



Missouri Ethics Commission (MEC)
PO Box 1370, Jefferson City MO 65102, Fax: 573-526-4506, helpdesk@mec.mo.gov

Missouri Ethics Commission

Office Use:
JUN 24 2022
Received by Fax

Statement of Committee Organization

1. Statement Information

Date: 06/15/2022

Type: New Amended (if amending, enter MEC ID C141193 & section changed 5)

2. Committee Information

Gregory For Missouri

Name of Committee

Committee Mailing Address, City, State, & Zip _____ Telephone Number _____

Official Committee Email Address _____

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

Treasurer's Name (First & Last) _____

Treasurer's Email Address (optional) _____

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

Treasurer's Home Telephone Number _____ Treasurer's Work Telephone Number _____

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) No

5. Official Bank Account Information

6. Candidate Supported or Opposed

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

Name of Ballot Measure _____

Election Date & Political Subdivision _____ Support or Oppose _____

8. Signature(s) - Check certification(s) & sign

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.

Joe Savarino