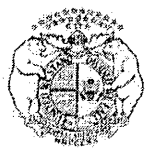


MAR 23 2018

Office Use:
1180495 *[Signature]* *[Signature]*



Missouri Ethics Commission (MEC)
P.O. Box 1370, Jefferson City MO 65102, (800) 392-8660, www.mec.mo.gov
Statement of Committee Organization

1. Statement Information

Date: 03/16/2018
Type: New Amended (if amending, enter MEC ID C180170 & section changed _____)

2. Committee Information

Dottie Bailey for Missouri
Name of Committee
605 Meramec View Eureka, MO 63025
Committee Mailing Address, City, State, & Zip
(636) 751-5131
Telephone Number
Unknown - St Louis City BOE
County Clerk or Board of Election Commissioners
Committee Type: Campaign Candidate Continuing(PAC) Debt Service Exploratory Political Party

3. Treasurer/Deputy Treasurer Information

William Hennessy
Treasurer's Name (First & Last)
818 Legends View Eureka, MO 63025
Treasurer's Mailing Address, City, State, & Zip
(636) 346-1196
Phone 1
Deputy Treasurer's Name (if one appointed)
Deputy Treasurer's Email Address (optional)

Deputy Treasurer's Mailing Address, City, State, & Zip
Phone 1 Phone 2

4. Additional Committee Information

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

Dorothy Bailey 605 Meramec View Eureka, MO 63025
Name & Mailing address, City, State, & Zip of Candidate
(636) 751-5131
Phone 1
08/07/2018
Election Date
State DIST. 110
Office Sought & Political Subdivision
Republican
Political Party

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.
[Signature]
Committee Treasurer
[Signature]
Candidate (Candidate Committees Only)