

Step One: Provide Subdivision Information NOTE: Only complete this form if you are unable to file your AOB electronically. Subdivision: Address 1: Address 2: City State: Zip: Contact: Title: _____ Phone: Email: **Step Two: Indicate Annual Operating Budget** Check the appropriate box pertaining to your subdivision's annual operating budget: I confirm that the annual operating budget of the above referenced subdivision is **\$1 million dollars or under** for the 2019 budget year. OR I confirm that the annual operating budget of the above referenced subdivision is

Step Three: Return to Missouri Ethics Commission

Return this form, by August 15th, 2019, by mail or fax to:

over \$1 million dollars for the 2019 budget year.

Missouri Ethics Commission PO Box 1370 Jefferson City MO 65102 FAX: 573-526-4506

PHONE: 800-392-8660



