



Statement of Committee Organization

1. Statement Information

Date: 04/14/2020

Type: ☐ New ☒ Amended (if amending, enter MEC ID C180691 & section changed 6)

2. Committee Information

Friends of Fred Kratky

Name of Committee

6001 Bishops Place

Committee Mailing Address, City, State, & Zip

(314) 440-5751

Telephone Number

St. Louis City Board of Election

County Clerk, Board of Election Commissioners, or Federal PAC/Out of State Committee

Official Committee Email Address

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

3. Treasurer/Deputy Treasurer Information

Anne Rezendes

Treasurer's Name (First & Last)

2633 Heger Ct St. Louis, MO 63110

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

(314) 448-0822

Treasurer's Home Telephone Number

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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)

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) ☒ No

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

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

Self

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

08/02/2022

Election Date

St. Rep Dist 82

Office Sought & Political Subdivision

(314) 440-5751

Telephone Number (Candidate Committees Only)

Democrat

Political Party

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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.

Committee Treasurer

Candidate (Candidate Committees Only)