



Missouri Ethics Commission (MEC)

PO Box 1370, Jefferson City MO 65102, Fax: 573-526-4506, helpdesk@mec.mo.gov

Statement of Committee Organization

Missouri Ethics Commission

Office Use
001 0-7 2022

1. Statement Information

Date: 9/01/2022

Type: ☐ New ☒ Amended (if amending, enter MEC ID C141317 & section changed 2, 3, 5, 6)

2. Committee Information

Lucas for KC

Name of Committee

PO Box 413054, Kansas City, MO 64141

Mailing Address, City, State, & Zip

(816) 200-0241

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

Michael Cappo

Treasurer's Name (First & Last)

PO Box 413054, Kansas City, MO 64141

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

Treasurer's Email Address (optional)

(913) 302-2150

Treasurer's Home Telephone Number

(816) 200-0241

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 (required by all committees)

6. Candidate Supported or Opposed (candidate committees must include self, if candidate)

Quinton Lucas, PO Box 413054, Kansas City, MO 64141

Name & Mailing Address, City, State & Zip of Candidate

April 4, 2023

Election Date

Mayor - Kansas City

Office Sought & Political Subdivision

(816) 200-0241

Telephone Number (Candidate Committees Only)

Non-partisan

Political Party

Support

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.


Committee Treasurer


Candidate (Candidate Committees Only)