



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:

APR 13 2025

Received by Email

1. **Statement Information**
Date: 3/19/25
Type: ☐ New ☒ Amended (if amending, enter MEC ID C253406 & section changed 3)

2. **Committee Information**
Tori Schafer for Missouri
Name of Committee
P.O. Box 11424 Clayton, MO 63105 (419) 787-7003
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 Party

3. **Treasurer/Deputy Treasurer Information**
Kenya Wright Gumbs
Treasurer's Name (First & Last)
7621 Westmoreland Ave, St. Louis, MO 63105
Treasurer's Mailing Address, City, State, & Zip
Treasurer's Email Address (optional)
(202) 491-8090
Treasurer's Home Telephone Number
()
Treasurer's Work Telephone Number
Deputy Treasurer's Name (if one appointed)
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)**
Name & Mailing Address, City, State, & Zip of Financial Institution
Account Name
Account Number

6. **Candidate Supported or Opposed (candidate committees must include self, if candidate)**
Tori Schafer P.O. Box 11424 Clayton, MO (419) 787-7003 ()
Name & Mailing Address, City, State & Zip of Candidate Telephone Number (Candidate Committees Only)
63105
8/14/2026 State Representative Democrat
Election Date Office Sought & Political Subdivision Political Party 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.

Kenya Wright Gumbs
Committee Treasurer

Tori Schafer
Candidate (Candidate Committees Only)