



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

Office Use:
A211906

Statement of Committee Organization

1. Statement Information

Date: 04/14/2021
Type: New Amended (if amending, enter MEC ID _____ & section changed _____)

2. Committee Information

Emily Hubbard for School Board
Name of Committee

942 Dover Pl. St. Louis, MO 63111 (769) 226-0243
Committee Mailing Address, City, State, & Zip Telephone Number

[REDACTED] St. Louis City Board of Elections
Official Committee Email Address County Clerk, Board of Election Commissioners, Federal PAC/Out of State Committee

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

3. Treasurer/Deputy Treasurer Information

John Tressler [REDACTED]
Treasurer's Name (First & Last) Treasurer's Email Address (optional)

4050 Utah St. St Louis, MO 63116 (636) 373-1399
Treasurer's Mailing Address, City, State, & Zip Phone 1 Phone 2

/ [REDACTED]
Deputy Treasurer's Name (if one appointed) Deputy Treasurer's Email Address (optional)

/ /
Deputy Treasurer's Mailing Address, City, State, & Zip Phone 1 Phone 2

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)

[REDACTED] [REDACTED] [REDACTED]
Name & Mailing Address, City, State, & Zip of Financial Institution Account Name Account Number

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

Emily Hubbard 942 Dover Pl St Louis, MO 63111 (769) 226-0243
Name & Mailing address, City, State, & Zip of Candidate Phone 1 Phone 2

04/04/2023 Boardmember/St. Louis City Non-Partisan
Election Date Office Sought & Political Subdivision Political Party Support or Oppose

School District
Office Sought & Political Subdivision

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)

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.

ELECTRONICALLY FILED Apr 14 2021 11:46 AM ELECTRONICALLY FILED Apr 14 2021 11:46 AM
Committee Treasurer Candidate (Candidate Committees Only)