

C-190879



Missouri Ethics Commission (MEC)

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

Missouri Ethics Commission

Office Use JAN 31 2020

Statement of Committee Organization

1. Statement Information

Date: June 6, 2019

Type: ☒ New ☐ Amended (if amending, enter MEC ID _____ & section changed _____)

2. Committee Information

Name of Committee: Citizens for Vernon Betts

Committee Mailing Address, City, State, & Zip: P.O. Box 78057

Telephone Number: (314) 226-3127

County Clerk or Board of Election Commissioners: City of Saint Louis

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

3. Treasurer/Deputy Treasurer Information

Treasurer's Name (First & Last): Phyllis Stewart

Treasurer's Mailing Address, City, State, & Zip: 4561 Alice Ave., St. Louis MO 63115

Treasurer's Home Telephone Number: (314) 484-2633

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): Gregg Christian - Campaign Manager

Additional Committee Officer's Mailing Address, City, State, & Zip: 2918 Lemay St. Louis, MO 63118

Connected Organization's Name (if any): N/A

Connected Organization's Mailing Address, City, State, & Zip: N/A

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 of Candidate: Vernon Betts

Telephone Number (Candidate Committees Only): (314) 226-3127

Election Date: 11/3/2020

Office Sought & Political Subdivision: Sheriff

Political Party: Democrat

Support or Oppose: 226-3127

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.

Committee Treasurer: Phyllis Stewart

Candidate (Candidate Committees Only):