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FEC FORM

STATEMENT OF ORGANIZATION

SECRETARY OF THE SENATE

FORM 1		ORGANIZATION			FIAN	11 FIAR 2 RIVE		
1. NAME OF		(Check if no		xample:If typing, type	12FE4M5	Office Use Only		
COMMITTEE (ir		is changed)		er the lines.	lean management	after until tracelling and		
Russ Car	nahar	n For Con	gress					
ADDRESS (number a	nd street)	7000 Ch	ippew	a St	1111	 		
(Check if a is changed)		St. Louis			I MO	63123		
			CITY	•	STATE	ZIP CODE		
COMMITTEE'S E-MA	AL ADDRES		-	· ·				
(Check if	address	brett@ca	ampaig	ınfinançes	com ,			
is change				·	· 			
COMMITTEE'S WEB	PAGE ADI		w.russ	scarnahan.	com			
http://www.russcarnahan.com (Check if address is changed)								
2. DATE 03	5 ' 1	2011		,				
3. FEC IDENTIFIC	CATION NU	IMBER	C	<u></u>		<u> </u>		
4. IS THIS STATE	MENT X	NEW (N)	OR [AMENDED (A)				
I certify that I have e	examined th	is Statement and to t	the best of my	v knowledge and belie	f it is true, correct	and complete.		
Type or Print Name	of Treasurer	Brett Sm	niley			<u>-</u> .		
Signature of Treasure	er E	SE!			Date 03			
NOTE: Submission of	•		•	ubject the person signin		the penalties of 2 U.S.C. §437		
Office Use			T	For further information Federal Election Commit Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)		

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F	FEC Fo	rm 1 (Revised 02/2009) Page 2					
TYPE	E OF C	OMMITTEE					
Cen	didate	Committee:					
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)					
(b)	\boxtimes	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)					
Name Cand		Mr. Russ Carnahan					
Cand Party	lidate Affiliati	on DEM Sought: House Senate President District					
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Name Cand							
Part	ty Con	nmittee:					
(d)		(National, State (Democratic, This committee is a or subordinate) committee of the Republican, etc.) Party					
Poli	tical A	ction Committee (PAC):					
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a					
	_	Corporation Corporation w/o Capital Stock Labor Organization					
	,	Membership Organization Trade Association Cooperative					
. 0		In addition, this committee is a Lobbyist/Registrant PAC.					
(f)	Ц	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)					
		In addition, this committee is a Lobbyist/Registrant PAC.					
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)					
Join	t Fund	Iraising Representative:					
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.					
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.					
	Com	mittees Participating in Joint Fundraiser					
	1.	FEC ID number C					
	2.	FEC ID number					
	3.	FEC ID number C					
	4.						

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Write or Type Committee		
Russ Carna	han For Congress	
	ctea Organization; Affiliated Commiffee, Joint Fundralsing Representat	ive, or Leadership PAC Sponsor
		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Con	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
Bre	ett P. Smiley	
ruii Name	102 Waterman St. Suite 2	
Mailing Address		
	Providence	02006
	Providence	02906
Title or Position	CITY STATE	ZIP CODE
Deputy Treas	SUPER Telephone number	
	ne and address (phone number optional) of the treasurer of the committee.g., assistant treasurer).	tee; and the name and address of
Full Name La	wrence Giesing	
Mailing Address	3915 Colony Gardens	
	St. Louis MO	ZIP CODE
Title or Position		
Treasurer	Telephone number	314, - 487, - 2572

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Full Name of Designated Agent Brett	Smiley.			
Mailing Address	102 Waterman St Suite 2	<u> </u>		
		1 1 1 1 1 1 1 1 1		
	Providence	IRI 10290	06 , 1-1 , , , 1	
	CITY	STATE	ZIP CODE	
Title or Position Deputy, Treasure	r Telephone nu	mber <u>[401</u>] – [4	54 - 0991	
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.				
Name of Bank, Depository, e	etc.			
PNC E	Bank, , , , , , , , , , , , , , , , , , ,	 		
Mailing Address	2101 S Brentwood Blyd	<u> </u>		
		<u> </u>		
	Brentwood	MO ₁ 631	44	
	CITY	STATE	ZIP CODE	
Name of Bank, Depository, e	etc.			
<u> </u>		<u> </u>		
Mailing Address		<u> </u>		
			لـــا-لـــ	
	СІТУ	STATE	ZIP CODE	

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DATE PREPARED