Image# 12950196349 PAGE 1 / 4

FEC FORM 1		TATEMEN RGANIZA						Office U	Jse Only		
1. NAME OF COMMITTEE (in		Check if name s changed)	Exampl over the	e:If typing, e lines.	type	12FE	E4M5				
Russ Carn	ahan for Co	ongress				1 1					
ADDRESS (number a	PO Box	190033									
(Check if ac	ddress										
is changed)	St. Loui	s 				MO		63119			
		(	CITY			STATE			ZIP C	ODE	
	l i i	provide only one e-@KEJDCompliance		ss)							
X (Check if is change		1 1 1 1 1									
COMMITTEE'S WEB	PAGE ADDRESS (U	RL)									
(Check if											
is change	d)										
2. DATE 01	M / D D / Y 25	2012									
3. FEC IDENTIFIC	CATION NUMBER	C co	00493684								
4. IS THIS STATEM	MENT X NEW	(N) OR		AMENDE	D (A)						
I certify that I have e	examined this Stateme	ent and to the best	of my kno	wledge and	belief it i	is true, d	correct a	and con	nplete.		
Type or Print Name	of Treasurer Mr John	n R. Truman									
Signature of Treasure	Mr John R. Truman		[E	lectronically	Filed]	Date	M M M	/ D	24	20	012
NOTE: Submission of	false, erroneous, or inc	omplete information i		•				the pena	alties of	2 U.S.C	. §437g.
Office			For	r further infor	mation co	ntact:		EE	C EO	DM 4	

Office Use Only			For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	FEC FORM 1 (Revised 02/2009)
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FE	C Fo	rm 1 (Revised 02/2009)	Page <b>2</b>
		OMMITTEE	
Cand		e Committee:	
(a)	×	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	Ш	This committee is an authorized committee, and is NOT a principal campaign committee. (Compleinformation below.)	ete the candidate
Name ( Candid		Russ Carnahan	
Candid	late	Office	State
Party A	Affiliation	DEM	District 03
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candid			
Party	Con	nmittee:	
(d)		NIAT '	emocratic, epublican, etc.) Party.
Politic	cal A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization or line 6.	cted organization is a:
		Corporation Corporation w/o Capital Stock	_abor 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 segr committee. (i.e., nonconnected committee)	egated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint I	Fund	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

FEC Form 1 (Rev		Page 3
Write or Type Committee		
	nan for Congress	
6. Name of Any Connec	cted Organization, Affiliated Committee, Joint Fundraising Representati	ive, or Leadership PAC Sponsor
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Conr	nected Organization Affiliated Committee Joint Fundraising Represe	entative Leadership PAC Sponsor
Custodian of Records books and records.	s: Identify by name, address (phone number optional) and position of the	e person in possession of committee
	Kathryn E.J. Drennen	ı
Full Name	347 Hazel Avenue	
Mailing Address		
		03440
	St. Louis MO	63119
Title or Position	CITY STATE	ZIP CODE
Deputy Treasurer	Telephone number	314   -   968   -   2600
3. <b>Treasurer:</b> List the name any designated agent (6)	ne and address (phone number optional) of the treasurer of the commit e.g., assistant treasurer).	tee; and the name and address of
	John R. Truman	
of Treasurer	6226 Alano Avenue	
Mailing Address		
	0.00	
	Clayton	63105
Title or Position Treasurer	CITY STATE	ZIP CODE  314   968   2600
<u> </u>	Telephone number	

	evised 02/2009)	
Full Name of Designated Agent Mrs.	Kathryn E.J. Drennen	
Mailing Address	347 Hazel Avenue	
· ·		
	St. Louis MO	63119
	CITY STATE	ZIP CODE
Title or Position  Deputy Treasurer		314 - 968 - 2600
Banks or Other Depos	sitories: List all banks or other depositories in which the committee depos	sits funds, holds accounts, rents
safety deposit boxes or	r maintains funds.	
safety deposit boxes or Name of Bank, Deposit		
Name of Bank, Deposit	tory, etc.	
Name of Bank, Deposit	tory, etc.	
Name of Bank, Deposit	tory, etc.	
Name of Bank, Deposit	tory, etc.  C Bank  2101 S Brentwood Blvd	
Name of Bank, Deposit	tory, etc.	63144
Name of Bank, Deposit	tory, etc.  C Bank  2101 S Brentwood Blvd	63144 ZIP CODE
Name of Bank, Deposit	C Bank  2101 S Brentwood Blvd  Brentwood  CITY  STATE	
Name of Bank, Deposit  PN  Mailing Address	C Bank  2101 S Brentwood Blvd  Brentwood  CITY  STATE	
Name of Bank, Deposit  Mailing Address  Name of Bank, Deposit	C Bank  2101 S Brentwood Blvd  Brentwood  CITY  STATE	
Name of Bank, Deposit  PN  Mailing Address	C Bank  2101 S Brentwood Blvd  Brentwood  CITY  STATE	
Name of Bank, Deposit  Mailing Address  Name of Bank, Deposit	C Bank  2101 S Brentwood Blvd  Brentwood  CITY  STATE	
Name of Bank, Deposit  Mailing Address  Name of Bank, Deposit	C Bank  2101 S Brentwood Blvd  Brentwood  CITY  STATE	