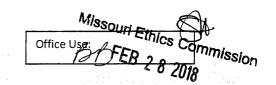


Missouri Ethics Commission (MEC)

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





1.	Statement Information		
1.	Date: 2/20/18		
	Type: New Amended (if amending, enter MEC ID CO	61595 & section cha	anged <u>20305</u>
2.	Committee Information		
	11 th WARD DEMOCRATIC	ORGANIZ	ATTON
	Mr Michigan ST Lows Mo. 6	OR6AN12	(314) 402-8622
		0-1	Telephone Number
	Official Committee Email Address	County Clerk or Board of Election Commission	nels SICOOT CIECIION
	Committee Type: ☐ Campaign ☐ Candidate ☐ Continuing (P.	AC) 🗆 Debt Service 🗆 Explo	oratory
3.	Treasurer/Deputy Treasurer Information		
648	KOBERT DIECKhaus		
	Treasurer's Name (First & Last)	Treasurer's Email Address (op	
	Treasurer's Malling 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		
	A A A P A A P A A P A A P A A A A A A A	And the second s	en en
	Additional Confinittee Officers Name & Title (If any)	Additional Committee Officer's Mailing Addre	ss, City, State, & Zip
	THE TAIL TAIL TAIL	Connected Organization's Mailing Address, Ci	h. Chata P. 7ia
	Connected Organization's Name (if any)		
5	CANDIDATES: Do you have more than one candidate committee? Official Bank Account Information (required by all committees)	☐ Yes (refer to instructions on b	ack) LI No
٠.	omanismos		
6	Candidate Supported or Opposed (candidate committees must in	nclude self if candidate)	
	Candidate supported of Opposed (Candidate Committees must in	A	1
ore,	Name & Mailing Address, City, State & Zip of Candidate	Telephone Number (Candidate Committees O	nly)
	Election Date Office Sought & Political Subdivision	Political Party	Support or Oppose
7.	Ballot Measure Supported or Opposed (campaign committees mu	ust complete this section)	
	Name of Ballot Measure	Election Date & Political Subdivision	Support or Oppose
	Signature(s) Check certification(s) & sign (required by all commi		
	and attest under penalty of perjury that information and		
	further acknowledge that I am aware that any false statement or de	eclaration made herein is punis	mable under Cn. 575 KSIVIO.
	Holoe I " L'uchhous		
	Committee freasurer	Candidate (Candidate Committees Only)	