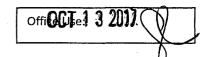


Missouri Ethics Commission (MEC) PO Box 1370, Jefferson City MO 65102, (800) 392-8660, www.mec.mo.gov



Statement of Committee Organization

1.	Statement Information Date: September 27, 2017		
	Type: New Amended (if amending, enter MEC ID C13	1185 🏄 & section ch	anged 3
2.			
	Committee to Elect Mavis Thompson		
		Lis, MO. 63177	(314) 330-8537 Telephone Number
			ouis Board of Fleet
	Committee Type: ☐ Campaign ☐ Candidate ☐ Continuing (P	AC) Debt Service Expl	oratory
3.	Treasurer/Deputy Treasurer Information Charle Con Sey Treasurer's Name (First & Last)	Treasurer's Email Address (optional)	
	4190 Sacramento, St. Louis, MO Treasurer's Mailing Address, City, State, & Zip 43115	(314) 348-039Z Treasurer's Home Telephone Number	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		
	Additional Committee Officer's Name & Title (if any)	Additional Committee Africa : Mailing Address	dment
	Connected Organization's Name (if any)	Connected Organization's Mailing Address, Ci	ity, State, & Zip
	CANDIDATES: Do you have more than one candidate committee?	☐ Yes (refer to instructions on b	oack) 🗏 No
5.	Official Bank Account Information (required by all committees)	200	
6.	Candidate Supported or Opposed (candidate committees must i	nclude self, if candidate)	en andrewe sur sella di estera ante la distanti com
	Mavis Thompson, 3510 Dodier Street, St Louis, MO 63107 Name & Mailing Address, City, State & Zip of Candidate	(314) 3308537 Telephone Number (Candidate Committees O	()
	November 13, 2018 St Louis City License Collector	Democratic	Support
_	Election Date - 7 - 1	Political Party	Support or Oppose
7.	Ballot Measure Supported or Opposed (campaign committees me	ust complete this section)	
	Name of Ballot Measure	Election Date & Political Subdivision	Support or Oppose
,	Signature(s) Charle cortification(s) & sign (required burdlesses	ittoos)	
Signature(s) Check certification(s) & sign (required by all committees)			
	I affirm and attest under penalty of perjury that information and further acknowledge that are aware that any false statement or de-		
	Committee Treasurer	Candidate (Candidate Committees Only)	>1 / · · · · · ·

MO 300-1308 Packet (Rev. 12/2016) Form must be completed in full & contain original signature(s), fax filings are not accepted.