



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

Office Use: BB JL

Statement of Committee Organization

1. Statement Information

Date: 4/1/15
 Type: New Amended (if amending, enter MEC ID C151053 & section changed 6)

2. Committee Information

Greitens for Missouri
 Name of Committee
4579 Laclede Ave #138, St. Louis MO 63108
(314) 675-0197
 Telephone Number

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

Jeff Stuerman
 Treasurer's Name (First & Last)
4579 Laclede Ave #138, St. Louis MO 63108
 Treasurer's Mailing Address, City, State, & Zip
 Treasurer's Email Address (optional) _____
(314) 6750197
 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 Home Telephone Number Deputy Treasurer's Work Telephone Number

4. Additional Committee Information

AMENDMENT
 Additional Committee Officer's Name & Telephone Number _____
 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)

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

Eric Greitens 4522 Maryland Ave St Louis 63108
 Name & Mailing Address, City, State & Zip of Candidate
8/2/2016 Governor Republican Support
 Election Date Office Sought & Political Subdivision Political Party Support or Oppose
(314) 675-0197 _____
 Telephone Number (Candidate Committees Only)

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. 535 RSMo.

Jeff Stuerman
 Committee Treasurer

[Signature]
 Candidate (Candidate Committees Only)