



Office Use  
 MAY 14 2021

**Statement of Committee Organization**

**1. Statement Information**

Date: 5/10/2021

Type:  New  Amended (if amending, enter MEC ID C041296 & section changed 2 and 3)

**2. Committee Information**

20th Ward Democratic Organization

Name of Committee

3512 S. Compton Ave., St. Louis, MO 63118

Committee Mailing Address, City, State, & Zip

(314) 771-5030

Telephone Number

Official Committee Email Address

St. Louis City Board of Election Commi

County Clerk, Board of Election Commissioners, or Federal PAC/Out of State Committee

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

**3. Treasurer/Deputy Treasurer Information**

Nancy Stopke

Treasurer's Name (First & Last)

3200 Miami St., St. Louis, MO 63118

Treasurer's Mailing Address, City, State, & Zip

Treasurer's Email Address (optional)

(314) 398-0702

Treasurer's Home Telephone Number

( )

Treasurer's Work Telephone Number

Dale Sweet

Deputy Treasurer's Name (if one appointed)

3512 S. Compton Ave., St. Louis, MO

Deputy Treasurer's Mailing Address, City, State, & Zip

Deputy Treasurer's Email Address (optional)

(314) 771-5030

Dep. Treasurer's Home Telephone Number

(636) 829-7253

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)**

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)**

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.

Nancy Stopke  
 Committee Treasurer

Candidate (Candidate Committees Only)