

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:	
C232665	

. Statement Information	on			
Date: <u>12/17/2023</u>	_			
Type: New	Amended (if amending, enter MEC ID	& section changed		
. Committee Informati	ion			
Friends of Marty Joe N	Murray			
Name of Committee 3942 Iowa Ave Saint Louis , MO 63104			(314) 329-1868	
Committee Mailing Address, City, State, & Zip		Telephone Number		
[REDACTED] Official Committee Email Address		St. Louis City Board of Elections County Clerk, Board of Election Commissioners, Federal PAC/Out of State Committee		
Committee Type:	Campaign Candidate Continu	ing(PAC) Debt Service E		
Treasurer/Deputy Tre	easurer Information			
Courtney McDermott	:	[REDACTED]		
Treasurer's Name (First & Last)		Treasurer's Email Address (optional)		
1412 Hebert St. Saint Treasurer's Mailing Address, City,		(314) 277-0802 Phone 1	Phone 2	
Andrea Huegatter		[REDACTED]		
Deputy Treasurer's Name (if one a	appointed)	Deputy Treasurer's Email Address (optional)		
1532 Mississippi Ave S		(314) 324-5816 Phone 1	Phone 2	
		Priorie 1	Priorie 2	
. Additional Committee	e Information			
Additional Committee Officer's Na	ame & 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	e? Yes (refer to instruction	s on back) No	
Official Bank Account	Information (required by all committees			
[REDACTED]		[REDACTED]	[REDACTED]	
Name & Mailing Address, City, Sta	<u> </u>	Account Name	Account Number	
Candidate Supported	or Opposed (candidate committees mus	t include self, if candidate)		
Marty Murray 3942 Io	owa Ave Saint Louis, MO 63118	(314) 329-1868 Phone 1	Phone 2	
	State	_	THORC 2	
08/06/2024	Representative/Missouri	Democrat		
Election Date	House of Representatives Office Sought & Political Subdivision	Political Party	Support or Oppose	
	orted or Opposed (campaign committees	,	support of Oppose	
	_		-	
Name of Ballot Measure Signature(s) Check certification(s) & sign (required by all comments of the signature).		Election Date & Political Subdivision	Support or Oppose	
	nder penalty of perjury that information a that I am aware that any false statement o			
ELECTRONICALLY FILE	ED Dec 17 2023 10:30 PM	ELECTRONICALLY FILED Dec	ELECTRONICALLY FILED Dec 17 2023 10:30 PM	
Committee Treasurer		Candidate (Candidate Committees Only)		