

C151123



Missouri Ethics Commission (MEC)
PO Box 1370, Jefferson City MO 65102, Fax: 573-525-4506, helpdesk@mec.mo.gov

MO Ethics Commission

Office Use:
JUL 17 2023

Statement of Committee Organization

Rec'd by email

1. Statement Information

Date: 7-17-2023
Type: New Amended (if amending, enter MEC ID C151123 & section changed 3 and 6)

2. Committee Information

Peter Merideth for MO Progress
Name of Committee
3542 Crittenden St; St. Louis, MO 63118
Telephone Number (314) 307-2713
Committee Mailing Address, City, State, & Zip
St. Louis City Board of Election Commissioners
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

Rachel Zahn
Treasurer's Name (First & Last)
2123 Boardman; St. Louis, MO 63110
Treasurer's Mailing Address, City, State, & Zip
Treasurer's Email Address (optional)
(314) 917-6506 (917) 757-6506
Treasurer's Home Telephone Number Treasurer's Work Telephone Number
Deputy Treasurer's Name (if one appointed)
Deputy Treasurer's Email Address (optional)
Dep. Treasurer's Home Telephone Number Dep. Treasurer's Work Telephone Number

4. Additional Committee Information

Additional Committee Officer's Name & Title (if any)
Connected Organization's Name (if any)
Additional Committee Officer's Mailing Address, City, State, & Zip
Amendment
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)

Number

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

Peter Merideth; 3542 Crittenden St; St. Louis, MO 63118
Name & Mailing Address, City, State & Zip of Candidate
August 6, 2024 Statewide
Election Date Office Sought & Political Subdivision
Telephone Number (Candidate Committees Only) (314) 307-2713
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.

Committee Treasurer

Candidate (Candidate Committees Only)

X