



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:

MAY 06 2025

Received by Email

**1. Selected Information**

Date: 4/28/2025  
 Type:  New  Amended (if amending, enter MEC ID C171130 & section changed 3)

**2. Committee Information**

Name of Committee \_\_\_\_\_  
 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**

Lanna Ultican  
 Treasurer's Name (First & Last) \_\_\_\_\_ Treasurer's Email Address (optional) \_\_\_\_\_  
1204 SW 18th St, Blue Springs, MO 64015 \_\_\_\_\_ (816) 210-0818 \_\_\_\_\_  
 Treasurer's Mailing Address, City, State, & Zip \_\_\_\_\_ Treasurer's Home Telephone Number \_\_\_\_\_ Treasurer's Work Telephone Number \_\_\_\_\_  
Shellie Montemurro  
 Deputy Treasurer's Name (if one appointed) \_\_\_\_\_ Deputy Treasurer's Email Address (optional) \_\_\_\_\_  
2125 SW 1st Terrace, Lee's Summit, MO 64081 \_\_\_\_\_ (816) 607-1730 \_\_\_\_\_  
 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) \_\_\_\_\_ AMENDMENT \_\_\_\_\_  
 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)**

Keri Ingle, 3104 SW Muir Dr., Lees Summit, MO 64081 \_\_\_\_\_ (816) 875-9635 \_\_\_\_\_  
 Name & Mailing Address, City, State & Zip of Candidate \_\_\_\_\_ Telephone Number (Candidate Committees Only) \_\_\_\_\_  
8/4/2026 \_\_\_\_\_ State Senate District 8 \_\_\_\_\_ Democrat \_\_\_\_\_ Support \_\_\_\_\_  
 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.

Lanna Ultican \_\_\_\_\_ Committee Treasurer  
Keri Ingle \_\_\_\_\_ Candidate (Candidate Committees Only)

X