



**MISSOURI ETHICS COMMISSION
STATEMENT OF COMMITTEE ORGANIZATION**

MEC ID # C000332

OFFICE USE ONLY
[Handwritten initials]

STATEMENT DATE <u>07-31-09</u>	1. TYPE OF STATEMENT (CHECK ONE) <input type="checkbox"/> NEW <input checked="" type="checkbox"/> AMENDED	IF AMENDED, LIST ITEMS CHANGED (LINE NUMBERS) <u>2. 18B, 18C, 18D</u>
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3. FULL NAME OF COMMITTEE
CITIZENS FOR ORTMANN

4. COMMITTEE MAILING ADDRESS ADDRESS: CITY / STATE / ZIP :	5. TELEPHONE NUMBER
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6. TREASURER'S NAME

7. TREASURER'S MAILING ADDRESS ADDRESS: CITY / STATE / ZIP :	8. TELEPHONE NUMBER HOME: WORK:
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9. DEPUTY TREASURER'S NAME CHECK IF NO DEPUTY TREASURER

10. DEPUTY TREASURER'S ADDRESS ADDRESS: CITY / STATE / ZIP :	11. TELEPHONE NUMBER HOME: WORK:
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12. OTHER COMMITTEE OFFICERS (IF ANY) A. NAME B. ADDRESS C. TITLE	13. IF CANDIDATE HAS OTHER COMMITTEES, IS THIS COMMITTEE DESIGNATED AS THE AGGREGATING COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
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14. OFFICIAL FUND DEPOSITORY: CHECKING ACCOUNT FIRST, THEN ANY SAVINGS ACCOUNT(S)

A. NAME & ADDRESS OF BANK, SAVINGS & LOAN, OR CREDIT UNION	B. ACCOUNT NAME	C. ACCOUNT NO.
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15. TYPE OF COMMITTEE

CANDIDATE POLITICAL PARTY CONTINUING CAMPAIGN EXPLORATORY DEBT SERVICE

16. CANDIDATE SUPPORTED (CANDIDATE COMMITTEES ONLY)

A. NAME	B. ADDRESS	C. TELEPHONE NO.	D. POLITICAL PARTY
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17. CONNECTED ORGANIZATION (IF ANY) (CONTINUING COMMITTEES ONLY)

A. NAME	B. ADDRESS
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18. CANDIDATES SUPPORTED OR OPPOSED

A. NAME(S) OF CANDIDATE(S)	B. ELECTION DATE	C. OFFICE SOUGHT	D. POLITICAL SUBDIVISION	E. SUPPORT	F. OPPOSE
<u>KENNETH A. ORTMANN</u>	<u>03/05/2013</u>	<u>ALDERMAN</u>	<u>9TH WARD ST. LOUIS CITY</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

19. BALLOT MEASURE(S) SUPPORTED OR OPPOSED

A. NAME(S) OF MEASURE(S)	B. ELECTION DATE	C. SUBJECT AND POLITICAL SUBDIVISION	D. SUPPORT	E. OPPOSE
<u>INDEPENDENT</u>			<input type="checkbox"/>	<input type="checkbox"/>

20. TREASURER'S STATEMENT (ALL COMMITTEES)

I CERTIFY THAT THIS STATEMENT IS COMPLETE, TRUE AND ACCURATE.

[Signature]
TREASURER'S SIGNATURE

21. CANDIDATE'S STATEMENT (CANDIDATE & EXPLORATORY COMMITTEES)

I CERTIFY THAT THIS STATEMENT IS COMPLETE, TRUE AND ACCURATE.

[Signature]
CANDIDATE'S SIGNATURE