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FEC

STATEMENT OF ORGANIZATION

RECEIVED 7

2012 SEP 26 AM 9: 27

NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	E CONTRILL OF THE
Missouri Federa	tion of Women's	Democratic Cl	ubs	
ADDRESS (number and street)	3040 South W	oodland Drive		
(Check if address is changed)	Joplin		MO	64804 - 8070
	c	CITY	STATE	ZIP CODE
COMMITTEE'S E-MAIL ADDRES	SS (Please provide only one e-r	mail address)		
(Check if address	ınsbçowen@gı	majl.com		
is changed)				
COMMITTEE'S WEB PAGE ADI	DRESS (URL)			
(Check if address			ــــــــــــــــــــــــــــــــــــــ	
نات is changed)				
2. DATE 09" '10" '2012"				
3. FEC IDENTIFICATION NU	JMBER C			
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		·
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.				
Type or Print Name of Treasurer Mrs. N. Sue Cowen				
Signature of Treasurer	Jus N. Sue	Cowen	Date Ö9	" ′ 20° ′ 20′12
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.				
Office Use Only		For further information c Federal Election Commissi Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)

	FEC Fo	rm 1 (Revised 02/2009)	Page 2
. TYP	E OF C	OMMITTEE	
Cai	ndidate	c Committee:	
(a)	Ц	This committee is a principal campaign committee. (Complete the candidate information below	·.)
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Con information below.)	mplete the candidate
	ne of didate		
	didate y Affiliati	Office Sought: House Senate President	State District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
	ne of didate		
Par	ty Con	nmittee:	(Damagatia
(d)		(National, State This committee is a or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Pol	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is a
(3)	Ш	Corporation Corporation Wo Capital Stock	_
			Labor Organization
		Mumbership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	\boxtimes	This committee supports/opposes more than one Federal candidate, and is NOT a separate scommittee. (i.e., nonconnected committee)	segregated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joir	nt Fund	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, at least one of which is an authorized committee of a federal candidate	
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.		
	2.	FEC ID number C	
	3.	FEC ID number C	
	4.		•

	1111111111		11111111111
			<u> </u>
		111111	
	Mailing Address		
<u>o</u>			
ίν Ö			
0		CITY	STATE
20308	Relationship: Connecte	d Organization Affiliated Committee	Joint Fundraising Representative Le
~	7. Custodian of Records: Ide books and records.	ntify by name, address (phone number op	otional) and position of the person in po
	Full Name Mrs. I	V. Sue Cowen	
	Mailing Address	3040 South Woodland Dr	ive
		Joplin,	MO 6480
	Title or Position	CITY	STATE
	Treasurer		Telephone number [417,] - [5

FEC Form 1 (Revised 02/2009)

Write or Type Committee Nan Missouri Federa	 ation of Women's Demo	ocratic Clubs	
•	Organization, Affiliated Committee, Joint		e, or Leadership PAC Sponsor
	<u> </u>		<u> </u>
			111111
Mailing Address			
· ·			
	CITY	STATE	ZIP CODE
Relationship: Connect	ed Organization Affiliated Committee	Joint Fundraising Represer	stative Leadership PAC Sponsor
 Custodian of Records: Ide books and records. 	entify by name, address (phone number o	optional) and position of the	person in possession of committee
Full Name Mrs.	N. Sue Cowen		
Mailing Address	3040 South Woodland D	rive	
			
	Joplin,	MO	648048070
Title or Position	СПҮ	STATE	ZIP CODE
Treasurer		Telephone number	17, - [529, - 2428
8. Treasurer: List the name a any designated agent (e.g.,	and address (phone number optional) of the assistant treasurer).	ne treasurer of the committee	e; and the name and address of
Full Name of Treasurer	N. Sue Cowen		
Mailing Address	3040 South Woodland D	rive	
	Joplin city	STATE	64804 8070
Title or Position		Telephone number	117, - [529, - [2428

Page 3

CITY

FEC Form 1 (Re	evised 02/2009)	Page 4
Full Name of Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position	Telephone number	
safety deposit boxes or Name of Bank, Deposite	ory, etc.	its funds, holds accounts, rents
เบร	Bank, , , , , , , , , , , , , , , , , , ,	
Mailing Address	[PO]Box 8	
	Joplin, MO	6480 2 ,
	CITY STATE	ZIP CODE
Name of Bank, Deposit	ory, etc.	
ــــا		
Mailing Address		

STATE

ZIP CODE

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USPS Priority Mail	Postmarked		
Delivery Confirmation [™] or Signature	Confirmation [™] Label		
USPS Express Mail	Postmarked		
Postmark Illegible			
No Postmark			
Overnight Delivery Service (Specify):	Shipping Date		
Next B	Business Day Delivery		
Received from House Records & Registration Office	Date of Receipt e		
Received from Senate Public Records Office	Date of Receipt		
Received from Electronic Filing Office	Date of Receipt		
Other (Specify):	te of Receipt or Postmarked		
(My)	9/1/11		
PREPARER	DATE PREPARED		

(3/2005)