



Missouri Ethics Commission  
 Office Use:  
 NOV 21 2016

# Statement of Committee Organization

**1. Statement Information**

Date: 11/16/16  
 Type:  New  Amended (if amending, enter MEC ID C161019 & section changed 6)

**2. Committee Information**

**FRIENDS OF FRED WESSELS**

Name of Committee  
3955 DOVER PLACE ST LOUIS, MO 63116  
(314) 353 0335  
 Telephone Number

**St Louis Board of Election Commissioners**

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**

**GLORIA WESSELS**

Treasurer's Name (First & Last) 3955 DOVER PL ST LOUIS MO 63116  
 Treasurer's Mailing Address, City, State, & Zip  
 Treasurer's Email Address (optional)  
(314) 353 5152 (314) 353 0335  
 Treasurer's Home Telephone Number Treasurer's Work Telephone Number

Deputy Treasurer's Name (if one appointed)  
 Deputy Treasurer's Mailing Address, City, State, & Zip  
 Deputy Treasurer's Email Address (optional)  
 Dep. Treasurer's Home Telephone Number Dep. Treasurer's Work Telephone Number

**4. Additional Committee Information**

**AMENDMENT**  
 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)**

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

Alfred J Wessels Jr 3955 Dover Pl St Louis Mo 63116  
 Name & Mailing Address, City, State & Zip of Candidate  
11/6/2018 State Representative 81st District  
 Election Date Office Sought & Political Subdivision  
(314) 353 5152 Democrat  
 Telephone Number (Candidate Committees Only) Political Party  
 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.

Gloria Wessels Alfred J Wessels Jr  
 Committee Treasurer Candidate (Candidate Committees Only)