



**MISSOURI ETHICS COMMISSION
STATEMENT OF COMMITTEE ORGANIZATION**

MEC ID # CO91291

OFFICE USE ONLY
BO *SW*

STATEMENT DATE November 24, 2009	TYPE OF STATEMENT (CHECK ONE) <input checked="" type="checkbox"/> NEW <input type="checkbox"/> AMENDED	IF AMENDED, LIST ITEMS CHANGED (LINE NUMBERS)
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3. FULL NAME OF COMMITTEE **Democratic Attorneys General Association - Missouri**

4. COMMITTEE MAILING ADDRESS ADDRESS: 4801 Main Street Suite 1000 CITY / STATE / ZIP: Kansas City, MO 64112	5. TELEPHONE NUMBER (720) 570-9200
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6. TREASURER'S NAME **Adam P. Sachs**

7. TREASURER'S MAILING ADDRESS ADDRESS: 4801 Main Street Suite 1000 CITY / STATE / ZIP: Kansas City, MO 64112	8. TELEPHONE NUMBER HOME: (816) 582-2416 WORK:
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9. DEPUTY TREASURER'S NAME CHECK IF NO DEPUTY TREASURER

10. DEPUTY TREASURER'S ADDRESS ADDRESS: CITY / STATE / ZIP :	11. TELEPHONE NUMBER HOME: WORK:
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12. OTHER COMMITTEE OFFICERS (IF ANY) A. NAME B. ADDRESS C. TITLE	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
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14. OFFICIAL FUND DEPOSITORY: CHECKING ACCOUNT FIRST, THEN ANY SAVINGS ACCOUNT(S)		
A. NAME & ADDRESS OF BANK, SAVING & LOAN, OR CREDIT UNION Bank of America 100 Market Street St. Louis, MO 63101	B. ACCOUNT NAME Democratic Attorneys General Association - Missouri	C. ACCOUNT NO.

15. TYPE OF COMMITTEE
 CANDIDATE POLITICAL PARTY CONTINUING CAMPAIGN EXPLORATORY DEBT SERVICE

16. CANDIDATE SUPPORTED (CANDIDATE COMMITTEES ONLY)			
A. NAME	B. ADDRESS	C. TELEPHONE NO.	D. POLITICAL PARTY

17. CONNECTED ORGANIZATION (IF ANY) (CONTINUING COMMITTEES ONLY)	
A. NAME Democratic Attorneys General Association, Inc.	B. ADDRESS 1580 Lincoln Street Suite 1125 Denver, CO 80203

18. CANDIDATES SUPPORTED OR OPPOSED				
A. NAME(S) OF CANDIDATE(S) Chris Koster	B. ELECTION DATE Nov. 6, 2012	C. OFFICE SOUGHT Attorney General	D. POLITICAL SUBDIVISION Statewide	E. CHECK ONE <input checked="" type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE

19. BALLOT MEASURE(S) SUPPORTED OR OPPOSED				
A. NAME(S) OF MEASURE(S)	B. ELECTION DATE	C. SUBJECT AND POLITICAL SUBDIVISION	E. CHECK ONE <input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE	

20. COMMITTEE TREASURER'S SIGNATURE

I CERTIFY THAT THIS STATEMENT IS COMPLETE, TRUE AND ACCURATE.

Adam P. Sachs

TREASURER'S SIGNATURE

21. CANDIDATE'S SIGNATURE (CANDIDATE COMMITTEES ONLY)

I CERTIFY THAT THIS STATEMENT IS COMPLETE, TRUE AND ACCURATE.

MISSOURI ETHICS COMMISSION
NOV 25 2009

CANDIDATE'S SIGNATURE