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FEC FORM 1	STATEMENT OF ORGANIZATION	<small>Office Use Only</small>
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1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

Pierce For President

ADDRESS (number and street) 711 East Jack Street

(Check if address is changed) Salem Mo 65560

CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address) (Check if address is changed) davispierce661@yahoo.com

COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed)

2. DATE 05 / 6 / 2016

3. FEC IDENTIFICATION NUMBER 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 Judy Pierce

Signature of Treasurer Judy Pierce Date 05 / 06 / 2016

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.

UNIVERSITY MICROFILMS INTERNATIONAL