



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: 12/11/12
 Type: New Amended (if amending, enter MEC ID C091061 & section changed 2, 6)

2. Committee Information

Scott Sifton for State Senate
 Name of Committee
9785 Mackenzie Road, Ste. 100, St. Louis, MO 63123
 Committee Mailing Address, City, State, & Zip
(314) 631-0445
 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

Timothy Kinealy
 Treasurer's Name (First & Last)
9785 Mackenzie Road, Ste. 100, St. Louis, MO 63123
 Treasurer's Mailing Address, City, State, & Zip
Scott Sifton
 Deputy Treasurer's Name (if one appointed)
9814 Berwick Place, St. Louis, MO 63123
 Deputy Treasurer's Mailing Address, City, State, & Zip
(314) 631-4513
 Treasurer's Home Telephone Number
(314) 544-1123
 Treasurer's Work Telephone Number
(314) 631-0445
 Deputy Treasurer's Home Telephone Number
(314) 480-1500
 Deputy Treasurer's Work Telephone Number

4. Additional Committee Information

AMENDMENT
 Additional Committee Officer's Name & Title (if any)
 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)

Name & Mailing Address, City, State, & Zip of Financial Institution
 Account Name
 Account Number

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

Scott Sifton
 Name & Mailing Address, City, State & Zip of Candidate
8/2/16
 Election Date
Senate, Dist. 1
 Office Sought & Political Subdivision
(314) 631-0445
 Telephone Number (Candidate Committees Only)
Democrat
 Political Party
Support
 Support or Oppose

7. Ballot Measure Supported or Opposed (campaign committees must complete this section)

N/A
 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. 575 RSMo.
[Signature]
 Committee Treasurer
[Signature]
 Candidate (Candidate Committees Only)

MISSOURI ETHICS COMMISSION