



# Statement of Committee Organization

## 1. Statement Information

Date: 12-31-2014  
 Type:  New  Amended (if amending, enter MEC ID C000447 & section changed 6)

## 2. Committee Information

Name of Committee: FRIENDS OF GREGORY F.X. DALY  
 Committee Mailing Address, City, State, & Zip: 4473 S. 39th ST., ST. LOUIS, MO 63116  
 Telephone Number: (314) 752-7997  
 Official Committee Email Address: \_\_\_\_\_  
 County Clerk or Board of Election Commissioners: CITY OF ST. LOUIS  
 Committee Type:  Campaign  Candidate  Continuing (PAC)  Debt Service  Exploratory  Political Party

## 3. Treasurer/Deputy Treasurer Information

Treasurer's Name (First & Last): \_\_\_\_\_  
 Treasurer's Email Address (optional): \_\_\_\_\_  
 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

Additional Committee Officer's Name & Title (if any): AMENDMENT  
 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)

<u>GREGORY F.X. DALY, 4127 UPTON ST., ST. LOUIS, MO 63116</u> Name & Mailing Address, City, State & Zip of Candidate	<u>(314) 355-8670</u> Telephone Number (Candidate Committees Only)	<u>(314) 607-2383</u> Telephone Number (Candidate Committees Only)
<u>8-7-2018</u> Election Date	<u>COLLECTOR OF REVENUE CITY OF ST. LOUIS</u> Office Sought & Political Subdivision	<u>DEMOCRAT</u> Political Party
		<u>SUPPORT</u> 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.  
 Committee Treasurer: Norman L. Sutterer  
 Candidate (Candidate Committees Only): Gregory FX Daly