



Office Use:  
 C222071

# Statement of Committee Organization

## 1. Statement Information

Date: 04/25/2022  
 Type:  New  Amended (if amending, enter MEC ID \_\_\_\_\_ & section changed \_\_\_\_\_)

## 2. Committee Information

Brunner For Missouri  
 Name of Committee

2271 Baxter Road Chesterfield, MO 63017 (615) 922-9460  
 Committee Mailing Address, City, State, & Zip Telephone Number

[REDACTED] St. Louis County 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

<u>Derek Grier</u> Treasurer's Name (First & Last)	<u>[REDACTED]</u> Treasurer's Email Address (optional)
<u>2271 Baxter Road Chesterfield, MO 63017</u> Treasurer's Mailing Address, City, State, & Zip	<u>(314) 229-7232</u> Phone 1 Phone 2
<u>/</u> Deputy Treasurer's Name (if one appointed)	<u>[REDACTED]</u> Deputy Treasurer's Email Address (optional)
<u>/</u> Deputy Treasurer's Mailing Address, City, State, & Zip	<u>/</u> 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)

<u>[REDACTED]</u> Name & Mailing Address, City, State, & Zip of Financial Institution	<u>[REDACTED]</u> Account Name	<u>[REDACTED]</u> Account Number
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## 6. Candidate Supported or Opposed (candidate committees must include self, if candidate)

<u>John Brunner 5 Ridgewood Street St. Louis, MO 63124</u> Name & Mailing address, City, State, & Zip of Candidate	<u>(615) 922-9460</u> Phone 1 Phone 2
<u>08/02/2022</u> <u>State</u> Election Date Office Sought & Political Subdivision	<u>Republican</u> <u>House of Representatives</u> Political Party Support or Oppose

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

<u>/</u> Name of Ballot Measure	<u>/</u> Election Date & Political Subdivision	<u>/</u> Support or Oppose
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## 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 25 2022 02:11 PM ELECTRONICALLY FILED Apr 25 2022 02:11 PM  
 Committee Treasurer Candidate (Candidate Committees Only)