

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

## **Statement of Committee Organization**

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1.	Statement Information			
	Date: July 12, 2012	C001206 6		
	Type: New Amended (if amending, enter MEC ID C09	1206 & section cha	anged O)	
2.	Committee Information			
	Plocher for Missouri	· · · · · · · · · · · · · · · · · · ·		
	P.O. Box 16065, Clayton, Missouri 63105		,314,308-9733	
	Committee Mailing Address, City, State, & Zip		Telephone Number	
		Mary 2 Control of the		
	Official Committee Email Address	County Clerk or Board of Election Commission	********	
	Committee Type: Campaign Candidate Debt Service	Exploratory Political Ac	ction (PAC) Political Party	
3.	Treasurer/Deputy Treasurer Information			
	Rebecca Smugala-Plocher Treasurer's Name (First & Last)	Treasurer's Email Address (optional)		
	12819 Wood Valley Ct., Des Peres, MO 63131	, 314 , 494-4204	/ \	
	Treasurer's Mailing Address, City, State, & Zip	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			
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	Additional Committee Officer's Dam & Tile (if any)	Additional Committee Officer's Mailing Address	ss, City, State, & Zip	
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	Connected Organization's Name (if any)	Connected Organization's Mailing Address, Cit	zy, State, & Zip	
_	CANDIDATES: Do you have more than one candidate committee?	Yes (refer to instructions on b	ack) 🗹 No	
5.	Official Bank Account Information (required by all committees)		<u> </u>	
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6.	Candidate Supported or Opposed (candidate committees must in Dean Plocher P.O. Box 16065 Clayton, MO 63105	(314 ) 308-9733		
	Name & Mailing Address, City, State & Zip of Candidate	Telephone Number (Candidate Committees Or	()	
	8/2/2016 State Representative 89th	Republican	Support	
	Election Date Office Sought & Political Subdivision	Political Party	Support or Oppose	
7.	Ballot Measure Supported or Opposed (campaign committees mu	ust complete this section)		
	Name of Ballot Measure	Election Date & Political Subdivision	Support or Oppose	
8.	Signature(s) Check certification(s) & sign (required by all commi	ittees)		
	finance reports using the			
	MEC's electronic filing system.	(Marthle		
	Committee Treasurer	Candidate (Candigate Committees Only)		
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