C151179

Missouri Ethics Commission

Office Use: JUL 08 2019

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: June 25, 2019

Type: ☐ New ☐ Amended (if amending, enter MEC ID C151179 & section changed _____)

2. Committee Information

Friends of Hannah Kelly
Name of Committee

Committee Mailing Address, City, State, & Zip | ( ) Telephone Number

Official Committee Email Address | County Clerk or Board of Election Commissioners

Committee Type: ☒ Campaign ☐ Candidate ☐ Continuing (PAC) ☐ Debt Service ☐ Exploratory ☐ Political Party

3. Treasurer/Deputy Treasurer Information

Kayla Vandiver
Treasurer's Name (First & Last)

Treasurer's Email Address (optional)

8302 Hwy 22 Mtn. Grove, MO 65711
Treasurer's Mailing Address, City, State, & Zip

(417) 926-4842 Treasurer's Home Telephone Number

(417) 259-3344 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

AMENDMENT

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)

Name & Mailing Address, City, State, & Zip of Financial Institution | Account Name | Account Number

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

7015 Cherokee Rd., Norwood, Mo. 65717
Name & Mailing Address, City, State & Zip of Candidate

( ) Telephone Number (Candidate Committees Only)

Election Date | Office Sought & Political Subdivision | 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.

Kayla Vandiver
Committee Treasurer

Hannah S. Kelly 6/25/2019
Candidate (Candidate Committees Only)