



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

Office Use: *FB &*

Statement of Committee Organization

1. Statement Information

Date: 10/15/2013
 Type: New Amended (if amending, enter MEC ID C131077 & section changed 2, 3, 6)

2. Committee Information

Team Butler
 Name of Committee
2917 Victor St., St. Louis, MO 63104
 Committee Mailing Address, City, State, & Zip
(314) 324-9163
 Telephone Number

St. Louis Board of Elections
 Official Committee Email Address
 County Clerk or Board of Election Commissioners

Committee Type: Campaign Candidate Continuing (PAC) Debt Service Exploratory Political Party

3. Treasurer/Deputy Treasurer Information

Michael Butler
 Treasurer's Name (First & Last)
2917 Victor St., St. Louis, MO 63104
 Treasurer's Mailing Address, City, State, & Zip
 Treasurer's Email Address (optional)
(314) 324-9163
 Treasurer's Home Telephone Number
 Treasurer's Work Telephone Number

Katrina Moore
 Deputy Treasurer's Name (if one appointed)
12365 Cross Creek Cove, Creve Couer, MO 63141
 Deputy Treasurer's Mailing Address, City, State, & Zip
 Deputy Treasurer's Email Address (optional)
(314) 502-8266
 Dep. Treasurer's Home Telephone Number
 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
 Connected Organization's Name (if any)
 Connected Organization's Mailing Address, City, State, & Zip

AMENDMENT

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)

Michael Butler, 2917 Victor St., St. Louis, MO 63104
 Name & Mailing Address, City, State & Zip of Candidate
8/8/2014
 Election Date
State Representative
 Office Sought & Political Subdivision
(314) 324-9163
 Telephone Number (Candidate Committees Only)
Democrat
 Political Party
Support
 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.

[Signature]
 Committee Treasurer

[Signature]
 Candidate (Candidate Committees Only)

MISSOURI ETHICS COMMISSION