

C242797

MO Ethics Commission



Missouri Ethics Commission (MEC)

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

Statement of Committee Organization

MAP 18 2024
Office Use:

Rec'd by email

1. **Statement Information**

Date: 3/17/2024

Type: ☒ New ☐ Amended (if amending, enter MEC ID _____ & section changed _____)2. **Committee Information**

Friends of Scott Miller

Name of Committee

7 Potomac Ct., St. Charles, MO 63303

Committee Mailing Address, City, State, & Zip

(314) 504-4055

Telephone Number

Saint Charles County

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 Party3. **Treasurer/Deputy Treasurer Information**

Scott Miller

Treasurer's Name (First & Last)

7 Potomac Ct., St. Charles, MO 63303

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

N/A

Deputy Treasurer's Name (if one appointed)

Treasurer's Email Address (optional)

(314) 504-4055

Treasurer's Home Telephone Number

(636) 317-8277

Treasurer's Work Telephone Number

Deputy Treasurer's Email Address (optional)

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Dep. Treasurer's Home Telephone Number

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Dep. Treasurer's Work Telephone Number

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

4. **Additional Committee Information**

N/A

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) ☒ No5. **Official Bank Account Information (required by all committees)**6. **Candidate Supported or Opposed (candidate committees must include self, if candidate)**

Scott A. Miller

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

06 Aug 2024

Election Date

State Rep - District 69

Office Sought & Political Subdivision

(314) 504-4055

Telephone Number (Candidate Committees Only)

Republican

Political Party

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Support

Support or Oppose

7. **Ballot Measure Supported or Opposed (campaign committees must complete this section)**

N/A

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)