

C151179

Missouri Ethics Commission

MAY 21 2021



Missouri Ethics Commission (MEC)

PO Box 1370, Jefferson City MO 65102, Fax: 573-526-4106, helpdesk@mec.mo.gov

Statement of Committee Organization

Received by Fax Use:

1. Statement Information

Date: _____

Type: ☐ New ☐ Amended (if amending, enter MEC ID C151179 & section changed _____)

2. Committee Information

Name of Committee: Friends of Hannah KellyCommittee Mailing Address, City, State, & Zip: P.O. Box 548, Mtn. Grove, Mo. 65711

Committee Mailing Address, City, State, & Zip

Telephone Number: _____

Committee Email Address: _____

County Clerk, Board of Election Commissioners, or Federal PAC/Out of State Committee

Committee Type: ☐ Campaign ☐ Candidate ☐ Continuing (PAC) ☐ Debt Service ☐ Exploratory ☐ Political Party

3. Treasurer/Deputy Treasurer Information

Treasurer's Name (First & Last): Kayla VandiverTreasurer's Mailing Address, City, State, & Zip: 8202 Hwy 22, Mtn. Grove, Mo. 65711

Deputy Treasurer's Name (If one appointed): _____

Treasurer's Email Address (optional): _____

Treasurer's Home Telephone Number: (417) 259-3344

Treasurer's Work Telephone Number: _____

Deputy Treasurer's Mailing Address, City, State, & Zip: _____

Deputy Treasurer's Email Address (optional): _____

Dep. Treasurer's Home Telephone Number: _____

Dep. Treasurer's Work Telephone Number: _____

4. Additional Committee Information

Additional Committee Officer's Name & Title (If any): N/AAdditional Committee Officer's Mailing Address, City, State, & Zip: N/AConnected Organization's Name (If any): N/AConnected Organization's Mailing Address, City, State, & Zip: N/ACANDIDATES: Do you have more than one candidate committee? ☐ Yes (refer to Instructions on back) ☐ No

5. Official Bank Account Information (required by all committees)

Name & Mailing Address, City, State, & Zip of Financial Institution: _____

Account Name: _____

Account Number: _____

6. Candidate Supported or Opposed (candidate committees must include self, if candidate)

Name & Mailing Address, City, State, & Zip of Candidate: Hannah S. KellyElection Date: Aug. 3, 2022Office Sought & Political Subdivision: State Rep. Dist. 141Telephone Number (Candidate Committees Only): 417-257-4529Political Party: RepublicanSupport or Oppose: Support

7. Ballot Measure Supported or Opposed (campaign committees must complete this section)

Name of Ballot Measure: N/AElection Date & Political Subdivision: N/ASupport or Oppose: N/A

8. Signature(s) - Check certification(s) & sign (required by all committees)

☐ I affirm and attest under penalty of perjury that information and facts in this report are complete, true, and accurate. I further acknowledge that I am aware that any false statement or declaration made herein is punishable under Ch. 875 RSMo.

Committee Treasurer: Kayla VandiverCandidate (Candidate Committees Only): Hannah S. Kelly

MO 300-1308

Packet (Rev. 1/2021)

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