



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

Office Use:

516 JD

Statement of Committee Organization

1. Statement Information

Date: 4/08/16

Type: ☒ New ☐ Amended (if amending, enter MEC ID C161175 & section changed _____)

2. Committee Information

THE COMMITTEE TO ELECT STEVE BUTZ

Name of Committee

3757 WILMINGTON AVE ST. LOUIS, Mo. 63116 (314) 250-1710

Committee Mailing Address, City, State, & Zip

Telephone Number

Official Committee Email Address

ST. LOUIS CITY BOARD OF ELECTION COMMISSIONERS
County Clerk or Board of Election Commissioners

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

3. Treasurer/Deputy Treasurer Information

TED HARTZLER

Treasurer's Name (First & Last)

3757 WILMINGTON AVE ST. LOUIS 63116 (314) 497-5195 (314) 752-3631

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

Treasurer's Home Telephone Number

Treasurer's Work Telephone Number

MALORY RUSCH

Deputy Treasurer's Name (if one appointed)

4310 FREED AVE ST. LOUIS, Mo. 63116 (314) 306-8945 ()

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

Dep. Treasurer's Home Telephone Number

Dep. Treasurer's Work Telephone Number

4. Additional Committee Information

BEN BORGMEYER

Additional Committee Officer's Name & Title (if any)

Connected Organization's Name (if any)

3922 DOVER ST. LOUIS, Mo. 63116

Additional Committee Officer's Mailing Address, City, State, & Zip

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)

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

STEVE BUTZ 3757 WILMINGTON AVE ST. LOUIS, Mo. 63116 (314) 368-4104 ()

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

Telephone Number (Candidate Committees Only)

AUG 2, 2016

Election Date

STATE REP 81ST DISTRICT DEMOCRAT

Office Sought & Political Subdivision

Political Party

SUPPORT

Support or Oppose

7. Ballot Measure Supported or Opposed (campaign committees must complete this section)

N/A

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] 4/9/16

Committee Treasurer

[Signature] 4/8/16

Candidate (Candidate Committees Only)