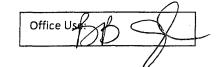


Missouri Ethics Commission (MEC) PO Box 1370, Jefferson City MO 65102, (800) 392-8660, www.mec.mo.gov



Statement of Committee Organization

1.	Statement Information		
	Date: 4/21/2015		
	Type: New Amended (if amending, enter MEC ID C11	1091 & section cha	nged 2, 6
2.	Committee Information		
- Carp	Nicole Galloway for Missouri		
Đ	Name of Committee 115 Crestmere Avenue, Columbia, MO 65203		, 573 ₎ 442-6709
	Committee Mailing Address City State & 7in		Telephone Number
	Unicial Committee Email Address	County Clerk or Board of Election Commission	Province
	Committee Type: Campaign Candidate Continuing (P	PAC) Debt Service Explo	Political Party
3.	Treasurer/Deputy Treasurer Information		the second of th
	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
	Deputy Treasurer's Maining Address, City, State, & Zip	Dep. Treasurer shome releptione Number	Dep. Treasurer's Work Telephone Number
4.	Additional Committee Information		
	ARAFRIDAAFRIT		
	Additional tong nittle d'Oticer's Vaine & little life ny	Additional Committee Officer's Mailing Addre	ss, City, State, & Zip
	Connected Organization's Name (if any)	Connected Organization's Mailing Address, Cit	ty, State, & Zip
	CANDIDATES: Do you have more than one candidate committee?	Yes (refer to instructions on b	ack) No
5.	Official Bank Account Information (required by all committees)		
	en e		•
6.	Candidate Supported or Opposed (candidate committees must	include self if candidate)	
	Nicole Galloway, 115 Crestmere Avenue, Columbia, MO 65203	, 573 , 442-6709	/
	Name & Mailing Address, City, State & Zip of Candidate	Telephone Number (Candidate Committees O	nly)
	8-7-2018 State Auditor	Democrat	Support
	Election Date Office Sought & Political Subdivision	Political Party	Support or Oppose
7.	Ballot Measure Supported or Opposed (campaign committees m	ust complete this section)	
	Sanot Measure Supported of Opposed (campaign committees in	idst complete this section,	
	Name of Ballot Measure	Election Date & Political Subdivision	Support or Oppose
			Tapport or oppose
8.	Signature(s) Check certification(s) & sign (required by all comm	nittees)	
	I affirm and attest under penalty of perjury that information and		
	further acknowledge that I am aware that any false statement or d	leclaration made herein is punis	hable under Ch. 575 RSMo.
	V (augus Klatelin)	And Stan	
	Committee Treasurer	Candidate (Candidate Committees Only)	
MO	300-1308 Form must be completed in full & contain original	inal signature(s) fay filings are	not accepted Page 1 of 2

Packet (Rev. 11/2014)