



Office Use: JUN 14 2019
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Statement of Committee Organization

1. Statement Information

Date: 6-11-19
 Type: New Amended (if amending, enter MEC ID C001238 & section changed 2,3)

2. Committee Information

COMMITTEE TO ELECT STEVE EHLMANN

Name of Committee
2941 WENTWORTH, ST. CHARLES, MO 63301 Telephone Number (636) 947-9463

Official Committee Email Address

ST. CHARLES COUNTY
 County Clerk or Board of Election Commissioners

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

3. Treasurer/Deputy Treasurer Information

JEAN EHLMANN

Treasurer's Name (First & Last)
2941 WENTWORTH, ST. CHARLES, MO 63301
 Treasurer's Mailing Address, City, State, & Zip

Treasurer's Email Address (optional)
(636) 947-9463 (314) 420-3871
 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)
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 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) No

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

Name of Financial Institution Account Name

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

STEVE EHLMANN, 2941 WENTWORTH, ST. CHARLES, MO 63301 Telephone Number (Candidate Committees Only) (636) 947-9463
 Name & Mailing Address, City, State & Zip of Candidate
08/02/2022 COUNTY EXECUTIVE, ST. CHARLES COUNTY REPUBLICAN SUPPORT
 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.

Jean Ehlmann
 Committee Treasurer

St Ehl
 Candidate (Candidate Committees Only)