



MISSOURI ETHICS COMMISSION
COMMITTEE STATEMENT OF LIMITED ACTIVITY

1. DATE OF REPORT OFFICE USE ONLY

JAN 15,
2006



INSTRUCTIONS ON REVERSE SIDE

M.E.C. ID NO. CO10327

2. FULL NAME OF COMMITTEE
COMMITTEE TO ELECT YARHETT EL-AMIN

3. COMMITTEE MAILING ADDRESS
5058 DURANT AVE

4. COMMITTEE TELEPHONE NUMBER
 HOME: WORK:

CITY/STATE/ZIP
ST. LOUIS, MO 63115

5. TREASURER'S NAME
SAMUEL ANSARI

6. TREASURER'S MAILING ADDRESS
5058 DURANT AVE ST. LOUIS, MO 63115

7. TREASURER'S TELEPHONE NUMBER
 HOME: WORK:

8. DEPUTY TREASURER'S NAME CHECK IF NO DEPUTY TREASURER

9. DEPUTY TREASURER'S MAILING ADDRESS

10. DEPUTY TREASURER'S TELEPHONE NUMBER
 HOME: WORK:

CITY/STATE/ZIP

11. DATE OF ELECTION

12. TYPE OF ELECTION (CHECK ONE)
 PRIMARY GENERAL SPECIAL

13. TIME PERIOD COVERED BY THIS STATEMENT
 FROM OCTOBER 1, 2005 THROUGH DECEMBER 31, 2005

14. IF CANDIDATE COMMITTEE, LIST CANDIDATE'S NAME, OFFICE SOUGHT, POLITICAL SUBDIVISION

REPUBLICAN DEMOCRAT _____

15. TYPE OF REPORT

OTHER _____

8 DAYS BEFORE ELECTION COMMITTEE QUARTERLY REPORT
 JAN 15 APRIL 15 JULY 15 OCT 15

30 DAYS AFTER ELECTION

15 DAY AFTER CAUCUS NOMINATION 15 DAYS AFTER PETITION DEADLINE

16. TREASURER'S STATEMENT
 I CERTIFY THAT NEITHER THE AGGREGATE AMOUNT OF CONTRIBUTIONS RECEIVED NOR THE AGGREGATE AMOUNT OF EXPENDITURES MADE BY THE COMMITTEE EXCEEDED FIVE HUNDRED DOLLARS NOR WAS AN AGGREGATE AMOUNT EXCEEDING THE AGGREGATE AMOUNT ALLOWED BY STATUTE RECEIVED FROM ANY SINGLE CONTRIBUTOR DURING THE REPORTING PERIOD STATED IN ITEM 13 ABOVE.

TREASURER'S SIGNATURE

17. CANDIDATE'S STATEMENT (CANDIDATE COMMITTEES ONLY)
 I CERTIFY THAT NEITHER THE AGGREGATE AMOUNT OF CONTRIBUTIONS RECEIVED NOR THE AGGREGATE AMOUNT OF EXPENDITURES MADE BY THE COMMITTEE EXCEEDED FIVE HUNDRED DOLLARS NOR WAS AN AGGREGATE AMOUNT EXCEEDING THE AGGREGATE AMOUNT ALLOWED BY STATUTE RECEIVED FROM ANY SINGLE CONTRIBUTOR DURING THE REPORTING PERIOD STATED IN ITEM 13 ABOVE.

CANDIDATE'S SIGNATURE

MISSOURI ETHICS
 COMMISSION
 JAN 17 2006
 HAND DELIVERED



MISSOURI ETHICS COMMISSION
 COMMITTEE DISCLOSURE REPORT COVER PAGE

1. DATE OF REPORT JAN 15, 2006
OFFICE USE ONLY

INSTRUCTIONS ON REVERSE SIDE

M.E.C. ID NO. CO10327

2. FULL NAME OF COMMITTEE COMMITTEE TO ELECT VAPHETT EL-AMIN	
3. COMMITTEE MAILING ADDRESS 5058 DURANT AVE	4. COMMITTEE TELEPHONE NUMBER
CITY/STATE/ZIP St. Louis, MO 63115	
5. TREASURER'S NAME SAMUEL ANSARI	
6. TREASURER'S MAILING ADDRESS 5058 DURANT AVE.	7. TREASURER'S TELEPHONE NUMBER HOME: WORK:
CITY/STATE/ZIP St. Louis, MO 63115	
8. DEPUTY TREASURER'S NAME <input type="checkbox"/> CHECK IF NO DEPUTY TREASURER	
9. DEPUTY TREASURER'S MAILING ADDRESS	10. DEPUTY TREASURER'S TELEPHONE NUMBER HOME: WORK:
11. DATE OF ELECTION	12. TYPE OF ELECTION (CHECK ONE) <input type="checkbox"/> PRIMARY <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIAL
13. TIME PERIOD COVERED BY THIS STATEMENT FROM THROUGH	
14. CANDIDATE COMMITTEES ONLY: LIST CANDIDATE'S NAME, ADDRESS, PHONE, OFFICE SOUGHT, POLITICAL SUBDIVISION AND POLITICAL PARTY VAPHETT EL-AMIN 5058 DURANT AVE ST. LOUIS, MO 63115 (314) 385-3378 STATE REP. 57TH DIST	15. TYPE OF REPORT: <input type="checkbox"/> 15 DAY AFTER CAUCUS NOMINATION <input checked="" type="checkbox"/> COMMITTEE QUARTERLY REPORT <input type="checkbox"/> JAN 15 <input type="checkbox"/> APRIL 15 <input type="checkbox"/> JULY 15 <input type="checkbox"/> OCT 15 <input type="checkbox"/> 8 DAYS BEFORE ELECTION <input type="checkbox"/> 30 DAYS AFTER ELECTION <input type="checkbox"/> TERMINATION (ATTACH FORM CO-3) <input type="checkbox"/> SEMIANNUAL DEBT REPORT <input type="checkbox"/> JAN 15 <input type="checkbox"/> JULY 15 <input type="checkbox"/> ANNUAL SUPPLEMENTAL, JAN 15 <input type="checkbox"/> 15 DAYS AFTER PETITION DEADLINE <input type="checkbox"/> OTHER _____ <input type="checkbox"/> AMENDING PREVIOUS REPORT DATED _____ - _____ - 20 _____
<input type="checkbox"/> CHECK IF INCUMBENT <input type="checkbox"/> REPUBLICAN <input checked="" type="checkbox"/> DEMOCRAT <input type="checkbox"/> _____	
16. COMMITTEE TREASURER'S SIGNATURE I CERTIFY THAT THIS REPORT, COMPRISED OF THIS COVER PAGE AND ALL ATTACHED FORMS, IS COMPLETE, TRUE AND ACCURATE.	
TREASURER'S SIGNATURE 	
17. CANDIDATE'S SIGNATURE (CANDIDATE COMMITTEES ONLY) I CERTIFY THAT THIS REPORT, COMPRISED OF THIS COVER PAGE AND ALL ATTACHED FORMS, IS COMPLETE, TRUE AND ACCURATE.	
CANDIDATE'S SIGNATURE	

MISSOURI ETHICS COMMISSION
JAN 17 2006
HAND DELIVERED