





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

Statement of Committee Organization

\$EPFfic4 9se2024

Received by Email

1.	Statement Information	
	Date: 9/10/2024 Times MANAGED Averaged of the averaged transport NATION	
_	Type: New Amended (if amending, enter MEC ID	& section changed)
2.		nith
	Name of Committee (6730 Roberts Avc. St. Louis Committee Mailing Address, City State, & Zip	MO. 63133 (34,5576-1769 St. Laric amount
	Official Committee Email Address	County Clerk, Board of Election Commissioners, or Federal PAC/Out of State Committee
	Committee Type: Campaign Candidate Continuing (PA	AC) Debt Service Exploratory Political Party
פ	Treasurer/Deputy Treasurer Information	
э.	Marvin Terrell	
	Treasurer's Name (First & Last) 6925 Julian Awe. 5T. Lauis, MO Treasurer's Mailing Address, City, State, & Zip	Treasurer's Email Address (optional) (314) 574 4568 (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
	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).	PAGE CONTRACTOR CONTRACTOR CONTRACTOR
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5.	Candidate Supported or Opposed (candidate committees must, i	nclude self, if candidate)
	Mayla Smith 6230 Roberts Ave. ST. Laus	(34)556-1769 ()
	Name & Mailing Address, City, State & Zip of Candidate	Telephone Number (Candidate Committees Only)
	11/5/2024 State Rep 06:74 Election Date Office Sought & Political Subdivision	Democrat Support
		Palitical Party Support or Oppose
7.	Ballot Measure Supported or Opposed (campaign committees m	ust complete this section)
	Maria Smith	1115/2024 Support
	Name of Ballot Measure	Election Date & Political Subdivision Support of Oppose
3.	Signature(s) — Check certification(s) & sign (required by all comm	
	affirm and attest under penalty of perjury that information and	
	further acknowledge that I am aware that any false statement or d	leciaration made nerein is purishable under Ch. 575 RSMo.
	ly mi des	IV CINCULA SINIA
	Committee Treasurer	Candidate Candidate Committee Only)

MO 300-1308 Packet (Rev. 1/2021)