

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

Office Use: C253262

Statement of Committee Organization

1.	Statement Information			
	Date: 01/03/2025			
	Type: New Amended (if amending, enter MEC ID	& section cha	& section changed)	
2.	ommittee Information			
	Committee to Elect Zach Davis for School Board			
	Name of Committee		(214) 212 7200	
	4358 Enright Ave Saint Louis, MO 63108 Committee Mailing Address, City, State, & Zip		(314) 313-7298 Telephone Number	
	[REDACTED]	St. Louis City Board of Election	ns	
	Official Committee Email Address	County Clerk, Board of Election Commissione	rs, Federal PAC/Out of State Committee	
Committee Type: Campaign Candidate Continuing(PAC) Debt Service			oloratory Political Pary	
3.	Treasurer/Deputy Treasurer Information			
	Stanley Ealker	[REDACTED]		
	Treasurer's Name (First & Last)	Treasurer's Email Address (optional)		
	1145 Apache Drive Saint Louis, MO 63033	(314) 258-2934		
	Treasurer's Mailing Address, City, State, & Zip	Phone 1	Phone 2	
	Deputy Treasurer's Name (if one appointed)	[REDACTED] 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)	tion'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 of	on back) No	
5.	fficial 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 i	ported or Opposed (candidate committees must include self, if candidate)		
	Zacheriah Davis 4358 Enright Ave Saint Louis, MO 63108	(314) 313-7298		
	Name & Mailing address, City, State, & Zip of Candidate	Phone 1	Phone 2	
	04/08/2025 Boardmember/St. Louis City School District	Democrat		
	Election Date Office Sought & Political Subdivision	Political Party	Support or Oppose	
7.	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 puni	shable under Ch. 575 RSMo.	
		ELECTRONICALLY FILED Jan 3	2025 02:02 AM	
	Committee Treasurer	Candidate (Candidate Committees Only)		