



Office Use: JUL 11 2017

Statement of Committee Organization

1. Statement Information

Date: 06/20/2017

Type: New Amended (if amending, enter MEC ID C111187 & section changed _____)

2. Committee Information

Citizens to Elect Tammika Hubbard

Name of Committee

1045 Selby Place, St Louis, MO 63106

(314) 323-0860

Committee Mailing Address, City, State, & Zip

Telephone Number

St Louis City

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

MONICA Patton

Treasurer's Name (First & Last)

1231 N. 15th St. St. Louis, MO 63104

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

Treasurer's Email Address (optional)

(314) 750-6835

Treasurer's Home Telephone Number

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Treasurer's Work Telephone Number

Deputy Treasurer's Name (if one appointed)

Deputy Treasurer's Email Address (optional)

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

Dep. Treasurer's Home Telephone Number

Dep. Treasurer's Work Telephone Number

4. Additional Committee Information

Kathryn Jayne Drennen, Deputy Treasurer

Additional Committee Officer's Name or Title (If any)

347 Hazel Avenue, St Louis, MO 63119

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

Connected Organization's Name (if any)

AMENDMENT

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 & Mailing Address, City, State, & Zip of Financial Institution

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

Tammika Hubbard, 1045 Selby Place, St Louis, MO 63106

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

(314) 323-0860

Telephone Number (Candidate Committees Only)

March 3, 2020

Election Date

Aldersperson

Office Sought & Political Subdivision

Democrat

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.

MONICA Patton
 Committee Treasurer

Tammika Hubbard / Citizens to Elect Tammika Hubbard
 Candidate (Candidate Committees Only)