



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

Missouri Ethics Commission

Office Use:  
MAR 26 2025

Received by Email

## Statement of Committee Organization

1. **Statement Information**

Date: 3/25/2025

Type: ☐ New ☒ Amended (if amending, enter MEC ID C101216 & section changed 1,2,3,5,6)

2. **Committee Information**

Friends of Renee Reuter

Name of Committee

PO Box 319, Imperial, MO 63052

Committee Mailing Address, City, State, & Zip

(314) 852-0236

Telephone Number

Official Committee Email Address

Jeannie Goff

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

Committee Type: ☐ Campaign ☒ Candidate ☐ Continuing (PAC) ☐ Debt Service ☐ Exploratory ☐ Political Party

3. **Treasurer/Deputy Treasurer Information**

Renee

Treasurer's Name (First & Last)

Reuter

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

4533 Rhonda Sue Ct, Imperial, MO 63052

Deputy Treasurer's Name (if one appointed)

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

Treasurer's Email Address (optional)

(314) 852-0236

Treasurer's Home Telephone Number

( )

Treasurer's Work Telephone Number

Deputy Treasurer's Email Address (optional)

( )

Dep. Treasurer's Home Telephone Number

( )

Dep. Treasurer's Work Telephone Number

4. **Additional Committee Information**

Additional Committee Officer's Name & Title (if any)

AMENDMENT

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)**

6. **Candidate Supported or Opposed (candidate committees must include self, if candidate)**

Self

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

Aug. 4, 2026

Election Date

Senate, Dist. 22

Office Sought & Political Subdivision

(314) 852-0236

Telephone Number (Candidate Committees Only)

Republican

Political Party

( )

Support

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)**

☒ 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.

Committee Treasurer

Candidate (Candidate Committees Only)