

DEC 21 2018



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:
T181459 [Handwritten initials]

1. Statement Information

Date: 12/12/2018

Type: [ ] New [ ] Amended (if amending, enter MEC ID C80734 & section changed)

2. Committee Information

24th Ward Progressive Democrats

Name of Committee

1241 graham st SAINT LOUIS, MO 63139

Committee Mailing Address, City, State, & Zip

(314) 775-1338

Telephone Number

St. Louis City Board of Elections

County Clerk or Board of Election Commissioners

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

3. Treasurer/Deputy Treasurer Information

Jean Corbett

Treasurer's Name (First & Last)

1241 graham st SAINT LOUIS, MO 63139

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

(314) 775-1338

Phone 1

Phone 2

Deputy Treasurer's Name (if one appointed)

Deputy Treasurer's Email Address (optional)

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

Phone 1

Phone 2

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

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)

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

Phone 1

Phone 2

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.

[Handwritten Signature]
Committee Treasurer

Candidate (Candidate Committees Only)