

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:	
C242968	

. Statement Information	an		
Date: 05/09/2024			
	— Amended (if amending, enter MEC ID	& section c	hanged
Committee Informati	on		
Pattie Mansur 4 Misso	uri		
Name of Committee	thy NAO 54114		(016) 674 2745
PO Box 8470 Kansas Committee Mailing Address, City,			(816) 674-2745 Telephone Number
[REDACTED] Official Committee Email Address		Kansas City County Board of Elections County Clerk, Board of Election Commissioners, Federal PAC/Out of State Committee	
Committee Type:	Campaign Candidate Continu		Exploratory Political Pary
Treasurer/Deputy Tre	asurer Information		
Susan Stanton		[REDACTED]	
Treasurer's Name (First & Last)		Treasurer's Email Address (optional)	
4900 Central Kansas C Treasurer's Mailing Address, City,		(816) 916-0540 Phone 1	Phone 2
Laura Loyacono		[REDACTED]	
Deputy Treasurer's Name (if one a		Deputy Treasurer's Email Address (optional)	
11723 Jefferson Street Deputy Treasurer's Mailing Addres	: Kansas City, MO 64114 ss, City, State, & Zip	(816) 665-3823 Phone 1	Phone 2
Additional Committee	Information		
Additional Committee Officer's Na	me & Title (if any)	Additional Committee Officer's Mailing Address, City, State, & Zip	
Connected Organization's Name (i	f any)	Connected Organization's Mailing Addres	s, City, State, & Zip
CANDIDATES: Do you l	nave more than one candidate committee	e? Yes (refer to instruction	ns on back) No
Official Bank Account	Information (required by all committees	s)	
[REDACTED]		[REDACTED]	[REDACTED]
Name & Mailing Address, City, Stat	•	Account Name	Account Number
. Candidate Supported or Opposed (candidate committees mus Pattie Mansur 421 West 68th Street Kansas City, MO			
64114	est both street Kansas City, MO	(816) 674-2742	
Name & Mailing address, City, State, & Zip of Candidate		Phone 1	Phone 2
08/06/2024	State (Missauri	Democrat	
	Representative/Missouri House of Representatives		
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
Signature(s) Check cer	tification(s) & sign (required by all comn	nittees)	
	nder penalty of perjury that information a		
FLECTRONICALLY FILED May 9 2024 12:24 PM		FLECTRONICALLY FILED May 9 2024 12:24 PM	

Candidate (Candidate Committees Only)

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