



Missouri Ethics Commission (MEC) C253309  
 PO Box 1370, Jefferson City MO 65102, Fax: 573-526-4506, helpdesk@mec.mo.gov

**Statement of Committee Organization**

Missouri Ethics Commission  
 Office of the Commissioner  
 APR 06 2026  
 Received by Email

**1 STATEMENT INFORMATION**

Date: 2-14-20

Type:  New  Amended (if amending, enter MEID C253309 & section(s) changed 2 + 3+5)

**2 COMMITTEE INFORMATION**

Name of committee: Common Sense STL PAC

Committee mailing address \_\_\_\_\_ Telephone number \_\_\_\_\_

Committee city, state, & ZIP code \_\_\_\_\_ **Amendment**

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**

Treasurer's name (first & last) \_\_\_\_\_ Treasurer's email address (optional) \_\_\_\_\_ Treasurer's telephone number \_\_\_\_\_

Treasurer's mailing address, city, state, ZIP code \_\_\_\_\_ Treasurer's work telephone number \_\_\_\_\_

NO DEPUTY TREASURER, PLEASE REMOVE MAURKIN GUTZEL

Deputy Treasurer's name (first & last) - (If one is appointed) \_\_\_\_\_ Deputy Treasurer's email address (optional) \_\_\_\_\_ Deputy Treasurer's telephone number \_\_\_\_\_

Deputy Treasurer's mailing address, city, state, ZIP code \_\_\_\_\_ Dep. Treasurer's work telephone number \_\_\_\_\_

**4 ADDITIONAL COMMITTEE INFORMATION**

Additional committee officer's name & title (if any) \_\_\_\_\_ Additional committee officer's mailing address, city, state, & ZIP code \_\_\_\_\_

Connected organization's name (if any) \_\_\_\_\_ Connected organization's mailing address, city, state, & ZIP code \_\_\_\_\_

CANDIDATES: If the candidate for which this committee is formed has more than one candidate committee (may only have one per office sought) disclose on the committee name & address along with the name, address, & phone number of the treasurer & designate the aggregating committee on an attached sheet.

**5 OFFICIAL BANK ACCOUNT INFORMATION (required for all committees)**

Name of Bank or Financial Institution \_\_\_\_\_

Mailing address of Bank or Financial Institution \_\_\_\_\_

Account name \_\_\_\_\_ Account number \_\_\_\_\_

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Statement of Committee Organization, cont.

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5. SAVINGS OR OTHER BANK ACCOUNT INFORMATION

Name of Bank or Financial Institution

Mailing address of Bank or Financial Institution

City, State, ZIP code

Account name

Account number

6. COMMITTEE CREDIT CARD(S)

Issuer of committee credit card (Name of bank/Institution that issued card or Amex, Discover/ Etc.)

Account number of committee credit card

Issuer of committee credit card (Name of bank/Institution that issued card or Amex, Discover/ Etc.)

Account number of committee credit card

7. CANDIDATE SUPPORTED OR OPPOSED (candidate committee must include self, if candidate)

Name of Candidate

Mailing address of Candidate

City, state, & ZIP code of Candidate

Telephone number (candidate committees only)

Office running for

Election date

Political Party

Subdivision (e.g. County, City or District where the office is located)

Support or oppose

8. BALLOT MEASURE SUPPORTED OR OPPOSED (campaign committees must complete this section)

Name of ballot measure

Election Date

Subdivision (e.g. Statewide, County, City or District)

Support or Oppose

Ballot measure summary

9. SIGNATURE(S) AND CERTIFICATION(S) (required for all committees)

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 Chapter 575, RSMo

CONTINUING (PACS), CAMPAIGN, & POLITICAL PARTY COMMITTEES ONLY: I certify that no preliminary activity was funded by prohibited sources, whether directly or indirectly (see § 130.170, RSMo, for complete definitions of "preliminary activity," "prohibited sources," & "directly or indirectly.")

Committee treasurer (required for all committees)

Candidate (required for candidate committees only)

VETERANS INFORMATION

If you are a Veteran in the state of Missouri and are interested in learning more about benefits and resources available to you and your dependents, visit https://myc.dps.mo.gov/MoVeteransInformation/Survey/MEC

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