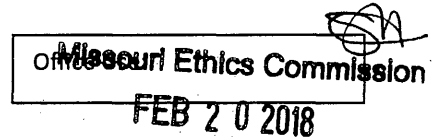




Missouri Ethics Commission (MEC)  
PO Box 1370, Jefferson City MO 65102, (800) 392-8660, www.mec.mo.gov



## Statement of Committee Organization

### 1. Statement Information

Date: 02/15/2018

Type: ☐ New ☒ Amended (if amending, enter MEC ID C000747 & section changed 2 (Comm. name))

### 2. Committee Information

BUILD St. Louis PAC, Inc.

Name of Committee

10104 Old Olive Street Road, St. Louis, MO 63141

Committee Mailing Address, City, State, & Zip

(314) 994-7700

Telephone Number

St. Louis County 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

Laura Rasch

Treasurer's Name (First & Last)

10104 Old Olive Street Road, St. Louis, MO 63141

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

(314) 817-5617

Treasurer's Home Telephone Number

(314) 817-5617

Treasurer's Work Telephone Number

N/A

Deputy Treasurer's Name (if one appointed)

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)

Home Builders Association of St. Louis & Eastern Missouri

Connected Organization's Name (if any)

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

10104 Old Olive Street Road, St. Louis, MO 63141

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)

Name & Mailing Address, City, State, & Zip

Telephone Number (Candidate Committees Only)

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.

Laura Rasch  
Committee Treasurer

Candidate (Candidate Committees Only)