

Missouri Ethics Commission (MEC)

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

Office Use: Bb

Statement of Committee Organization

1.	Statement Information		
	Date: Sep 17, 2014		
	Type: New Amended (if amending, enter MEC ID <u>C14154</u> & section changed		
2.	2. Committee Information		
	Committee To Elect Natalie Wowell		
	3300 Miami Street #JW	STL MO 6318	(314) 467-0127
		Bood of Election	No Commission
	Official Committee critish Addition .	County Clerk or Board of Election Commission	oners
	Committee Type: Campaign Candidate Continuing	PAC) Debt Service Expl	oratory Political Party
3.	Treasurer/Deputy Treasurer Information		
	Erik Shelquist		
	Treasurer's Name (First & Last)	Treasurer's Email Address (optional)	
	5157 Cates Ave StiMo 63108 Treasurer's Mailing Address, City, State, & Zip	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		
4.	Additional Committee Information		
	Additional Committee Officer's Name & Title (if any)	Additional Committee Officer's Mailing Addr	ess, City, State, & Zip
	Connected Organization's Name (if any)	Connected Organization's Mailing Address, C	ity, State, & Zip
	CANDIDATES: Do you have more than one candidate committee	? 🔲 Yes (refer to instructions on l	oack) 💟 No
5.	Official Bank Account information (required by all committees)	at V _{iii}	
6.	Candidate Supported or Opposed (candidate committees must	include self, if candidate)	
	3300 Mani St. #1W SIL MO (03/18)	(314) 467-0121 Telephone Number (Candidate Committees C	
	Name & Mailing Address, City, State & Zip of Candidate Stake Representative	Telephone Number (Candidate Committees C	Sugarch
	Election Date Office Sought & Political Subdivision	Political Party	Support or Oppose
7.	Ballot Measure Supported or Opposed (campaign committees in	nust complete this section)	The second secon
	Name of Ballot Measure	Election Date & Political Subdivision	Support or Oppose
8.	Signature(s) Check certification(s) & sign (required by all comm	nittees)	The state of the s
	🔼 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 the S75 RSMo.		
	Eich Shelow	Nath A.	Vorall
	Committee Treasurer P	Candidate (Candidate Committees Only)	7 7 7 7 7

MO 300-1308 Packet (Rev. 07/2013) Form must be completed in full & contain original signature(s), fax filings are not accepted.

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