## FEC FORM 2 STATEMENT OF CANDIDACY

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1.	(a) Name of Candidate (in full)						
	Cass, Gerald, D, Mr.,					I	
	(b) Address (number and street) HC 71 Box 414	□ Check if address changed				2. Candidate's FEC Identification Number H6MO08175	
	(c) City, State, and ZIP Code Ava		МО	65608	3	3. Is This New Amended Statement X (N) OR (A)	
4.	Party Affiliation	5. Office Sought			6. State & Dist	trict of Candidate	
	DEMOCRATIC PARTY	House			MO	08	
	DE	SIGNATION O	F PRIN	CIPAL	CAMPAIG		
7.	. I hereby designate the following named political committee as my Principal Campaign Committee for the 2026 (year of election(s).						
	NOTE: This designation should be filed with the appropriate office listed in the instructions.						
	(a) Name of Committee (in full)						
	Jerry Cass for Congress						
	(b) Address (number and street) PO Box 274						
	(c) City, State, and ZIP Code						
	Ava				МО	65608	
(Including Joint Fundraising Representatives) 8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full)							
	(b) Address (number and street)						
	(c) City, State, and ZIP Code						
	I certify that I have exa	mined this Statemen	nt and to th	e best of r	my knowledge a	and belief it is true, correct and complete.	
Signature of Candidate Date							
С	Cass, Gerald, D, ,					06/12/2025	
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.							
						FEC FORM 2 (REV. 02/2009	