

C171364



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

APR 24 2023
Office Use:
Rec'd by email

Statement of Committee Organization

1. Statement Information

Date: 4/21/2023
Type: New Amended (if amending, enter MEC ID C171364 & section changed Sections 2, 3)

2. Committee Information

Charter Communications, Inc. Missouri PAC
Name of Committee
941 Charter Commons St, Town and Country, MO 63017 (636) 387-6592
Telephone Number
St Louis County Board of Elections
County Clerk, Board of Election Commissioners, or Federal PAC/Out of State Committee
Official Committee Email Address
Committee Type: Campaign Candidate Continuing (PAC) Debt Service Exploratory Political Party

3. Treasurer/Deputy Treasurer Information

Louis Kwok
Treasurer's Name (First & Last)
941 Charter Commons St, Town and Country, MO 63017
Treasurer's Mailing Address, City, State, & Zip
Joseph S. Yates
Deputy Treasurer's Name (if one appointed)
12405 Powerscourt Dr St. Louis, MO 63131
Deputy Treasurer's Mailing Address, City, State, & Zip
Treasurer's Email Address (optional) (314) 422-2973
Treasurer's Home Telephone Number (636) 387-6592
Treasurer's Work Telephone Number
Deputy Treasurer's Email Address (optional) (314) 495-7717
Dep. Treasurer's Home Telephone Number (314) 543-2247
Dep. Treasurer's Work Telephone Number

4. Additional Committee Information

Paul Berra, Chairman
Additional Committee Officer's Name & Title (if any)
Charter Communications, Inc.
Connected Organization's Name (if any)
941 Charter Commons St, Town and Country, MO 63017
Additional Committee Officer's Mailing Address, City, State, & Zip
400 Atlantic St, Stamford, CT 06901
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)

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.

[Signature]
Committee Treasurer Candidate (Candidate Committees Only)