



C232448

MO Ethics Commission

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

SEP 20 2023
Office Use:
Rec'd by email

Statement of Committee Organization

1. Statement Information

Date: 8/30/23

Type: [] New [x] Amended (if amending, enter MEC ID C232448 & section changed)

2. Committee Information

Friends of EJ Fleischmann

Name of Committee
2311 Franklin Ct

(636) 375-2644

Committee Mailing Address, Ctry, State, & Zip

Telephone Number

Official Committee Email Address

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

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

3. Treasurer/Deputy Treasurer Information

Justin Price

Treasurer's Name (First & Last)

2447 Waterfront Dr, Imperial, MO 63052

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

Treasurer's Email Address (optional)

(314) 489-9583

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

Amendment

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)

Name & Mailing Address, City, State, & Zip of Financial Institution

Account Name

Account Number

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

EJ Fleischmann 2311 Franklin Ct Arnold, MO 63010

(636) 375-2644

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

Telephone Number (Candidate Committees Only)

4/2/2024

Arnold City Council Ward 1

non partisan

support

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)

[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 29. 575 RSMo.

Committee Treasurer

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