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## FEC FORM 2

## STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)									
	Neal, Gist, , ,		L1. 12 1 1			0.0 5141 55011 66 6				
	(b) Address (number and street) PO Box 1130	☐ Check if address changed				2. Candidate's FEC Identification Number H0MO04219				
	(c) City, State, and ZIP Code				_		lew		Amended	
	Lauri		MC	6503		· ·	N) OR	^	(A)	
4.	Party Affiliation REPUBLICAN PARTY	5. Office Soug House	ht		6. State & Dist	rict of Candidate 04				
	REPUBLICAN PARTT	House			IVIO					
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE										
7.	. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 (year of election)									
	NOTE: This designation should be filed with the appropriate office listed in the instructions.									
(a) Name of Committee (in full)  NEAL GIST CAMPAIGN COMMITTEE										
	(b) Address (number and street) PO BOX 1130									
	(c) City, State, and ZIP Code									
	LAURIE				MO	65038				
DESIGNATION OF OTHER AUTHORIZED COMMITTEES  (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 examined this Statement and to the best of my knowledge and belief it is true, correct and complete.										
Signature of Candidate						Date				
G	ist, Neal, , ,			[Elec	tronically Filed]	04/26/2019				
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.										
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FEC FORM 2 (REV. 02/2009)