



Missouri Ethics Commission (MEC)
 PO Box 1370, Jefferson City MO 65102, (800) 392-8660, www.mec.mo.gov
Statement of Committee Organization

Office Use: BB

1. Statement Information

Date: 8-20/2014
 Type: New Amended (if amending, enter MEC ID A141295 & section changed _____)

2. Committee Information

YES FOR PUBLIC SAFETY
 Name of Committee
P.O. BOX 678 C/O K. TAYLOR, COLUMBIA, MO 65205 (573) 874-8434
Telephone Number

BOONE COUNTY MISSOURI
County Clerk or Board of Election Commissioners
 Official Committee Email Address
 Committee Type: Campaign Candidate Continuing (PAC) Debt Service Exploratory Political Party

3. Treasurer/Deputy Treasurer Information

MATT WILLIAMS
Treasurer's Name (First & Last)
P.O. BOX 678 COLUMBIA, MO 65205
Treasurer's Mailing Address, City, State, & Zip () (573) 449-9933
Treasurer's Home Telephone Number Treasurer's Work Telephone Number
BOB GERDING
Deputy Treasurer's Name (if one appointed)
20 S FIFTH ST, COLUMBIA, MO 65201
Deputy Treasurer's Mailing Address, City, State, & Zip (573) 8083152 (573) 449-1599
Dep. Treasurer's Home Telephone Number Dep. Treasurer's Work Telephone Number

4. Additional Committee Information

KAREN TAYLOR, CHAIR
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) 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)

AMENDMENT
Name & Mailing Address, City, State, & Zip of Candidate () ()
Telephone Number (Candidate Committees Only)
Election Date Office Sought & Political Subdivision Political Party Support or Oppose

7. Ballot Measure Supported or Opposed (campaign committees must complete this section)

PUBLIC SAFETY PROPERTY TAX INCREASE 11/4/2014 CITY OF COLUMBIA **SUPPORT**
Name of Ballot Measure Election Date & Political Subdivision Support or Oppose

8. Signature(s) Check certification(s) & sign (required by all committees)

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.
[Signature]
Committee Treasurer Candidate (Candidate Committees Only)