



Missouri Ethics Commission (MEC)
PO Box 1370, Jefferson City MO 65102, (800) 392-8660, www.mec.mo.gov

Office Use:

DE

Statement of Committee Organization

1. Statement Information

Date: 3/08/2012

Type: ☐ New ☒ Amended (if amending, enter MEC ID C101331 & section changed 2,3,6)

2. Committee Information

Name of Committee

Citizens for Karla May

Committee Mailing Address, City, State, & Zip

P.O. Box 21339 St. Louis, MO 63115

Telephone Number

(314) 389-6123

Official Committee Email Address

County Clerk or Board of Election Commissioners

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

3. Treasurer/Deputy Treasurer Information

Treasurer's Name (First & Last)

Erran Flanagan

Treasurer's Email Address (optional)

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

5431 Cabanne Ave Apt. 1E
St. Louis MO 63112

(314) 295-6731

Treasurer's Home Telephone Number

Treasurer's Work Telephone Number

Deputy Treasurer's Name (if one appointed)

Deputy Treasurer's Email Address (optional)

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

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)

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

Telephone Number (Candidate Committees Only)

Election Date

8/7/2012

Office Sought & Political Subdivision

State Representative
District 84

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/We certify that this statement is complete, true and accurate.

☐ e-File: This committee is required by law to file with the MEC and will file all future campaign finance reports using the MEC's electronic filing system.

Committee Treasurer

[Signature]

MISSOURI ETHICS COMMISSION

Candidate (Candidate Committees Only)

[Signature: Karla May]