

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

SEMO DEMOCRAT RALLY COMMITTEE PAC

ADDRESS (number and street) 14283 County Road 468

(Check if address is changed) PO Box 279

Deffen MD 63891-0279

COMMITTEE'S E-MAIL ADDRESS (Check if address is changed) JHoward1936@gmail.com

Optional Second E-Mail Address JHoward@jerryhoward.com

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

2. DATE 07/10/2020

3. FEC IDENTIFICATION NUMBER C00508184

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 Jerry Howard

Signature of Treasurer [Signature] Date 07/10/2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Full Name of Designated Agent

[Empty grid for Full Name of Designated Agent]

Mailing Address

[Empty grid for Mailing Address]

[Empty grid for Mailing Address]

[Empty grid for Mailing Address]

CITY

STATE

ZIP CODE

Title or Position

[Empty grid for Title or Position]

Telephone number

[Empty grid for 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.

FIRST MIDWEST BANK

Mailing Address

819 W. Delta, BUSINESS US 60

[Empty grid for Mailing Address]

Delta, MA 03891

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

FIRST MIDWEST BANK

Mailing Address

819 W BUSINESS US Highway 60

[Empty grid for Mailing Address]

Delta MA 03891

CITY

STATE

ZIP CODE

11-11-2008 10:01:52 AM

5(g) or (h). Joint Fundraising Participant:

1. _____

2. _____

3. _____

4. _____

FEC ID number C

FEC ID number C

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

Jerry T. Howard

Mailing Address

P.O. Box 279

TITLE OR POSITION ▼

Trustee

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone Number

573-281-1172

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 ▲

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SENATOR JERRY HOWARD

P.O. BOX 279

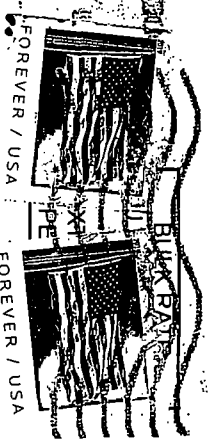
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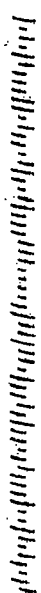
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PREPARER *SPM* 8/19/20
DATE PREPARED