

C171401



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

MO Ethics Commission
Office Use:
AUG 19 2024
Rec'd by email

1. Statement Information

Date: 08/15/2024
Type: [] New [x] Amended (if amending, enter MEC ID C171401 & section changed 6)

2. Committee Information

The Committee to elect Steve Butz
Name of Committee
3823 Holly Hills Blvd Saint Louis, MO 63116
Committee Mailing Address, City, State, & Zip
(314) 250-1710
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

Ted Hartzler
Treasurer's Name (First & Last)
3757 Wilmington Saint Louis, MO 63116
Treasurer's Mailing Address, City, State, & Zip
Treasurer's Email Address (optional)
(314) 4975195 (314) 7523631
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

Amendment
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)

Steve Butz
Name & Mailing Address, City, State & Zip of Candidate
08/06/2024 81st District State Rep
Election Date Office Sought & Political Subdivision
(314) 2501710 ()
Telephone Number (Candidate Committees Only)
Democrat support
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 Ch. 575 RSMo.

[Signature]
Committee Treasurer
[Signature]
Candidate (Candidate Committees Only)