

C253429



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

Missouri Ethics Commission

Office Use:

MAR 06 2025

Received by Email

1. **Statement Information**

Date: 03/06/2025

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

Name of Committee

1440 Central Avenue, St. Louis, MO 63139

(314) 620-0581

Committee Mailing Address, City, State, & Zip

Telephone Number

Official Committee Email Address

County Clerk, Board of Election Commissioners, or Federal PAC/Out of State Committee

Committee Type: ☐ Campaign ☒ Candidate ☐ Continuing (PAC) ☐ Debt Service ☐ Exploratory ☐ Political Party3. **Treasurer/Deputy Treasurer Information****John Montgomery**

Treasurer's Name (First & Last)

5642 Pamplin Place, St. Louis, MO 63136

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

N/A

Treasurer's Email Address (optional)

(314) 952-9904

Treasurer's Home Telephone Number

N/A

Treasurer's Work Telephone Number

Deputy Treasurer's Name (if one appointed)

N/A

Deputy Treasurer's Email Address (optional)

(N/A)

Dep. Treasurer's Home Telephone Number

Dep. Treasurer's Work Telephone Number

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)**

Teri Powers, 1440 Central Avenue, St. Louis, MO 63139

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

04/08/2025

Election Date

STLP School Board

Office Sought & Political Subdivision

(314) 620-0581

Telephone Number (Candidate Committees Only)

Democratic

Political Party

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.

John Montgomery

Committee Treasurer

Teresa (Teri) Powers

Candidate (Candidate Committees Only)