MISSOURI ETHICS COMMISSION
STATEMENT OF COMMITTEE ORGANIZATION

MEC ID # C091208

OFFICE USE ONLY

STATEMENT DATE	TYPE OF STATEMENT (CHECK ONE)	IF AMENDED, LIST ITEMS CHANGED (LINE NUMBERS)
	☐ NEW ☑ AMENDED	4,5,7,15,19

3. FULL NAME OF COMMITTEE: MISSOURIANS FOR AFFORDABLE HEALTHCARE CHOICE

4. COMMITTEE MAILING ADDRESS
ADDRESS: PO BOX 190201
CITY / STATE / ZIP: ST LOUIS MO 63119

5. TELEPHONE NUMBER: 314-259-1234

6. TREASURER'S NAME: BRADLEY J. KETCHER

7. TREASURER'S MAILING ADDRESS
ADDRESS: PO BOX 190201
CITY / STATE / ZIP: ST LOUIS MO 63119

8. TELEPHONE NUMBER
HOME:
WORK: 314-259-1234

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 of America 75 W. Lockwood Avenue St. Louis, MO 63119	MISSOURIANS FOR AFFORDABLE HEALTHCARE CHOICE	

15. TYPE OF COMMITTEE
☐ CANDIDATE ☐ POLITICAL PARTY ☑ POLITICAL ACTION (PAC) ☐ CAMPAIGN ☐ EXPLORATORY ☐ DEBT SERVICE

16. CANDIDATE SUPPORTED (CANDIDATE COMMITTEES ONLY)

A. NAME	B. ADDRESS	C. TELEPHONE NO.	D. POLITICAL PARTY
N/A			

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

A. NAME	B. ADDRESS
N/A	

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
N/A				☐	☐

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
N/A			☐	☐

20. COMMITTEE TREASURER'S SIGNATURE

I CERTIFY THAT THIS STATEMENT IS COMPLETE, TRUE AND ACCURATE.

MFAHC
By

TREASURER'S SIGNATURE

21. CANDIDATE'S SIGNATURE (CANDIDATE COMMITTEES ONLY)

I CERTIFY THAT THIS STATEMENT IS COMPLETE, TRUE AND ACCURATE.

Missouri Ethics Commission
SEP 03 2010

CANDIDATE'S SIGNATURE