

MISSOURI ETHICS COMMISSION STATEMENT OF COMMITTEE ORGANIZATION

MEC ID# 009/314

OFFICE USE OF	NLY Y
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A STATE OF THE PROPERTY OF THE				PHM
06/16/2008	1. TYPE OF STATEMENT (CHE	ECK ONE) IF AMENDED 2.	•	HANGED (LINE NULIBERS)
3. FULL NAME OF COMMITTEE CONLA	LITTEE TO ELE	CT ANTHO	IN BELL	
4. COMMITTEE MAILING ADDRESS		5.	TELEPHONE NUM	
ADDRESS: 3012 BAILEY AVE		-	(3/4)531-5	5784
CITY/STATE/ZIP: SAINT LOUI	S, MO 63107			
6. TREASURER'S NAME GLENDA J. HAYNES				
7. TREASURER'S MAILING ADDRESS	1 Ann 4	8.	TELEPHONE NUM	BER 3 7 /: 12.
ADDRESS: 3012 BAILEY A	WE APIN	, HC	HOME: (3/4) 795-3267	
CITY/STATE/ZIP: SALAUT LOS			ORK:	
9. DEPUTY TREASURER'S NAME CHECK IF NO DEPUTY TREASURER 10 DEPUTY.TREASURER'S ADDRESS ADDRESS: 11. TELEPHONE NUMBER 10 DEPUTY.TREASURER'S ADDRESS ADDRESS:				
10. DEPUTY TREASURER'S ADDRESS	Migality	Mineral No.	. TELEPHONE NUM	BER
ADDRESS:	. \	O SOMO HA	OME:	·
CITY / STATE / ZIP:	MILL / JUNE	· · · · · · · · · · · · · · · · · · ·	ORK:	
12. OTHER COMMITTEE OFFICERS (IF ANY) A. NAME B. AC	, , _ ,	TILE 43		S OTHER COMMITTEES, IS DESIGNATED AS THE
0. AL	; \ 0.1		AGGREGATING CO	
!	! \	·	YES	□ NO ⊠N/A
14. OFFICIAL FUND DEPOSITORY: CHECKING	ACCOUNT FIRST, THEN ANY	SAVINGS ACCOUNT(S)	
A NAME & ADDRESS OF BANK, SAVINGS & L	OAN, OR CREDIT UNION	B. ACCOUNT NAME		C. ACCOUNT NO.
COMMERCE BANK		MHITTEE TO	GECT	·
4401 NATURAL BRIDGE AV	5 A	NTHONY BELL	_	
ST LOUIS, MO 63115	!			
	<u> </u>			
15. TYPE OF COMMITTEE CANDIDATE POLITICAL PARTY	CONTINUING	CAMPAIGN	EXPLORATORY	DEBT SERVICE
16. CANDIDATE SUPPORTED (CANDIDATE CO	MMITTEES ONLY)	<u> </u>		POLITICAL
A. NAME ANTHONY BELL B. ADDRESS 3012 BAILEY AVE C. TELEPHONE NO. D. PARTY				
, , , , , , , , , , , , , , , , , , , ,		i <i>(</i> ક્ર	4)531-5784	DEMOCRAT
17. CONNECTED ORGANIZATION (IF ANY) (CONTINUING COMMITTEES ONLY)				
A. NAME		B. ADDRESS		
18. CANDIDATES SUPPORTED OR OPPOSED CHECK ONE				
	CTION DATE C. OFFICE SI 5/08 STATE REPRE	OUGHT 0. PC	DLITICAL SUBDIVISION	N E. SUPPORT P. OPPOSE
ANTHONY BELL 108/09	5/08 STATE KEPKE	PVT	61SI DIST	
	O[e DO	₽* →	(a) (b)	
19. BALLOT MEASURE(S) SUPPORTED OR OP	POSED			CHECK ONE
A. NAME(S) OF MEASURE(S)	B. ELECTION DATE	C. SUBJECT AND P	OLITICAL SUBDIVISIO	N D. SUPPORT E. OPPOSE
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20. TREASURER'S STATEMENT (ALL COMMITTEES) [21. CAP	VOIDATE'S STATEME	NT (CANDIDATE & EXPL	ORATORY COMMITTEES)
I CERTIFY THAT THIS STATEMENT IS COMPLETE, TRUE AND				
ACCURATE.	ACC	AUTONIC.		
Would bloom of Ull 13000				
THE MAN TO THE TOTAL OF THE TOT				
MO 300 1308 (3-04)	 	CANDIDATES SIGN	ATURE	CO-1 & 2