

**FEC  
FORM 1****STATEMENT OF  
ORGANIZATION**

Office Use Only

1. NAME OF COMMITTEE (in full) ☐ (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

Sam Graves Leadership Fund

ADDRESS (number and street)

2345 Grand, 18th Floor

☐ (Check if address is changed)

Kansas City

CITY ▲

MO

STATE ▲

64108

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☐ (Check if address is changed)

jpbradshaw@lathropgage.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐ (Check if address is changed)

2. DATE

MM / DD / YYYY  
01 / 28 / 2019

3. FEC IDENTIFICATION NUMBER ►

C C00694992

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 Bradshaw, Jean, Paul, , II

Signature of Treasurer

Bradshaw, Jean, Paul, , II

[Electronically Filed]

Date

MM / DD / YYYY  
01 / 28 / 2019

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  
OnlyFor further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100**FEC FORM 1**  
(Revised 06/2012)

## 5. TYPE OF COMMITTEE

**Candidate Committee:**

- (a) ☐ 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. (Complete the candidate information below.)

Name of Candidate

Candidate  
Party AffiliationOffice  
Sought:

House

Senate

President

State

District

- (c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of  
Candidate**Party Committee:**

- (d) ☐ This committee is a  (National, State or subordinate) committee of the  (Democratic, Republican, etc.) Party.

**Political Action Committee (PAC):**

- (e) ☐ This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
- ☐ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization
- ☐ Membership Organization ☐ Trade Association ☐ Cooperative
- ☐ In addition, this committee is a Lobbyist/Registrant PAC.
- (f) ☐ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
- ☐ In addition, this committee is a Lobbyist/Registrant PAC.
- ☐ In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

**Joint Fundraising Representative:**

- (g) ☒ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political 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 two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

## Committees Participating in Joint Fundraiser

- |    |                            |               |   |           |
|----|----------------------------|---------------|---|-----------|
| 1. | RODNEY FOR CONGRESS        | FEC ID number | C | C00521948 |
| 2. | GARRET GRAVES FOR CONGRESS | FEC ID number | C | C00558486 |
| 3. | MEADOWS FOR CONGRESS       | FEC ID number | C | C00503094 |
| 4. | CRAWFORD FOR CONGRESS      | FEC ID number | C | C00462374 |

Write or Type Committee Name

**Sam Graves Leadership Fund****6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor**

NONE

Mailing Address

CITY

STATE

ZIP CODE

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor**7. Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Bradshaw, Jean, Paul, , II

Mailing Address

2345 Grand, 18th Floor

Kansas City

MO

64108

Title or Position

CITY

STATE

ZIP CODE

Telephone number

816

460

5507

**8. Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).Full Name  
of Treasurer

Bradshaw, Jean, Paul, , II

Mailing Address

2345 Grand, 18th Floor

Kansas City

MO

64108

Title or Position

CITY

STATE

ZIP CODE

Telephone number

816

460

5507

Full Name of  
Designated  
Agent

Bradshaw, Jean, Paul, , II

Mailing Address

2345 Grand, 18th Floor

Kansas City

CITY

MO

STATE

64108

ZIP CODE

Title or Position

Treasurer

Telephone number

816

460

5507

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Country Club Bank, N.A.

Mailing Address

P.O. Box 410889

Kansas City

CITY

MO

STATE

64141

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

5(g) or (h).

**Joint Fundraising Participant:**

1. WESTERMAN FOR CONGRESS
2. GIBBS FOR CONGRESS
- 3.
- 4.

FEC ID number

C C00548180

FEC ID number

C C00466516

FEC ID number

C

FEC ID number

C

6. **Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor**


Mailing Address


Relationship:

CITY ▲

STATE ▲

ZIP CODE ▲

☐

Connected Organization

☐

Affiliated Committee

☐

Joint Fundraising Representative

☐

Leadership PAC Sponsor

8. **Designated Agent:** Identify by name, address (phone number – optional)

Full Name

--

Mailing Address


TITLE OR POSITION ▼

CITY ▲

STATE ▲

ZIP CODE ▲

--

Telephone Number

--

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank,

Depository, etc.

--

Mailing Address


CITY ▲

STATE ▲

ZIP CODE ▲