



Statement of Committee Organization

1. Statement Information

Date: 10-6-2016

Type: [] New [X] Amended (if amending, enter MEC ID C161318 & section changed Exemption)

2. Committee Information

Name of Committee: Carol Hexem for Missouri State Treasurer

Committee Mailing Address, City, State, & Zip: 12712 Coeur du Monde Ct Apt K, St Louis MO 63146
Telephone Number: (314) 401-9613

County Clerk or Board of Election Commissioners: St. Louis County

Committee Type: [] Campaign [X] Candidate [] Continuing (PAC) [] Debt Service [] Exploratory [] Political Party

3. Treasurer/Deputy Treasurer Information

Treasurer's Name (First & Last): Carol Hexem

Treasurer's Mailing Address, City, State, & Zip: 12712 Coeur du Monde Ct Apt K, St. Louis MO 63146

Treasurer's Home Telephone Number: (314) 401-9613
Treasurer's Work Telephone Number: (314) 961-6922

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

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) [X] No

5. Official Bank Account Information (required by all committees)

6. Candidate supported or opposed (candidate committees must include self, if candidate)

Name & Mailing Address, City, State & Zip of Candidate: Carol Hexem, 12712 Coeur du monde Ct, St Louis MO 63146
Telephone Number (Candidate Committees Only): (314) 401-9613

Election Date: 11-08-2016
Office Sought & Political Subdivision: MO State Treasurer
Political Party: Green
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)

[X] 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.

Committee Treasurer: Carol Hexem

Candidate (Candidate Committees Only): Carol Hexem