

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

Office use only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines

12FE4M5

Ameren Federal Political Action Committee (AmerenFED PAC)

ADDRESS (number and street)

1331 Pennsylvania Ave., NW

Suite 550S

(Check if address is changed)

Washington

DC

20004

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

sgarrison@ameren.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

202-783-7602

2. DATE

01 / 30 / 2009

3. FEC IDENTIFICATION NUMBER

C C00206136

4. IS THIS STATEMENT

NEW (N)

OR

AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete

Type or Print Name of Treasurer

Mr. Jeff Vance

Signature of Treasurer

Electronically Filed by Mr. Jeff Vance

Date

01 / 30 / 2009

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. S437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

Office Use Only

For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100

FEC FORM 1 (Revised 12/2007)

5. TYPE OF COMMITTEE (Check One)

Candidate Committee:

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate _____

Candidate Party Affiliation Office Sought: House Senate President State
 District

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

- (d) This committee is a (National, State (or subordinate) committee of the (Democratic, Republican, etc.) Party.

Political Action 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
- (f) 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 Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising 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.

Committees Participating in Joint Fundraiser

1. _____	FEC ID number	C <input type="text"/>
2. _____	FEC ID number	C <input type="text"/>
3. _____	FEC ID number	C <input type="text"/>
4. _____	FEC ID number	C <input type="text"/>
5. _____	FEC ID number	C <input type="text"/>

Write or Type Committee Name

Ameren Federal Political Action Committee (AmerenFED PAC)

6. Name of Any Connected Organization, Affiliated Committee, Leadership PAC Sponsor or Joint Fundraising Representative

Empty grid lines for organization name.

Mailing Address

Empty grid lines for mailing address.

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:

Connected Organization Affiliated Committee Leadership PAC Sponsor Joint Fundraising Representative

7. Custodian of Records: Identify by name, address, (phone number -- optional), and position of the person in possession of Committee books and records.

Full Name **Shaun Garrison**

Mailing Address **1331 Pennsylvania Ave., NW**
Suite 550S
Washington DC 20004

Title or Position ▼ **Fed Legislative Affa** CITY ▲ STATE ▲ ZIP CODE ▲
Telephone number **202 - 783 - 8401**

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer **Mr. Jeff Vance**

Mailing Address **607 East Adams**
Springfield IL 62701

Title or Position ▼ **Senior Account Manag** CITY ▲ STATE ▲ ZIP CODE ▲
Telephone number **217 - 535 - 5239**

Full Name of Designated Agent

Shaun Garrison

Mailing Address

1331 Pennsylvania Ave., NW

Suite 550S

Washington

DC

20004

Title or Position

CITY

STATE

ZIP CODE

Fed Legislative Affa

Telephone number

202

783

8401

9. 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, etc.

Chase Bank

Mailing Address

6th & Washington Street

Springfield

IL

62701

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

Image# 29990869421

Form/Schedule: **F1A**

Changing treasurer

Transaction ID:
