



**MISSOURI ETHICS COMMISSION
STATEMENT OF COMMITTEE ORGANIZATION**

MEC ID # 2091041

OFFICE USE ONLY
[Handwritten initials]

STATEMENT DATE 8/24/2009		TYPE OF STATEMENT (CHECK ONE) <input type="checkbox"/> NEW <input checked="" type="checkbox"/> AMENDED		IF AMENDED, LIST ITEMS CHANGED (LINE NUMBERS) Add savings account, one new phone #	
3. FULL NAME OF COMMITTEE Scott Sifton for State Representative					
4. COMMITTEE MAILING ADDRESS ADDRESS: 9814 Berwick Place CITY / STATE / ZIP: St. Louis, MO 63123				5. TELEPHONE NUMBER (314) 631-0445	
6. TREASURER'S NAME Stephen Pope					
7. TREASURER'S MAILING ADDRESS ADDRESS: 9627 Dana Avenue CITY / STATE / ZIP: St. Louis, MO 63123				8. TELEPHONE NUMBER HOME: (314) 544-1726 WORK: (314) 644-4305	
9. DEPUTY TREASURER'S NAME <input type="checkbox"/> CHECK IF NO DEPUTY TREASURER Scott Sifton					
10. DEPUTY TREASURER'S ADDRESS ADDRESS: 9814 Berwick Place CITY / STATE / ZIP: St. Louis, MO 63125				11. TELEPHONE NUMBER HOME: (314) 631-0445 WORK: (314) 480-1500	
12. OTHER COMMITTEE OFFICERS (IF ANY) A. NAME B. ADDRESS C. TITLE N/A				13. IF CANDIDATE HAS OTHER COMMITTEES, IS THIS COMMITTEE DESIGNATED AS THE AGGREGATING COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	
14. OFFICIAL FUND DEPOSITORY: CHECKING ACCOUNT FIRST, THEN ANY SAVINGS ACCOUNT(S) A. NAME & ADDRESS OF BANK, SAVING & LOAN, OR CREDIT UNION Montgomery Bank 3808 Union Road, St. Louis, MO 63125					
		B. ACCOUNT NAME Scott Sifton for State Representative: Checking Savings		C. ACCOUNT NO.	
15. TYPE OF COMMITTEE <input checked="" type="checkbox"/> CANDIDATE <input type="checkbox"/> POLITICAL PARTY <input type="checkbox"/> CONTINUING <input type="checkbox"/> CAMPAIGN <input type="checkbox"/> EXPLORATORY <input type="checkbox"/> DEBT SERVICE					
16. CANDIDATE SUPPORTED (CANDIDATE COMMITTEES ONLY) A. NAME B. ADDRESS C. TELEPHONE NO. D. POLITICAL PARTY Scott Sifton 9814 Berwick Place (314) 631-0445 Democrat					
17. CONNECTED ORGANIZATION (IF ANY) (CONTINUING COMMITTEES ONLY) A. NAME B. ADDRESS N/A					
AMENDMENT					
18. CANDIDATES SUPPORTED OR OPPOSED A. NAME(S) OF CANDIDATE(S) B. ELECTION DATE C. OFFICE SOUGHT D. POLITICAL SUBDIVISION E. SUPPORT F. OPPOSE Scott Sifton 8/3/10 State Representative 96th District <input checked="" type="checkbox"/> <input type="checkbox"/>					
19. BALLOT MEASURE(S) SUPPORTED OR OPPOSED A. NAME(S) OF MEASURE(S) B. ELECTION DATE C. SUBJECT AND POLITICAL SUBDIVISION E. SUPPORT F. OPPOSE N/A <input type="checkbox"/> <input type="checkbox"/>					
20. COMMITTEE TREASURER'S SIGNATURE I CERTIFY THAT THIS STATEMENT IS COMPLETE, TRUE AND ACCURATE. <i>Stephen Pope</i> TREASURER'S SIGNATURE			21. CANDIDATE'S SIGNATURE (CANDIDATE COMMITTEES ONLY) I CERTIFY THAT THIS STATEMENT IS COMPLETE, TRUE AND ACCURATE. <i>[Signature]</i> CANDIDATE'S SIGNATURE		

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COMMISSION
SEP 02 2009