



MISSOURI ETHICS COMMISSION
STATEMENT OF COMMITTEE ORGANIZATION

MEC ID # C 101357

OFFICE USE ONLY
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STATEMENT DATE Ma 19, 2010		TYPE OF STATEMENT (CHECK ONE) <input checked="" type="checkbox"/> NEW <input type="checkbox"/> AMENDED		IF AMENDED, LIST ITEMS CHANGED (LINE NUMBERS)	
3. FULL NAME OF COMMITTEE Deb Hermann for Kansas City					
4. COMMITTEE MAILING ADDRESS ADDRESS: P. O. Box 901585 CITY / STATE / ZIP: Kansas City, Missouri 64190-1585				5. TELEPHONE NUMBER 816-880-0811	
6. TREASURER'S NAME					
7. TREASURER'S MAILING ADDRESS ADDRESS: 5312 N. W. 85th Street CITY / STATE / ZIP: Kansas City, Missouri 64154				8. TELEPHONE NUMBER HOME: 816-741-9263 WORK: 816-880-0811	
9. DEPUTY TREASURER'S NAME <input checked="" type="checkbox"/> CHECK IF NO DEPUTY TREASURER					
10. DEPUTY TREASURER'S ADDRESS ADDRESS: CITY / STATE / ZIP:				11. TELEPHONE NUMBER HOME: WORK:	
12. OTHER COMMITTEE OFFICERS (IF ANY) A. NAME B. ADDRESS C. TITLE				13. IF CANDIDATE HAS OTHER COMMITTEES, IS THIS COMMITTEE DESIGNATED AS THE AGGREGATING COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	
14. OFFICIAL FUND DEPOSITORY: CHECKING ACCOUNT FIRST, THEN ANY SAVINGS ACCOUNT(S) A. NAME & ADDRESS OF BANK, SAVING & LOAN, OR CREDIT UNION US Bank 4915 NE Vivion Road Kansas City, Missouri 64119					
B. ACCOUNT NAME Deb Hermann for Kansas City					
C. ACCOUNT NO.					
15. TYPE OF COMMITTEE <input checked="" type="checkbox"/> CANDIDATE <input type="checkbox"/> POLITICAL PARTY <input type="checkbox"/> CONTINUING <input type="checkbox"/> CAMPAIGN <input type="checkbox"/> EXPLORATORY <input type="checkbox"/> DEBT SERVICE					
16. CANDIDATE SUPPORTED (CANDIDATE COMMITTEES ONLY)					
A. NAME Deborah Hermann		B. ADDRESS 7728 NE 51st Ter., Kansas City, MO		C. TELEPHONE NO. 816-916-3841	D. POLITICAL PARTY Not Applicable
17. CONNECTED ORGANIZATION (IF ANY) (CONTINUING COMMITTEES ONLY) A. NAME B. ADDRESS					
18. CANDIDATES SUPPORTED OR OPPOSED A. NAME(S) OF CANDIDATE(S) Deborah Hermann		B. ELECTION DATE 3/22/2011	C. OFFICE SOUGHT Mayor of Kansas City	D. POLITICAL SUBDIVISION Kansas City, MO	CHECK ONE E. SUPPORT <input checked="" type="checkbox"/> F. OPPOSE <input type="checkbox"/>
19. BALLOT MEASURE(S) SUPPORTED OR OPPOSED A. NAME(S) OF MEASURE(S)		B. ELECTION DATE	C. SUBJECT AND POLITICAL SUBDIVISION	CHECK ONE E. SUPPORT <input type="checkbox"/> F. OPPOSE <input type="checkbox"/>	
20. COMMITTEE TREASURER'S SIGNATURE I CERTIFY THAT THIS STATEMENT IS COMPLETE, TRUE AND ACCURATE. <i>Daniel L. Faulk</i> TREASURER'S SIGNATURE			21. CANDIDATE'S SIGNATURE (CANDIDATE COMMITTEES ONLY) I CERTIFY THAT THIS STATEMENT IS COMPLETE, TRUE AND ACCURATE. <i>Deborah Hermann</i> CANDIDATE'S SIGNATURE		

Missouri Ethics Commission
Missouri MAY 24 2010
MA.