



Statement of Committee Organization

1. Statement Information

Date: February 6, 2013
 Type: New Amended (if amending, enter MEC ID A131041 & section changed _____)

2. Committee Information

DAN HURT FOR COUNCIL
 Name of Committee
PO BOX 701, ST. LOUIS, MO 63006 (636) 532-2035
 Committee Mailing Address, City, State, & Zip Telephone Number
St. Louis County Board of Election Commissioners
 Official Committee Email Address County Clerk or Board of Election Commissioners
 Committee Type: Campaign Candidate Continuing (PAC) Debt Service Exploratory Political Party

3. Treasurer/Deputy Treasurer Information

Mark E. Mersmann
 Treasurer's Name (First & Last) 2028 Sunflower Ct., Chesterfield, MO 63017
 Treasurer's Mailing Address, City, State, & Zip (636) 532-1306 (314) 308-5119
 Treasurer's Email Address (optional) Treasurer's Home Telephone Number Treasurer's Work Telephone Number
 Deputy Treasurer's Name (if one appointed) Deputy Treasurer's Email Address (optional)
 Deputy Treasurer's Mailing Address, City, State, & Zip Dep. Treasurer's Home Telephone Number Dep. Treasurer's Work Telephone Number

4. Additional Committee Information

David Banks, Committee Chair
 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)

Name & Mailing Address, City, State, & Zip of Financial Institution Account Name Account Number

6. Candidate Supported or Opposed (candidate committees must include self, if candidate)

Dan Hurt, 2035 Emerald Crest Ct., Chesterfield, MO 63017 (636) 532-2035
 Name & Mailing Address, City, State & Zip of Candidate Telephone Number (Candidate Committees Only)
April 2, 2013 City Council, Chesterfield, MO
 Election Date Office Sought & Political Subdivision Political Party Support or Oppose
Ward 3

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)

I 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.
Mark E. Mersmann David Banks
 Committee Treasurer Candidate (Candidate Committees Only)