



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:

FEB 01 2023

1. Statement Information

Date: 01/15/2023

Type: ☐ New ☒ Amended (if amending, enter MEC ID C161150 & section changed)

2. Committee Information

CITIZENS TO ELECT JAY MOSLEY

Name of Committee

195 WATERFORD DRIVE, FLORISSANT, MO 63033

(314) 409-1188

City, State, & Zip

Telephone Number

ST LOUIS COUNTY BOARD OF ELECTIONS

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

ANGELA MOSLEY

Treasurer's Name (First & Last)

195 WATERFORD DRIVE, FLORISSANT, MO 63033

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

Treasurer's Email Address (optional)

(314) 974-8208

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 (required by all committees)

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

JAY MOSLEY, 195 WATERFORD DR, FLORISSANT, MO 63033

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

08-06-2024

Election Date

STATEWIDE OFFICE

Office Sought & Political Subdivision

(314) 409-1188

Telephone Number (Candidate Committees Only)

DEMOCRAT

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.

Angela Mosley
Committee Treasurer

Jay Mosley
Candidate (Candidate Committees Only)