

JAN 20 2017



Missouri Ethics Commission (MEC)
P.O. Box 1370, Jefferson City MO 65102, (800) 392-8660, www.mec.mo.gov
Statement of Committee Organization

Office Use:
T171012 *BIB*
JCS

1. Statement Information

Date: 01/06/2017
Type: New Amended (if amending, enter MEC ID C171031 & section changed _____)

2. Committee Information

JOHN COLLINS-MUHAMMAD FOR ST. LOUIS
Name of Committee
4045 SHREVE AVENUE 1ST FLOOR SAINT LOUIS, MO 63115 (314) 339-8683
Committee Mailing Address, City, State, & Zip Telephone Number
St. Louis City Board of Elections
County Clerk or Board of Election Commissioners
Committee Type: Campaign Candidate Continuing(PAC) Debt Service Exploratory Political Party

3. Treasurer/Deputy Treasurer Information

ADRIAN KELLY
Treasurer's Name (First & Last)
4045 SHREVE AVENUE 1ST FLOOR SAINT LOUIS, MO 63115
Treasurer's Mailing Address, City, State, & Zip (314) 339-8683
Phone 1
John Collins-Muhammad
Deputy Treasurer's Name (if one appointed)
4045 SHREVE AVENUE, 1ST FLOOR 4045 SHREVE AVENUE,
1ST FLOOR SAINT LOUIS, MO 63115
Deputy Treasurer's Mailing Address, City, State, & Zip (314) 339-9302
Phone 1 Phone 2

4. Additional Committee Information

Tory Russell (Organizer)
Additional Committee Officer's Name & Title (if any) 4045 SHREVE AVENUE, 1ST FLOOR SAINT LOUIS, MO 63115
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)

John Collins Muhammad 4045 SHREVE AVENUE 1ST FLOOR (314) 339-9302 (314) 339-8683
SAINT LOUIS, MO 63115
Name & Mailing address, City, State, & Zip of Candidate Phone 1 Phone 2
3-2-17 Aldersperson/City of St. Democrat
03/07/2023 Louis
Election Date Office Sought & Political Subdivision 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.

John Collins Muhammad
Committee Treasurer

John Collins Muhammad
Candidate (Candidate Committees Only)