



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

Office Use: *Bob [Signature]*

Statement of Committee Organization

1. Statement Information

Date: 4-1-16
 Type: New Amended (if amending, enter MEC ID A161254 & section changed _____)

2. Committee Information

Name of Committee: Robert Stelzer Campaign Fund
 Mailing Address, City, State, & Zip: 2001 Macklind Ave, St. Louis MO. 63110 Telephone Number: (314) 201-6811

Official Committee Email Address: _____
 County Clerk or Board of Election Commissioners: City of St. Louis Board of Elect. Comm.

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

3. Treasurer/Deputy Treasurer Information

Treasurer's Name (First & Last): Barbara Beck
 Treasurer's Mailing Address, City, State, & Zip: 2155 Maury Ave St. Louis MO 63119
 Treasurer's Home Telephone Number: 314 771-4431 Treasurer's Work Telephone Number: _____

Deputy Treasurer's Name (if one appointed): Carolyn Stelzer
 Deputy Treasurer's Mailing Address, City, State, & Zip: 5002 Columbia Ave, St. Louis MO. 63139
 Deputy Treasurer's Home Telephone Number: (314) 772-3355 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: _____

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 & _____

6. Candidate Supported or Opposed (candidate committees must include self, if candidate)

Name & Mailing Address, City, State & Zip of Candidate: Robert Stelzer 2001 Macklind Ave St. Louis, MO 63110 Telephone Number (Candidate Committees Only): (314) 201-6811
 Election Date: 8-2-16 Office Sought & Political Subdivision: Committeeman 10th Ward City of St. Louis Political Party: Democrat Support or Oppose: Support

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.

Committee Treasurer: Carolyn Stelzer Candidate (Candidate Committees Only): Robert Stelzer