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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

Rec'd by email

1.	Statement Information Date: 9/11/2024		(1) (1) (1) (1) (1) (1) (1) (1) (1)
	Type: Mew Amended (if amending, enter MEC ID	& section char	nged)
2.	Committee Information		
	Committee to Elect Nicole Greer		
	618 N New Ballas Rd, #207, Creve Coeur, I	MO 63141	(314)527-1262 Telephone Number
	Committee Mailing Address, City, State, & Zip	St. Louis County Bo	
	Official Committee Email Address County Clerk, Board of Election Commissioners, or Federal PAC/Out of State Committee Committee Type: Committee Committee Type: Committee T		
3.	freasurer/Deputy Treasurer Information		
	Sydni Jackson		
	Tressurer's Name (First & Last)	Treasurer's Email Address (optional)	
	618 N New Ballas Rd, #207, Creve Coeur, MO 63141	(314)527-1262	()
	Treasurer's Mailing Address, City, State, & Zip	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 Malling Address, City, State, & Zip	Dep. Treasurer's Home Telephone Number	Dep. Treasurer's Work Telephone Number
4.	Réditional Committee Information		
	Additional Committee Officer's Name & Title (if any)	Additional Committee Officer's Mailing Addres	ss, City, State, & Zip
	Connected Organization's Name (if any)	Connected Organization's Mailing Address, Cit	ıy, State, & Zip
	CANDIDATES: Do you have more than one candidate committee?		
5.	Official Bank Account Information (required by all committees),		
_			
6.	Candidate Supported of Opposed (candidate committees musti)	nclude sell, ([candidate)	
	Nicole Greer 12395 Olive Blvd, Creve Coeur, MO 63141	()	()
	Name & Mailing Address, City, State & Zip of Candidate 8/8/2028 St. Louis County Council District 2	Telephone Number (Candidate Committees C	Only)
	Ejection Date Office Sought & Political Subdivision	Democrat Political Party	Support or Oppose
7	Balloy Measure Supported on Opposed (campaign committees in		Support or Oppose
,,		H5M50HDRECEMB35E5HOU 850	
	Name of Ballot Measure	Election Date & Political Subdivision	Support or Oppose
8.	gnature(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		
	rther acknowledge that I am aware that any false statement or declaration made herein is punishable under Ch. 575 RSMo.		
	De Milia War	1/1100	
	Committed Treasurer	Cardidate (Candidate Committues Only)	

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