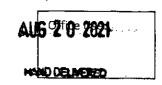


## Missouri Ethics Commission (MEC) PO Box 1370, Jefferson City MO 65102, Fax: 573-526-4506, helpdesk@mec.mo.gov

## **Statement of Committee Organization**



1.	Statement Information  Date: 8-16-2021		
	Type: New Amended (if amending, enter MEC ID	& section ch	anged )
2.	Committee Information		
	Taxpayers for Accountability	<u>, , , , , , , , , , , , , , , , , , , </u>	_ · ; <u> </u>
	Name of Committee 2208 Missouri Blvd. Ste 102 #187, Jefferso	on City, MO 65109	(314) 805 - 3357
	Committee Mailing Address, City, State, & Zip	<i>~~</i>	Telephone Number
	Official Committee Email Address	COLE County Clerk, Board of Election Commission	ers, or Federal PAC/Out of State Committee
	Committee Type: ☐ Campaign ☐ Candidate ☐ Continuing (	PAC) 🗆 Debt Service 🗀 Expl	oratory 🗆 Political Party
3.	Treasurer/Deputy Treasurer Information		
	Sherri Talbott		
	Treasurer's Name (First & Last)	Treasurer's Email Address (optional)	
	6113 Queens Ct, House Springs, MO 63051  Treasurer's Mailling Address, City, State, & Zip	(314)805-3357 Treasurer's Home Telephone Number	Treasurer's Wark Telephone Number
		reasure, 5 frame recoprisite number	Transfer of the state of the st
	Deputy Treasurer's Name (if one appointed)	Deputy Treasurer's Email Address (optional)	
	No. 7. Address Co. France C. T.	()	Con Transport Mark Tribate as Markey
	Deputy Treasurer's Mailing Address, City, State, & Zip	Dep. Treasurer's Hame Telephone Number	Dep. Treasurer's Work Telephone Number
4.	Additional Committee Information		The state of the s
	Additional Committee Officer's Name & Title (if any)	Additional Committee Officer's Mailing Add	roce City Stato & Zin
	Connected Organization's Name (if any)	ENT	reas, entry, states, white
	Connected Organization's Name (if any)	Connected Organization's Mailing Address,	City, State, & Zip
	CANDIDATES: Do you have more than one candidate committee	? 🛘 Yes (refer to instructions on	back) 🗆 No
5.	Official Bank Account Information (required by all committees)		
			f
	warrie & Marifing Address, City, State, & Zip or Financial Institution	2 r	ACCOURT MAINLES
6.	Candidate Supported or Opposed (candidate committees must	include self, if candidate)	了一个点。 第一个点面
	Hard A. W. Andrew Ch. Co. 27 - 45 - 154		
	Name & Mailing Address, City, State & Ztp of Candidate	Telephone Number (Candidate Committees	CONIY)
	Election Date Office Sought & Political Subdivision	Political Party	Support or Oppose
7.	Ballot Measure Supported or Opposed (campaign committees	must complete this section)	A STATE OF THE STA
	Name of Ballot Measure	Election Date & Political Subdivision	Support or Oppose
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 pur	nishable under Ch. 575 RSMo.
	Merry & Talbott	<del>_</del>	
	Completion Transpar	Candidate /Candidate Committees Ooks)	

MO 300-1308 Packet (Rev. 1/2021)