

C232420

APR - 7 2023



Missouri Ethics Commission (MEC)

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

Statement of Committee Organization

Office Use: Rec'd by email

1. Statement Information

Date: 04/07/2023

Type: [X] New [ ] Amended (if amending, enter MEC ID \_\_\_\_\_ & section changed \_\_\_\_\_)

2. Committee Information

David Mueller For The City

Name of Committee

P.O. Box 63154, St. Louis, MO 63118

Committee Mailing Address, City, State, & Zip

(314) 530-8633

Telephone Number

St. Louis City Board of Election Commissioners

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

Official Committee Email Address

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

3. Treasurer/Deputy Treasurer Information

Whitney Panneton

Treasurer's Name (First & Last)

P.O. Box 63154, St. Louis, MO 63118

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

Treasurer's Email Address (optional)

(314) 896-0382

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) [X] No

5. Official Bank Account Information (required by all committees)

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

William David Mueller, P.O. Box 63154, St. Louis, MO 63118

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

8/6/2024

Election Date

Circuit Attorney For St. Louis City

Office Sought & Political Subdivision

(314) 530-8633

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)

[X] 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.

[Signature]

Committee Treasurer

[Signature]

Candidate (Candidate Committees Only)