

Missouri Ethics Commission (MEC)
PO Box 1370, Jefferson City MO 65102, (800) 392-8660, www.mec.mo.gov

Office Use:	Mo
BB	سعل/

## **Statement of Committee Organization**

1.	Statement Information  Date: 12/14/2011					
	Type: New Amended (if amending, enter MEC ID C101	1283	& section cha	nged 2 and	16	
2.	Committee Information					
	PENNY HUBBARD FOR STATE REPRESENTA	DISTRICT				
	Name of Committee  1017 North 16th Street			,314 ,58	8-9342	
	Committee Mailing Address, City, State, & Zip		A	Telephone Number		
	St. Louis, MO 63106					
	Official Committee Email Address	County Clerk or Board o	f Election Commission	ers		
	Committee Type: Campaign Candidate Debt Service	Exploratory	Political Ac	tion (PAC)	Political Party	
2	Treasurer/Deputy Treasurer Information					
٥.						
	Treasurer's Name (First & Last)	Treasurer's Email Addre	ss (ontional)			
	, , , , , , , , , , , , , , , , , , ,		,	,		
	Treasurer's Mailing Address, City, State, & Zip	Treasurer's Home Telep	hone Number	Treasurer's Work 7	elephone Number	
	Treasurer's fronting rodices, early search a rip	reasons, s monte recept	nore rumber	Treasurer S Train 1		
	Deputy Treasurer's Name (if one appointed)	Deputy Treasurer's Ema	il Address (antional)			
	populy rigosului s resine (ii one appointee)	Deputy Treasurer's time	Address (optional)			
	Deputy Treasurer's Mailing Address, City, State, & Zip	Dep. Treasurer's Home 1	Talankas a Niverbas	()	took Tolonkova Museka	
	Deputy Treasurer's Maining Address, City, State, & Zip	Dep. Heastier's notice a	elephone number	Dep. Heastier's W	ork Telephone Number	
4.	Additional Committee Information					
	Additional Committee Office as Name & Mitte (Land)	Additional Committee Of	ficer's Mailing Address	, City, State, & Zip		
	Connected Organization's Name (If any)	Connected Organization	s Mailing Address, City	, State, & Zip		
	CAMPIDATES B					
_	CANDIDATES: Do you have more than one candidate committee?	Yes (refer to in	structions on ba	ck) INO		
٥.	Official Bank Account Information (required by all committees)					
	Name & Malling Address, City, State, & Zip of Financial Institution	Account Name		Account Number		
5	Candidate Supported or Opposed (candidate committees must in	aduals colf if ann	امغدامنا	Addison Suns		
٠.	candidate Supported of Opposed (candidate continuetees higher)	icidue sen, n can	uidate)			
	Name & Malling Address, City, State & Zip of Candidate	()	ed a constitution of the	()		
	' State Representative District 78	Telephone Number (Cand	iloate Committees One	<b>(</b> )		
		Pallistad Dark				
	Election Date Office Sought & Political Subdivision	Political Party	3	upport or Oppose		
7.	Ballot Measure Supported or Opposed (campaign committees mu	ist complete this	section)			
•						
	Name of Ballot Measure	Election Date & Political S	Subdivision S	upport or Oppose	.6	
.	Signature(s) Check certification(s) & sign (required by all commi	ttoes				
· !	I // We certify that this statement is complete, true and accurate.  I e-Filers: This committee is required by law to file with the MEC and will file all future campaign finance reports using the MEC's electronic filling system  Manual Automatical Property of Candidate (Candidate Committees Only)					
	I/We certify that this statement is complete, true and accurate.	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		· _	C. 101	
	e-Filers: This committee is required by law to file with the MEC a	and will tile all fut	ure campaign f /	inance repor	ts using the	
	iviec's electronic ming/system	(x)	W ~u		Ø.c.	
	Manus Gather	Henny	Jullas	X/	ST ST	
i	Committee Transcurer	Candidate (Candidate Con	mittees Only)	1 26		