

FEC
FORM 1

STATEMENT OF
ORGANIZATION

RECEIVED
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Office Use Only

1. NAME OF
COMMITTEE (in full)



(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

MISSOURIANS FOR LYNDE SPENCER

ADDRESS (number and street)

P.O. BOX 1243



(Check if address
is changed)

LOZARK

CITY ▲

MO

STATE ▲

65721

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS



(Check if address
is changed)

ITSABOUTYOU@LYNDESPENCER.COM

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)



(Check if address
is changed)

WWW.LYNDESPENCER.COM

2. DATE

03

23

2016

3. FEC IDENTIFICATION NUMBER ►

C

4. IS THIS STATEMENT

☒ N

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

ALICIA MONSANTO

Signature of Treasurer

Alicia Monsanto

Date

03

23

2016

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.

Office
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Only

For 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 Affiliation

REP

Office
Sought:☒ House☐ Senate☐ President

State

MO

District

07

- (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. _____ FEC ID number C
2. _____ FEC ID number C
3. _____ FEC ID number C
4. _____ FEC ID number C

2016-04-12-03-000622

Write or Type Committee Name

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

TREASURER

Mailing Address

Title or Position

CITY

STATE

ZIP CODE

Telephone number

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

ALICIA MONSANTO

Mailing Address

PO BOX 1243

OZARK

CITY

STATE

ZIP CODE

Title or Position

TREASURER

Telephone number

417-840-3291

Full Name of
Designated
Agent

JESSICA ANN SPENCER

Mailing Address

PO BOX 1243

OZARK

CITY

MO

STATE

65721

ZIP CODE

Title or Position

ASSISTANT TREASURER

Telephone number

417-1860-2808

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.

STATE BANK OF SOUTHWEST MISSOURI

Mailing Address

3310 E SUNSHINE

SPRINGFIELD

CITY

MO

STATE

65808

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

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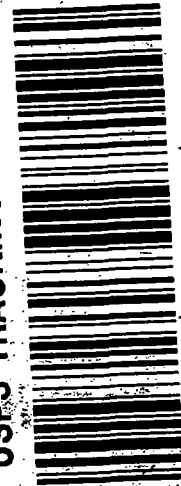
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EP14F July 2013
00-12 E V O E

FROM:

Missourians for Lyndee Spore

P.O. Box 6243

Ozark, MO 65721

TO: Federal Election Commission
999 E Street, NW

Washington, DC 20546

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Federal Election Commission
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PREPARER

4/12/16
DATE PREPARED