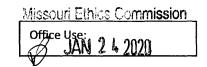


Missouri Ethics Commission (MEC)
PO Box 1370, Jefferson City MO 65102, (800) 392-8660, www.mec.mo.gov



Statement of Committee Organization

1.	Statement Information		•		
	Date: 1/17/2020 Type: New Amended (if amending, enter MEC ID C010	0043 & s	ection change	3. Treas	urer ,
2.					
	15th Ward Democrats				
	Name of Committee 3700 S. Utah Place, St. Louis, MO 63116 Committee Mailing Address, City, State, & 7:-		(3	14 ₎ 771-6	292
	Committee Wanning Address, City, State, a	St. Louis Board of Election Commissioners			
	Unitais commisce and,	County Clerk, Board of Election	n Commissioners, or F	ederal PAC/Out of Sta	te Committee
	Committee Type: ☐ Campaign ☐ Candidate ☐ Continuing (PAC) ☐ Debt Service ☐ Exploratory ☐ Political Party				
3.	Treasurer/Deputy Treasurer Information Deborah Pratt				
	Treasurer's Name (First & Last)			-	
	3922 Arsenal, St. Louis, MO 63116	(314)771-80	66 (3 ⁻	14 ₎ 477-7:	381
	Treasurer's Mailing Address, City, State, & Zip	Treasurer's Home Telephone	Number Trea	surer's Work Telepho	ne Number
	Deputy Treasurer's Name (if one appointed)	Deputy Treasurer's Email Add	ress (optional)		777
		()	(_)	
	Deputy Treasurer's Mailing Address, City, State, & Zip	Dep. Treasurer's Home Teleph	hone Number Dep	Treasurer's Work Te	ephone Number
4.	Additional Committee Information ==		4		
			있는 사용하는 100명 		et terskirkreselti -
	Additional Committee Officer's Name & Title (if any) Anendment	Additional Committee Officer	's Mailing Address, Cit	y, State, & Zip	
	Connected Organization's Name (if any)	Connected Organization's Ma	iling Address, City, Sta	te, & Zip	
	CANDIDATES: Do you have more than one candidate committee?	○ □ Yes (refer to instri	uctions on back)	П№	
5.	Official Bank Account Information (required by all committees)		actions on back,		
6.	Candidate Supported or Opposed (candidate committees must	include self, if candic	late)	ages of the or	
		()	()	
	Name & Mailing Address, City, State & Zip of Candidate	Telephone Number (Candidat	e Committees Only)	* * * * * * * * * * * * * * * * * * *	
	Election Date Office Sought & Political Subdivision	Political Party	Supp	ort or Oppose	<u> </u>
7					
7.	Ballot Measure Supported or Opposed (campaign committees m	iust complete this se	ction)		
	Name of Ballot Measure	Election Date & Political Subd	livision Supp	ort or Oppose	
3.	Signature(s) Check certification(s) & sign (required by all comm	nittees)			
J.	(1) 14 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	AND VIEW AND SERVED	Alexander Total (1992) (1994) (1994) Alexander (1994) (1994) (1994) (1994) Alexander (1994) (1994) (1994) (1994)		
	☐ I affirm and attest under penalty of perjury that information an further acknowledge that I am aware that any false statement or of	•		•	
	Nu. 19/X 0		t and the second of the second	ing and the second seco	್ರಾವ ಸಾಹತಿಚಿತ್ರ
	Committee Transport	Candidate (Candidate Commit	ttees Cabo		