



Statement of Committee Organization

1. Statement Information

Date: July 14
 Type: New Amended (if amending, enter MEC ID C141374 & section changed 6)

2. Committee Information

Friends for Jennifer Florida
 Name of Committee
3873 Hartford Street, St. Louis MO 63116
 Committee Mailing Address, City, State, & Zip
314 229-8904
 Telephone Number
St. Louis City
 County Clerk or Board of Election Commissioners
 Official Committee Email Address
 Committee Type: Campaign Candidate Continuing (PAC) Debt Service Exploratory Political Party

3. Treasurer/Deputy Treasurer Information

Sharon Oatis
 Treasurer's Name (First & Last)
3729 Oak Hill Street, St. Louis, MO 63116
 Treasurer's Mailing Address, City, State, & Zip
 Treasurer's Email Address (optional)
314 960-1393
 Treasurer's Home Telephone Number
 Treasurer's Work Telephone Number
 Deputy Treasurer's Name (if one appointed)
 Deputy Treasurer's Email Address (optional)
 Deputy Treasurer's Mailing Address, City, State, & Zip
 Dep. Treasurer's Home Telephone Number
 Dep. Treasurer's Work Telephone Number

4. Additional Committee Information

AMENDMENT
 Additional Committee Officer's Name & Title (if any)
 Additional Committee Officer's Mailing Address, City, State, & Zip
 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)

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)

Jennifer Florida, 3873 Hartford, STL, MO 63116
314 229-8904
 Name & Mailing Address, City, State & Zip of Candidate
 Telephone Number (Candidate Committees Only)
Nov 4, 2014
 Election Date
Recorder of Deeds, STL
 Office Sought & Political Subdivision
Independent Democrat
 Political Party
Jennifer Florida
 Support or Oppose

7. Ballot Measure Supported or Opposed (campaign committees must complete this section)

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 punishable under Ch. 575 RSMo.

Sharon Oatis
 Committee Treasurer
Jennifer Florida
 Candidate (Candidate Committees Only)