

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

AN 14 2025

Missouri Ethics Commission

Received by Email

Statement of Committee Organization

1. Statement Informa Date: 1/14/2025	tion		gladicultures for the second state of	
	Amended (if amending, enter MEC ID $C1$	161382 & section o	hangad 1	
	ation	a section of	manged	
A CONTRACT OF THE PARTY OF THE	Elect Pam Boyd			
Name of Committee 5642 Pamplin Place, St Louis, MO 63136		3	(314)229-6567	
Committee Mailing Address, Ci	ty, State, & Zip	St Louis City Doo	Telephone Number	
Official Committee Email Addre	255	St Louis City Boar	oners, or Federal PAC/Out of State Committee	
Committee Type:	🗆 Campaign 🔳 Candidate 🔲 Continuing			
	Treasurer Information		•	
Brenda S. Mo				
Treasurer's Name (First & Last)	ve, Ferguson, MO 63135	Treasurer's Email Address (optional) (314) 363-8545 Treasurer's Home Telephone Number	(
Deputy Treasurer's Name (if on	annointed)	Donata Traccured English Address (ask)	- D	
Deputy Treasurer's Marie (ii on	e appointed)	Deputy Treasurer's Email Address (option	ai) /	
Deputy Treasurer's Mailing Add	ress, City, State, & Zip	Dep. Treasurer's Home Telephone Number	Dep. Treasurer's Work Telephone Number	
Additional Committ	iee Information	hattanlisterary house in a second resident	Line in the second of the seco	
Additional Committee Officer's Connected Organization's Name	Name & Title (If any)	ditional Committee Officer's Mailing Address		
	u have more than one candidate committe			
	nt Information (required by all committee			
Candidate Supporte	ed or Opposed (candidate committees mu	st include self if candidate)		
Pamela Boyd, 5642 Pamplin Place, St Louis, MO 63136		(<u>314</u>)382-1078	(<u> </u>	
Name & Mailing Address, City, S March 4, 202		Telephone Number (Candidate Committe Democrat	es Only) Support	
Election Date	Office Sought & Political Subdivision	Political Party	Support or Oppose	
7. Ballot Measure Sup	ported or Opposed (campaign committee	s must complete this section)		
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Name of Ballot Measure		Election Date & Political Subdivision	Support or Oppose	
. Signature(s) — Check	ccertification(s) & sign (required by all co	mmittees)	Sales Services of the Services	
■ I affirm and attest further acknowledge	under penalty of perjury that information that I am aware that any false statement	and facts in this report are com or declaration made herein is pu	iplete, true, and accurate. I unishable under Ch. 575 RSMo.	
Brenda S Montgomery		Pamela Boyd		
Committee Treasurer		Candidate (Candidate Committees Only)		