Missouri Ethics Commission (MEC) Po Box 1370, Jefferson City Mo 65102, Fax: 573-526-4506, helpdesk@mec.mo.gov       MO       EfficestCommission         APR 0 4 2022       APR 0 4 2022         Indetement Information Statement of Committee Organization       APR 0 4 2022         Indetement Information Statement of Committee Organization       APR 0 4 2022         Indetement Information Statement of Committee Organization       APR 0 4 2022         Type:       New Managed (if amending, enter MEC ID C180078)       & section changed 6         Committee Information State Advance       Committee Information State Advance       Integration Committee Information State Advance         Committee Information State Advance       Committee Information State Advance       Integrate Advance       Integrate Advance         Committee Information State Advance       Country Ceth, Surd of Breton Candidate Information Advance       Integrate Advance       Integrate Advance         Official Committee Type:       Campaign & Candidate Information Advance       Country Ceth, Surd of Breton Candidate Information Advance       Integrater's Home Telephone Number       Integrater Nume (First & Las)         Treasurer's Nume (First & Las)       Treasurer's Home Telephone Number       Integrater State Advance       Integrater State Advance         Desch Frequeer's Nume (First & Las)       Treasurer's Home Telephone Number       Integrater State Advance Contenee       Integrater State Advance				C180078
PO Box 1370, Jefferson City MO 65102, Fax: \$73-526-4506, helpdesk@mec.mo.gov APR 0 4 2022  APR 0 4 2022 APR 0 4 2022  APR 0 4 2022 APR 0 4 2022 APR 0 4 2022 APR 0 4 2022 APR 0 4 2022 APR 0 4 2022 A	SOUND IT	Missouri Ethics Commission (ME	EC)	MO Forfice Commission
1. Statement Information View Price View View Price View View Price View View Price View View View View View View View Vie				
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Date:       March 5, 2022         Type:       New S Amended (if amending, enter MEC ID C180078	1 Statement la	nformation states and the second states and	r á lithean an mhain. Tí an	lisme va b'erei
Type:       New       Amended (if amending, enter MECID_C18078       & section changed 6         Committee Information				
			0078 & section cha	nged 6
Name of Committee         Committee Mailing Address, City, State, & Zo         Difficial Committee Small Address         Committee Mailing Address, City, State, & Zo         Difficial Committee Email Address         Committee Type:         Campaign         AC Candidate         Control Ciele, Board of Election Commissioners, or Federal PAC/Our of State Committee         Committee Type:         Campaign         AC Candidate         Control Ciele, Board of Election Commissioners, or Federal PAC/Our of State Committee         Committee Type:         Campaign         AC Candidate         Control Ciele, Board of Election Commissioners, or Federal PAC/Our of State Committee         Committee Type:         Campaign         Candidate         Control Ciele, Board of Election Commissioners, or Federal PAC/Our of State Committee         Tressurer's Name [Field & Last)         Tressurer's Name [Field & Cammittee Number         Tressurer's Name [Field & Last)         Deputy Tressurer's Mailing Address, City, State, & Zip         Deputy Tressurer's Mailing Address, City, State, & Zip         Additional Committee Officer's Name & Trie (if	2. Eciminittee l	nformation		A Contraction of the second
Committee Mailing Address, City, State, & Zo	Committe	ee to Elect Wiley Price IV		
Difficial Committee Enail Address       County Clerk, Sourd of Election Commissioners, or Federal PAC/Out of State Committee         Committee Type:       Campaign & Candidate   Continuing (PAC)   Debt Service   Exploratory   Political Party         Inteasurer/Deputy Inteasurer Information       Inteasurer's Mailing Address, City, State, & Zip         Treasurer's Mailing Address, City, State, & Zip       Treasurer's Home Fleiphone Number         Deputy Treasurer's Mailing Address, City, State, & Zip       Deputy Treasurer's Home Telephone Number         Deputy Treasurer's Mailing Address, City, State, & Zip       Deputy Treasurer's Home Telephone Number         Deputy Treasurer's Mailing Address, City, State, & Zip       Deputy Treasurer's Home Telephone Number         Additional Committee Officer's Name (if any)       Additional Committee Officer's Mailing Address, City, State, & Zip         Additional Committee Officer'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         Official Bank Account Information (required by all Committee?)       Yes (refer to instructions on back)   No         Official Bank Account Information (required by all Committee?)       Yes (refer to instructions on back)   No         Official Bank Account Information (required by all Committee?)       Yes (refer to instructions on back)   No         Official Bank Account Information (required by all Committee?) <td>Name of Committee</td> <td></td> <td></td> <td></td>	Name of Committee			
Committee Type:       Campaign (Candidate Continuing (PAC) Debt Service Exploratory Political Party         3.       Treasurer/Deputy Treasurer Information         Treasurer's Name (First & Last)       Image: Continuing (PAC)         Deputy Treasurer's Name (I one appointed)       Deputy Treasurer's Home Telephone Number         Deputy Treasurer's Name (I one appointed)       Deputy Treasurer's Home Telephone Number         Additional Committee Officer's Name & Title (I'any)       Additional Committee Officer's Name & Title (I'any)         Additional Committee Officer's Name & Title (I'any)       Connected Organization's Mailing Address, City, State, & Zip         Cannected Organization's Name (if any)       Connected Organization's Mailing Address, City, State, & Zip         Cannected Organization's Name (if any)       Connected Organization's Mailing Address, City, State, & Zip         Cannected Organization's Name (if any)       Connected Organization's Mailing Address, City, State, & Zip         Name & Mailing Address, City, State, & Zip of Financial Institution       Account Name       Account Name         Name & Mailing Address, City, State, & Zip of Financial Institution	Committee Mailing	Address, City, State, & Zip	,	() Telephane Number
Committee Type:       Campaign (Candidate Continuing (PAC) Debt Service Exploratory Political Party         3.       Treasurer/Deputy Treasurer Information         Treasurer's Name (First & Last)       Image: Continuing (PAC)         Deputy Treasurer's Name (I one appointed)       Deputy Treasurer's Home Telephone Number         Deputy Treasurer's Name (I one appointed)       Deputy Treasurer's Home Telephone Number         Additional Committee Officer's Name & Title (I'any)       Additional Committee Officer's Name & Title (I'any)         Additional Committee Officer's Name & Title (I'any)       Connected Organization's Mailing Address, City, State, & Zip         Cannected Organization's Name (if any)       Connected Organization's Mailing Address, City, State, & Zip         Cannected Organization's Name (if any)       Connected Organization's Mailing Address, City, State, & Zip         Cannected Organization's Name (if any)       Connected Organization's Mailing Address, City, State, & Zip         Name & Mailing Address, City, State, & Zip of Financial Institution       Account Name       Account Name         Name & Mailing Address, City, State, & Zip of Financial Institution		······································		
Treasurer's Name (First & Last)       Treasurer's Email Address (optional)         Image:				pratory LI Political Party
Treasurer's Mailing Address, City, State, & Zip       Treasurer's Home Telephone Number       Treasurer's Work Telephone Number         Deputy Treasurer's Mailing Address, City, State, & Zip       Deputy Treasurer's Email Address (optional)	3. <u>Incosinerio</u>	eputy measurer mormation statistics and		Real Control of the second
Deputy Treasurer's Name (if one appointed)       Deputy Treasurer's Email Address (optional)         Deputy Treasurer's Mailing Address, City, State, & Zip       Deputy Treasurer's Home Telephone Number         Additional Committee Information       Deputy Treasurer's Home Telephone Number         Additional Committee Officer's Name & Title (if any)       Additional Committee Officer's Mailing Address, Front Comment         Cannected 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         Official Bank Account Information (required by all committees)       Account Name       Account Number	Treasurer's Name [Fi	irst & Last)	Treasurer's Email Address (optional)	······································
Deputy Treasurer's Name (if one appointed)       Deputy Treasurer's Email Address (optional)         Deputy Treasurer's Mailing Address, City, State, & Zip       Deputy Treasurer's Home Telephone Number         Additional Committee Information       Deputy Treasurer's Home Telephone Number         Additional Committee Officer's Name & Title (if any)       Additional Committee Officer's Mailing Address, Front Comment         Cannected 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         Official Bank Account Information (required by all committees)       Account Name       Account Number			()	()
Deputy Treasurer's Mailing Address, City, State, & Zip	Treasurer's Mailing A	Address, City, State, & Zip	Treasurer's Home Telephone Number	Treasurer's Work Telephone Number
Additional Committee Information         Additional Committee Officer's Name & Trite (if any)         Additional Committee Officer's Maine & Trite (if any)         Cannected Organization's Name (if any)         Cannected Organization's Name (if any)         CANDIDATES: Do you have more than one candidate committee?         Yes (refer to instructions on back)         No         Official Bank Account Information (required by all committees)         Name & Mailing Address, City, State, & Zip of Financial Institution         Account Name         Account Number         Candidate Supported or Opposed (candidate committees must include self, if candidate)	Deputy Treasurer's N	Name (if one appointed)	Deputy Treasurer's Email Address (optional)	<u></u>
Additional Committee Information         Additional Committee Officer's Name & Trite (if any)         Additional Committee Officer's Mailing Address, City, State, & Zip         Cannected Organization's Name (if any)         Cannected Organization's Name (if any)         CANDIDATES: Do you have more than one candidate committee?         Yes (refer to instructions on back)         No         Official Bank Account Information (required by all committees)         Name & Mailing Address, City, State, & Zip of Financial Institution         Account Name         Account Name			()	()
Additional Committee Officer's Name & Title (if any)       Additional Committee Officer's Mailing Address, Figurate & Comment         Cannected 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         Official Bank Account Information (required by all committees)       Account Name       Account Number         Mame & Mailing Address, City, State, & Zip of Financial Institution       Account Name       Account Number         Candidate Supported or Opposed (candidate committees must include self, if candidate)       Cont All posed posed (candidate committees must include self, if candidate)	Deputy Treasurer's N	Mailing Address, City, State, & Zip	Dep. Treasurer's Home Telephone Number	Dep. Treasurer's Work Telephone Number
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         Official Bank Account Information (required by all committees)       Account Name       Account Number         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)       Account Number	4 Additional C	ommittee Information	Contract Contractor	
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         Official Bank Account Information (required by all committees)       Account Name       Account Number         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)       Account Number			3	
CANDIDATES: Do you have more than one candidate committee? Official Bank Account Information (required by all committees)          Name & Mailing Address, City, State, & Zip of Financial Institution       Account Name       Account Name         Candidate Supported or Opposed (candidate committees must include self, if candidate)       Account Name	Additional Committe	ee Officer's Name & Title (if any)	Additional Committee Officer's Mailing Addri	nendment
5. Official Bank Account Information (required by all committees)         Name & Mailing Address, City, State, & Zip of Financial Institution         Account Name         6. Candidate Supported or Opposed (candidate committees must include self, if candidate)	Connected Organiza	tion's Name (if any)	Connected Organization's Mailing Address, C	ity, State, & Zip
Name & Mailing Address, City, State, & Zip of Financial Institution     Account Name     Account Number       5.     Candidate Supported or Opposed (candidate committees must include self, if candidate)     Account Number				pack) 🗌 No
Candidate Supported or Opposed (candidate committees must include self, if candidate)	5. Official Bank	Account Information (required by all committees)		
Candidate Supported or Opposed (candidate committees must include self, if candidate)		······································		<u> </u>
	-			Account Number
Wiley Price IV, 551 Kingsland Ave, PO BOX 300155, Saint Louis, MO 63130       (314) 266-9843       ()         Name & Mailing Address, City, State & Zip of Candidate       Telephone Number (Candidate Committees Only)				Qnly)
August 2, 2022 State Representative of the 84th District Democrat	August 2, 202			<u></u>
Election Date Office Sought & Political Subdivision Political Party Support or Oppose	-			Support or Oppose
7. Ballot Measure Supported or Opposed (campaign committees must complete this section)	7. Ballot Measu	ure Supported or Opposed (campaign committees r	nust complete this section)	
Name of Ballot Measure Election Date & Political Subdivision Support or Oppose	Norma of Pallet Man	7. FA	Flaction Date & Political Subdivision	
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. 575 RSMo.		· · · · · ·		-
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Committee Treasurer Candidate (Candidate Committees Only)		***	/ / / L' W ]	
MO 300-1308 V Page 1 of 3 Packet (Rev. 1/2021)	Committee Treasure	er	Candidate (Candidate Committees Only)	· · · · · · · · · · · · · · · · · · ·