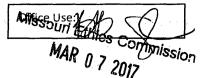


Missouri Ethics Commission (MEC)
PO Box 1370, Jefferson City MO 65102, (800) 392-8660, www.mec.mo.gov

Statement of Committee Organization



Committee Information	d (if amending, enter MEC ID $C1$		hanged 2, 6 6
Mitten for Missouri			
Name of Committee 1615 Hunter Ave, St.	Louis MO 63117		(314)644-0919
Committee Mailing Address, City, State, & Zip			Telephone Number
		St. Louis County	
Official Committee Email Address		County Clerk or Board of Election Commiss	
·	gn 🗏 Candidate 🗌 Continuing	(PAC) ☐ Debt Service ☐ Exp	oloratory L. Political Party
Treasurer/Deputy Treasurer	Information		
Nelson Mitten Treasurer's Name (First & Last)		Treasurer's Email Address (optional)	
1615 Hunter Ave., St.	Louis, MO 63117	, 314 , 644-0919	, 314 , 727 - 0101
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 (optiona	()
Deputy Treasurer's Malling Address, City, State	e, & Zip	Dep. Treasurer's Home Telephone Number	r Dep. Treasurer's Work Telephone Nun
Additional Committee Inform	ation	so the expression of the second second	and the second second second
Additional Committee Officer's Name & Title	if afav)	Additional Committee Officer's Mailing Ad	dress, City, State, & Zip
AWC	VUVIEW		
Connected Organization's Name (if any)		Connected Organization's Mailing Address,	, City, State, & Zip
	ore than one candidate committee		back) 🗏 No
Official Bank Account Informa	ation (required by all committees		,
			and the state of t
Gina Mitten, 1615 Hunte	osed (candidate committees mus or Ave. St. Louis 63117	(314) 644-0919	and the second of the second o
Name & Mailing Address, City, State & Zip of C	<u>`</u>	Telephone Number (Candidate Committees	s Only)
08/07/18 primary; 11/6/18 General	State Rep, HD083	Democrat	Support
lection Date	Office Sought & Political Subdivision	Political Party	Support or Oppose
Ballot Measure Supported or	Opposed (campaign committees	must complete this section)	
lame of Ballot Measure		Election Date & Political Subdivision	Support or Oppose
Signature(s) Check certificat	ion(s) & sign (required by all com	mittees)	