FEC FORM 1		STATEME ORGANIZ		Off	PAGE 1 / 4
1. NAME OF COMMITTEE (ir	n full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
			SS 		
		3309 ARSENAL ST.			
ADDRESS (number a					
is changed		ST LOUIS		MO 631 STATE ▲	18
COMMITTEE'S E-MA		SS			
★ (Check if a is changed		katy.geppert@gmail.co	om 		
		Optional Second E-Mail Ad kathryn@KEJDCom			
COMMITTEE'S WEB	address	DRESS (URL)			
2. DATE	M / D 4 18	D / Y Y Y Y 2018			
3. FEC IDENTIFIC	CATION NU		00665216		
4. IS THIS STATEM	MENT X	NEW (N) OR	AMENDED (A)		
I certify that I have e	examined th	is Statement and to the best	of my knowledge and belief	it is true, correct and	complete.
Type or Print Name	of Treasurer	Drennen, Kathryn, , ,			
Signature of Treasure	er Drenn	en, Kathryn, , ,	[Electronically Filed]	Date 05	D D / Y Y Y Y 22 2019
NOTE: Submission of			may subject the person signing		penalties of 2 U.S.C. §437g.
Office Use Only			For further information Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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FEC F	orm 1 (Revised 02/2009) Page 2
. TYPE OF (COMMITTEE
Candidat	e Committee:
(a) 🗶	This committee is a principal campaign committee. (Complete the candidate information below.)
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)
Name of Candidate	
Candidate Party Affilia	tion Office Sought: X House Senate President District 03
(C)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name of Candidate	
Party Co	
(d)	This committee is a(National, State or subordinate) committee of the(Democratic, Republican, etc.) Party.
Political /	Action Committee (PAC):
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
	Corporation Corporation w/o Capital Stock Labor Organization
	Membership Organization Trade Association Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
	In addition, this committee is a Lobbyist/Registrant PAC.
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)
Joint Fun	draising Representative:
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.
Cor	nmittees Participating in Joint Fundraiser
1.	
2.	FEC ID number
3.	FEC ID number
4.	

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

KATY GEPPERT FOR CONGRESS

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

N					
	Mailing Address				
		CITY		STATE	ZIP CODE
	Relationship: Connected	Organization Affiliated Committee	Joint Fundraising	Representative	Leadership PAC Sponsor
7.	books and records.	ify by name, address (phone number op	tional) and positi	on of the person in p	possession of committee
	Drennen, K Full Name	athryn, , ,			
	Mailing Address	347 Hazel Avenue			
		St Louis		MO 63119)
	Title or Position	CITY		STATE	ZIP CODE
			Telephone num	1ber –	
8.	Treasurer: List the name and any designated agent (e.g., a	address (phone number optional) of the ssistant treasurer).	treasurer of the	committee; and the	name and address of

Full Name of Treasurer	Drennen, Kathryn, , ,
Mailing Address	347 Hazel Avenue
	St Louis MO 63119
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number

FEC Form 1 (Revised 02/2009)

																							_
Full Name of Designated Agent				 																			
Mailing Address																							
					CI	TΥ								STA	ΛΤΕ			ZIF	D C	OD	Е		
Title or Position																							
									Tele	eph	one	e ni	umt	ber									

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

	ank		
Mailing Address	135 W Lockwood Ave		
	Webster Groves		53119
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY	STATE	ZIP CODE