

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

## **Statement of Committee Organization**

Offices	SURTET HES COMMISSION
400	DEC 2 0 201/4

DEC 2 9 2014

1.	Statement Information			8	7
	Date: 12/28/2014  Type: New Amended	(if amending, enter MEC ID	C141568	& section cha	Treasurer Info
2.	Committee Information Spencer for Alderman				
	Name of Committee 3407 S. Jefferson Ave,	St. Louis, MO 63118			314 556-7379
	Commission & Author Adduser Class State P. 7in	1	St. Louis	City Board o	Telephone Number f Election Commissione
	Official Committee Email Address			pard of Election Commission	
	Committee Type: Campaig	<del></del>	nuing (PAC) Debt	Service Explo	oratory Political Party
3.	Treasurer/Deputy Treasurer I Michael Allen	nformation			
	Treasurer's Name (First & Last) 2749 Chippewa St., St.	Louis MO 63118	Treasurer's Email		( )
	Treasurer's Mailing Address, City, State, & Zip Randy Vines		Treasurer's Home	Telephone Number	Treasurer's Work Telephone Number
	Deputy Treasurer's Name (if one appointed) 6115 Washington Blvd.	#201, STL MO 63112		s Email Address (optional) 1-4469	
	Deputy Treasurer's Mailing Address, City, State	, & Zip	Dep. Treasurer's H	ome Telephone Number	Dep. Treasurer's Work Telephone Number
4.	Additional Committee Inform	ation			
	Additional Committee Officers Name (if any)	DMENT		tee Officer's Mailing Addre	
	CANDIDATES: Do you have mo	re than one candidate com	mittee? 🖸 Yes (refer	to instructions on b	ack) 🖸 No
5.	Official Bank Account Informa	tion (required by all comm	ittees)		
õ.	Candidate Supported or Oppole Cara Spencer, 3407 S	seu (candidate committees Jefferson STL MO 63	must include self, if	candidate) 6-7379	( )
	Name & Mailing Address, City, State & Zip of Ca March 3, 2015	Alderman Ward 20	Telephone Number Democra	r (Candidate Committees O	Support
	Election Date	Office Sought & Political Subdivision	Political Party		Support or Oppose
7.	Ballot Measure Supported or 0	Opposed (campaign commi	ttees must complete	this section)	
	Name of Ballot Measure		Election Date & Po	litical Subdivision	Support or Oppose
3.	Signature(s) Check certificati	on(s) & sign (required by al	l committees)		
	affirm and attest under per				
/	further acknowledge that Jam	aware that any false statem	ent or declaration ma	rae nerein is punis	nable under Cn. 575 KSMO.
	Committee treasurer		Candidate (Candida	te Committees Only)	

MO 300-1308 Packet (Rev. 11/2014)