



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

Office OCT 13 2017

Statement of Committee Organization

1. Statement Information

Date: September 27, 2017
Type: [ ] New [x] Amended (if amending, enter MEC ID C131185 & section changed 3)

2. Committee Information

The Committee to Elect Mavis Thompson

Name of Committee
1720 Market Street, PO Box 771233 St. Louis, MO. 63177 (314) 330-8537
Committee Mailing Address, City, State, & Zip Telephone Number

City of St. Louis Board of Election
County Clerk or Board of Election Commissioners

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

3. Treasurer/Deputy Treasurer Information

Charli Cooksey
Treasurer's Name (First & Last)
4190 Sacramento, St. Louis, MO 63115
Treasurer's Mailing Address, City, State, & Zip
Treasurer's Email Address (optional)
(314) 348-0392
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

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

Amendment

CANDIDATES: Do you have more than one candidate committee? [ ] Yes (refer to instructions on back) [x] No

5. Official Bank Account Information (required by all committees)

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

Mavis Thompson, 3510 Dodier Street, St Louis, MO 63107 (314) 3308537
Name & Mailing Address, City, State & Zip of Candidate Telephone Number (Candidate Committees Only)
November 13, 2018 St Louis City License Collector Democratic Support
Election Date Office Sought & Political Subdivision Political Party Support or Oppose

DE

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)

[x] 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.

Charli Cooksey
Committee Treasurer
Mavis Thompson
Candidate (Candidate Committees Only)