



Office Use: *FB* *pe*

Statement of Committee Organization

1. Statement Information

Date: 3/6/12
 Type: New Amended (if amending, enter MEC ID C031159 & section changed Sections 2, 3, 5)

2. Committee Information

Missourians for Koster
 Name of Committee
P.O. Box 1551, Jefferson City, Missouri 65102 (816) 719-1890
State & Zip Telephone Number

Official Committee Email Address _____
 County Clerk or Board of Election Commissioners _____
 Committee Type: Campaign Candidate Debt Service Exploratory Political Action (PAC) Political Party

3. Treasurer/Deputy Treasurer Information

Gary Mallory
 Treasurer's Name (First & Last) 519 London Way, Belton, Missouri 64012
 Treasurer's Mailing Address, City, State, & Zip
John Scott
 Deputy Treasurer's Name (if one appointed) P.O. Box 1551, Jefferson City, Missouri 65102
 Deputy Treasurer's Mailing Address, City, State, & Zip

Treasurer's Email Address (optional) _____
(816) 331-1431 _____
 Treasurer's Home Telephone Number Treasurer's Work Telephone Number

Deputy Treasurer's Email Address (optional) _____
(816) 830-9440 _____
 Dep. Treasurer's Home Telephone Number Dep. Treasurer's Work Telephone Number

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 _____

AMENDMENT

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)

Chris Koster P.O. Box 1551, Jefferson City, Missouri 65102 (816) 719-1890 _____
 Name & Mailing Address, City, State, & Zip of Candidate Telephone Number (Candidate Committees Only)

08/07/2012 Attorney General Democrat Support
 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/We certify that this statement is complete, true and accurate.
 e-filers: This committee is required by law to file with the MEC and will file all future campaign finance reports using the MEC's electronic filing system.

Gary Mallory
 Committee Treasurer

John Scott
 Candidate (Candidate Committees Only) **MISSOURI ETHICS COMMISSION**
MAR 14 2012