivision has an ordinance.

DO I HAVE TO FILE TWICE IF I'M A CANDIDATE AND AN ANNUAL FILER? - No, the law only requires a person to file one PFD per year, however, you must file by the earliest deadline applicable and must file the longest form required.

## AFTER CLOSING DATE

CANDIDATE LIST— Within 48 hours of the closing date for candidate filing, notify MEC whether or not you have any candidates required to file a PFD; if you do, then additional information for each candidate must be provided.

Missouri Ethics Com Candidate				TIP: E-file by logging into the Political Subdivision System
Part One: Subdivision Informatio	n			
Subdivision:				
Address:				
City/State/Zip:			Ph	
Contact Name: Part Two: Election Information			Phone:	
Election Date:		(	Closing date for filing:	
Part Three: Filing Status Select the filing status of candidate	s filing for office in Mi	ssouri	:	
No candidates are required t	-			
Candidates are required to fi	le a PFD/Financial Inte	erest S	Statement and have been	listed below:
Candidate Name	Title/Position Indicate if currently serving in a position required to file a PFD	Y/N	Mailing Address	Candidate's Email Address (optional)
Part Four: Signature				
Signature of Authorized Person			Date	
Part Five: Return Form to MEC				
INSTRUCTIONS: After completing t date of filing. Return by mail: PO E				

## AFTER CLOSING DATE

TRACK YOUR FILERS – Track your filers online to make sure they have properly and timely filed their PFD by logging into the Political Subdivision E-filing System and selecting the Filer Status GO button. View by Candidate Filers tab (also Annual Filers tab available).

Political Subdivision Information	Calendar Year: 2014 Logour
Subdivision ID: 5113936 Isanita Training Group 3411 Kingo Drive Hifferion City, MO. 65109 Undate Subdivision Info	Contact Information Juanta Munimert Juanta.nummert@mec.mo.gov (573)751-2020
Information Currently On File For Politice	I Subdivision @
Annual Operating Budget (AOB):	Over \$1 Million
Ordinance, Order, or Resolution:	Not on File
Ordinance, Onder, or Resolution: PFD Annual Filers List:	
Dedinance, Order, or Resolution: PED Annual Filers List: PED Candidate Filers List:	Not on File Not Filed Not filed
Andiumers, Order, or Recolution: PHD Candidate Filens Lint: PHD Candidate Filens Lint: Information To Be Filed By Political Subd Minual Operating Budget (AOB) (dit and Update your AOB	Not on File Not Filed Not filed
Edit and Update your AOB	Not on Fre Not Fled Not fled Vision Nual Filers (Fing for 2014 will be evaluable November 15, 2014) PFD annually.

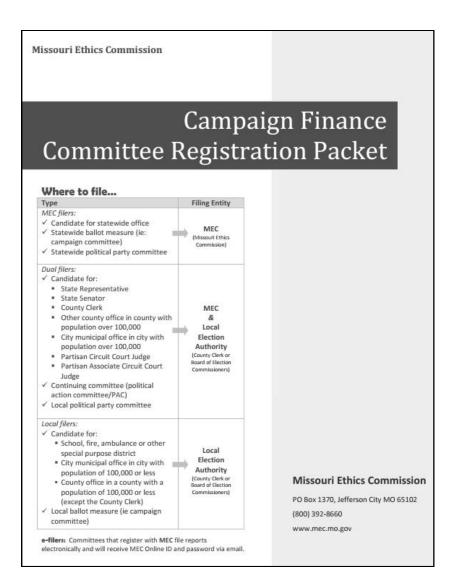
## MISCELLANEOUS

**SPECIAL ELECTIONS** – Notify MEC if your subdivision is holding a special election as soon as possible.

### WRITE-IN CANDIDATES -

- $\Rightarrow$  Name not printed on the ballot
- ⇒ File a *Declaration of Intent* with election authority by
   5 pm on the 2nd Friday before an election
- $\Rightarrow$  Notify MEC of candidates required to file a PFD
- ⇒ PFD due within 14 days of filing deadline (Friday after the election)

# Campaign Finance committee Registration Packet



# CAMPAIGN FINANCE COMMITTEE REGISTRATION PACKET

Missouri Ethics Commission (MEC) PO Box 1370, Jefferson City MO 65102, (800) 392-86		e:
Statement of Committee Or	ganization	
Statement Information		
Date:		
Type: New Amended (if amending, enter MEC ID	& section changed	
Committee Information		
Name of Committee		
	( )	
Committee Malling Address, City, State, & Zip	Telephone N	umber
Official Committee Email Address	County Clerk or Board of Election Commissioners	
Committee Type: Campaign Candidate Continuing	(PAC) Debt Service Exploratory	Political Party
Treasurer/Deputy Treasurer Information		
Treasurer's Name (First & Last)	Treasurer's Email Address (optional)	
Treasurer's Mating Address, City, State, & Zip	( ) Treasurer's Home Telephone Number ( )	Vork 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. Treasure	er's Work Telephone Number
Additional Committee Information		
Additional Committee Officer's Name & Title (If any)	Additional Committee Officer's Mailing Address, City, State,	& Zip
Connected Organization's Name ()f any)	Connected Organization's Mailing Address, City, State, & Zip	8
CANDIDATES: Do you have more than one candidate committee		lo
Official Bank Account Information (required by all committee	1.	
Name & Malking Address, City, State, & Zip of Financial Institution	Account Name Account Num	
Candidate Supported or Opposed (candidate committees mus		Der
candidate supported or Opposed (candidate committees mus	( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )	
Name & Mailing Address, City, State & Zip of Candidate	Telephone Number (Candidate Committees Only)	
Election Date Office Sought & Political Subdivision	Political Party Support or D	
		ppose
Ballot Measure Supported or Opposed (campaign committees	must complete this section)	
Name of Ballot Measure	Election Date & Political Subdivision Support or O	
Signature(s) Check certification(s) & sign (required by all cor		
I affirm and attest under penalty of perjury that information further acknowledge that I am aware that any false statement of		
Committee Treasurer	Candidate (Candidate Committees Only)	

# Campaign Finance committee Registration Packet

#### Statement of Committee Organization Instructions:

#### Used to report information for registering a new committee or to amend information for an existing committee.

#### 1. Statement Information:

- a. Enter date.
- b. Enter type of statement being filed. (If amending, complete section 1 (MEC ID # and section changed) and section 2 and then the section(s) being amended.)

#### 2. Committee Information:

- a. Enter full name of the committee (candidate committee must include candidate's last name).
- b. Enter committee's mailing address and telephone number.
- c. Enter committee's official email address and enter the county (or board of election commissioners) in which the committee is domiciled.
- Select type of committee. Continuing committees (political action committees/PACs) are committees of continuing existence. Campaign committees are formed to support or oppose issues for only one election. Candidate committees are formed for candidates for elective office.
- Treasurer/Deputy Treasurer Information: (Every committee must have a treasurer who is a resident of Missouri. Candidates forming candidate committees may appoint themselves as treasurer and act as a committee of one.)
  - Enter full name of treasurer and provide email address. (Email address is optional, but is used for communication from MEC.)
  - b. Enter treasurer's mailing address and telephone numbers (home and work, may also enter cell).
  - c. Enter full name of deputy treasurer (if one appointed) and their email address (optional).
  - d. Enter deputy treasurer's mailing address & telephone numbers (home and work, may also enter cell).

#### 4. Additional Committee Information:

- a. Enter full name of any additional committee officer (if any) along with their title and mailing address.
- b. Enter any organization's name considered to be connected to the committee (if any) and their mailing address.
- c. CANDIDATES: If the candidate for which this committee is formed has more than one candidate committee (may only have one per office sought), disclose on an attached sheet, the full committee name and address together with name, address and telephone number of the treasurer and designate the aggregating committee.

5. Bank Account Information: (Every committee is required to open an official bank account, in the name of the

- committee, in a state or federal chartered institution within the State of Missouri) a. Enter name and mailing address of financial institution where bank account is held.
  - a. Enter name and mailing address of financial institution where bank account
  - Enter account name and account number for the official bank account.

#### 6. Candidate Supported or Opposed:

- a. Enter name and address of candidate this committee is being organized for along with candidate's telephone number.
- Enter election date, office sought and political subdivision, political party and indicate if committee is supporting or opposing candidate.

#### 7. Ballot Measure Supported or Opposed:

a. Enter name of ballot measure, the election date and political subdivision and indicate if committee is supporting or opposing the ballot measure.

#### 8. Signature(s):

- a. Check the certification box.
- b. Treasurer's signature is required for all committees.
- c. Candidate's signature also required for candidate, debt service & exploratory committees.

If additional space is needed, attach separate sheet. Email: <u>helpdesk@mec.mo.gov</u>

Page 2 of 3

MO 300-1308 Packet (Rev 11/2014)

# CAMPAIGN FINANCE COMMITTEE REGISTRATION PACKET

PO Box 1370, Jefferson City MO 65102, (800) 392-8660, FAX 573-526-4506, www.mec.mo.gov Electronic Filing Agreement		
1) D	mplete this form and return to MEC (along with Statement of Committee Organization) if you are a: ual filer who must file with MEC & local election authority; or a ccal filer who wishes to file electronically with MEC instead of on paper with the local election author	
	nt Information	
Date:		
MEC ID:	(if known)	
	e Information	
iame of Comm	ftee	
Official Commit	tee Email Address (this address is used for communication from MEC and is part of your log-in to the campaign linance electronic (filing system)	
Electronic	Filing Agreement	
	mmittee agrees to file all future campaign finance reports using the Missouri Ethics Commis	sion
	the difference company interference	
IN AFRICE .		dia a
(MEC) e	lectronic filing system and understands that after the Commission receives this agreement	the
commit	tee will no longer be required to file a paper format copy of its' campaign finance reports w	
commit	영화 것은 그러운 것은 것이 같은 것은 것은 것은 것 같아. 이것 같은 것이 같은 것이라. 것은	
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#### **CAMPAIGN FINANCE REMINDERS -**

Form & register a **candidate committee** if total activity is over \$1,000\*

Review paid-for-by requirements for campaign materials

Use Deadlines & Reminders specific to election date

\*Over \$500 for exempt candidates

## TRAINING & RESOURCES

Visit the **training page on our website** to view our training and webinar schedule, web tutorials and more. Topics include campaign finance, conflict of interest, personal financial disclosure, lobbying and more.

See our **Guide to Training & Resources** for more information about the types of training/presentations offered or call use at 800-392-8660 or 573-751-2020, we would be glad to talk to you about speaking at your event.

www.mec.mo.gov/Training

#### TUTORIALS, FAQS, Deadlines & Reminders & more on our website! www.mec.mo.gov

## TRAINING & RESOURCES

### MEC PUBLICATIONS

#### Guide to Ethics Laws (annually)

#### **Campaign Finance**

- A Guide to Record-Keeping
- After Election Requirements & Debt Service Committee
- Campaign Committees
- Campaign Materials Identification Requirements (Paid for by)
- Contribution Uses & Legal Fees
- Exempt Candidates
- Fund-Raising Event Held
- Guide to Continuing committees (PACS)
- Hot Topics in Campaign Finance
- Statement of Limited Activity Requirements
- Terminating a Committee
- Treasurer's Guide for Campaign finance
- When to Form & Register a Committee

#### **Personal Financial Disclosure**

- Guide to Personal Financial Disclosure
- Year at a Glance

#### **Conflict of Interest**

- Conflict of Interest Guide
- Relationship Chart

## NOTES


## NOTES

## STAY INFORMED...



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## **MISSOURI ETHICS COMMISSION**

#### **COMMISSIONERS**

#### CHARLES E. WEEDMAN

Chair Republican 4th Congressional District Term expires March 15, 2016

#### JOHN MUNICH

Vice Chair Democrat 2nd Congressional District Term expires March 15, 2016

#### WILLIAM STOLTZ

Republican 8th Congressional District Term expires March 15, 2016

#### **BILL DEEKEN**

Republican 3rd Congressional District Term expires March 15, 2018

#### NANCY HAGAN

Democrat 7th Congressional District Term expires March 15, 2018

Democrat \_\_\_ Congressional District Term expires March 15, 2018

## CONTACT INFORMATION

## STAFF CONTACTS

James Klahr	Executive Director
Stacey Heislen	Assistant Director
Betsy Byers	Director of Business Services Campaign Finance
Elizabeth (Liz) Ziegler	General Counsel

## MISSOURI ETHICS COMMISSION

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Fax:	573-526-4506
Website:	www.mec.mo.gov
Help Desk:	helpdesk@mec.mo.gov
Twitter:	Follow us @MOEthics