



FEB 23 2017

Statement of Committee Organization

1. Statement Information

Date: 2-12-2017
 Type: New Amended (if amending, enter MEC ID C171079 & section changed _____)

2. Committee Information

Name of Committee: The Committee To Elect Anthony Bell
 Address: 3012 Bailey Av. 3012-Bailey St. Louis MO 63107 Telephone Number: (314) 795-3267
 Official Committee Email Address: _____
 County Clerk or Board of Election Commissioners: St. Louis City Board Commissioners
 Committee Type: Campaign Candidate Continuing (PAC) Debt Service Exploratory Political Party

3. Treasurer/Deputy Treasurer Information

Treasurer's Name (First & Last): Glanda Haynes Treasurer's Email Address (optional): _____
 Treasurer's Mailing Address, City, State, & Zip: 3012 BAILEY AV. ST. LOUIS MO 63107 Treasurer's Home Telephone Number: (314) 795-3267 Treasurer's Work Telephone Number: (314) 795-3267
 Deputy Treasurer's Name (if one appointed): Anthony Bell Deputy Treasurer's Email Address (optional): _____
 Deputy Treasurer's Mailing Address, City, State, & Zip: 3012 Bailey Av. St. Louis MO 63107 Dep. Treasurer's Home Telephone Number: (314) 795-3267 Dep. Treasurer's Work Telephone Number: (314) 795-3267

4. Additional Committee Information

Additional Committee Officer's Name & Title (if any): NONE 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)

6. Candidate Supported or Opposed (candidate committees must include self, if candidate)

Name & Mailing Address, City, State & Zip of Candidate: Anthony Bell, 3012 Bailey Av St. Louis MO 63107 Telephone Number (Candidate Committees Only): (314) 795-3267
 Election Date: 03-07-2017 Office Sought & Political Subdivision: Alderman-St. Louis MO City of St. Louis Ward 3 Political Party: Democratic Support or Oppose: _____

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

Name of Ballot Measure: _____ Election Date & Political Subdivision: 02-07-2017 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: Glanda J. Haynes Candidate (Candidate Committees Only): Anthony Bell