MISSOURI ETHICS COMMISSION
STATEMENT OF COMMITTEE ORGANIZATION

MEC ID # C 1015 11

OFFICE USE ONLY

STATEMENT DATE	TYPE OF STATEMENT (CHECK ONE)	IF AMENDED, LIST ITEMS CHANGED (LINE NUMBERS)
8/18/10	☑ NEW ☐ AMENDED	

3. FULL NAME OF COMMITTEE: COMMITTEE TO ELECT MARTY SMITH FOR SALINE COUNTY CLERK

4. COMMITTEE MAILING ADDRESS
ADDRESS: 720 S. Lake Drive
CITY / STATE / ZIP: Marshall, Mo. 65340

5. TELEPHONE NUMBER: 660-886-7366

6. TREASURER'S NAME: Deborah Susan Smith

7. TREASURER'S MAILING ADDRESS
ADDRESS: 720 S. Lake Drive
CITY / STATE / ZIP: Marshall, Mo. 65340

8. TELEPHONE NUMBER
HOME: 660-886-7366
WORK: 660-831-3206

9. DEPUTY TREASURER'S NAME ☑ 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?
☐ YES ☐ NO ☑ N/A

14. OFFICIAL FUND DEPOSITORY: CHECKING ACCOUNT FIRST, THEN ANY SAVINGS ACCOUNT(S)

A. NAME & ADDRESS OF BANK, SAVING & LOAN, OR CREDIT UNION	B. ACCOUNT NAME	C. ACCOUNT NO.
BANK MIDWEST 1035 S. Cherokee Drive MARSHALL, MO 65340	Committee To Elect MARTY SMITH	

15. TYPE OF COMMITTEE
☑ CANDIDATE ☐ POLITICAL PARTY ☐ CONTINUING ☐ CAMPAIGN ☐ EXPLORATORY ☐ DEBT SERVICE

16. CANDIDATE SUPPORTED (CANDIDATE COMMITTEES ONLY)

A. NAME	B. ADDRESS	C. TELEPHONE NO.	D. POLITICAL PARTY
Marty Smith	720 S. Lake Drive, Marshall, Mo. 65340	660-631-6358	Independent

17. CONNECTED ORGANIZATION (IF ANY) (CONTINUING COMMITTEES ONLY)

A. NAME	B. ADDRESS

18. CANDIDATES SUPPORTED OR OPPOSED

A. NAME(S) OF CANDIDATE(S)	B. ELECTION DATE	C. OFFICE SOUGHT	D. POLITICAL SUBDIVISION	CHECK ONE E. SUPPORT	F. OPPOSE
Marty Smith	11/2/10	County clerk	Saline Co.	☐	☐

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	F. OPPOSE
			☐	☐

Missouri Ethics Commission AUG 25 2010

20. COMMITTEE TREASURER'S SIGNATURE
I CERTIFY THAT THIS STATEMENT IS COMPLETE, TRUE AND ACCURATE.
TREASURER'S SIGNATURE

21. CANDIDATE'S SIGNATURE (CANDIDATE COMMITTEES ONLY)
I CERTIFY THAT THIS STATEMENT IS COMPLETE, TRUE AND ACCURATE.
CANDIDATE'S SIGNATURE