

Committee Treasurer

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

Statement of Committee Organization

Office Use:	
C222152	

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Statement Information	on .			
Date: 06/09/2022 Type: New	— Amended (if amending, enter MEC ID	& section changed		
Committee Information		& section c		
CREW PAC	JII			
Name of Committee				
125 Royal Avenue Sain			(314) 991-7740 Telephone Number	
Committee Mailing Address, City, S [REDACTED]	itate, & Zip	St. Louis County Board of E	•	
Official Committee Email Address			ioners, Federal PAC/Out of State Committee	
Committee Type:	Campaign Candidate Continu	ing(PAC) Debt Service	Exploratory Political Pary	
Treasurer/Deputy Tre	asurer Information			
Nicholas Kasoff		[REDACTED]		
Treasurer's Name (First & Last)		Treasurer's Email Address (optional)		
125 Royal Avenue Saint Louis, MO 63135 Treasurer's Mailing Address, City, State, & Zip		(314) 991-7740 Phone 1	Phone 2	
		[REDACTED]		
Deputy Treasurer's Name (if one a	ppointed)	Deputy Treasurer's Email Address (option	nal)	
Deputy Treasurer's Mailing Addres	s, City, State, & Zip	Phone 1	Phone 2	
Additional Committee	Information			
Additional Committee Officer's Na	ne & Title (if any)	Additional Committee Officer's Mailing Address, City, State, & Zip		
Connected Organization la Name / iii	i de la constanta de la consta	Course the different in the Marilian Address	Cit. Chata 0 7:m	
CANDIDATES: Do your		Connected Organization's Mailing Addres	· · · · · · · · · · · · · · · · · · ·	
	nave more than one candidate committee		is on back)	
Official Bank Account	Information (required by all committees			
[REDACTED] Name & Mailing Address, City, Stat	e, & Zip of Financial Institution	[REDACTED] Account Name	[REDACTED] Account Number	
Candidate Supported	or Opposed (candidate committees mus	t include self. if candidate)		
	Mike Person Alan Gray	,		
Name & Mailing address, City, Stat		Phone 1	Phone 2	
	State Representative State		Oppose Oppose Oppose	
	Representative State Representative State		Oppose	
	Representative			
Election Date	Office Sought & Political Subdivision	Political Party	Support or Oppose	
Ballot Measure Suppo	rted or Opposed (campaign committees	must complete this section)		
Name of Ballot Measure		Election Date & Political Subdivision	Support or Oppose	
Signatur <u>e(s) Check cer</u>	tification(s) & sign (required by all comn			
	nder penalty of perjury that information a		olete, true, and accurate. I	
	hat I am aware that any false statement	· · · · · · · · · · · · · · · · · · ·		
FLECTRONICALLY FILED Jun 10 2022 08:24 AM		FLECTRONICALLY FILED Jun 10 2022 08:24 AM		

Candidate (Candidate Committees Only)

MO 300-1308 Packet (Rev. 10/2019)