



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

Missouri Ethics Commission

Office Use: MAY 15 2020

Received by Fax

Statement of Committee Organization

1. Statement Information

Date: 5/1/2020
 Type: New Amended (if amending, enter MEC ID A201374 & section changed _____)

2. Committee Information

CITIZENS FOR YOLONDA YOGI YANCIE

Name of Committee

1205 NORTH EUCLID AVE ST. LOUIS, MO. 63113

(314) 753-7859

Telephone Number

Official Committee Email Address _____ County Clerk, Board of Election Commissioners, or Federal PAC/Out of State Committee

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

3. Treasurer/Deputy Treasurer Information

BERNADETTE WASHINGTON

Treasurer's Name (First & Last) _____ Treasurer's Email Address (optional) _____

1205 NORTH EUCLID AVE ST. LOUIS, MO. 63113 (314) 378-9176 _____

Treasurer's Mailing Address, City, State, & Zip _____ Treasurer's Home Telephone Number _____ 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)

YOLONDA YOGI YANCIE 1206 NORTH EUCLID AVE ST. LOUIS, MO. 63113 (314) 753-7859 _____

Name & Mailing Address, City, State & Zip of Candidate _____ Telephone Number (Candidate Committees Only) _____

AUGUST 4, 2020 COMMITTEEWOMAN 18TH WARD DEMOCRATIC SUPPORT

Election Date _____ Office Sought & Political Subdivision _____ Political Party _____ Support or Oppose _____

7. Ballot Measure Supported or Opposed (campaign committees must complete this section)

DEMOCRATIC AUGUST 4, 2020 18TH WARD SUPPORT

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.

Bernadette Washington

Committee Treasurer

Yolonda Yogi Yancie

Candidate (Candidate Committees Only)