

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED, SECRETARY OF THE SENATE 13 APR 24 PM 1:32 HD Office Use Only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines.

12FE4M5

McCaskill Senate Fund

ADDRESS (number and street)

PO Box 300077

(Check if address is changed)

St. Louis

MO

63130

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address is changed)

kathryn@KEJDCompliance.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE

04 / 18 / 2013

3. FEC IDENTIFICATION NUMBER

C

4. IS THIS STATEMENT



NEW (N)

OR



AMENDED (A)

2013 APR 25 PM 3:29 FEDERAL ELECTION COMMISSION PUBLIC PROCEEDINGS DIVISION

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

Michelle Sherod

Signature of Treasurer

Michelle Sherod

Date

04 / 18 / 2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

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 02/2009)

13031063261

5. TYPE OF COMMITTEE

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
 - In addition, this committee is a Lobbyist/Registrant PAC.
- (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 Lobbyist/Registrant PAC.
 - 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. **McCaskill For Missouri** _____ FEC ID number **C 00431304**
2. **Missourians For Accountability and Change** _____ FEC ID number **C 00431122**
3. _____ FEC ID number **C** _____
4. _____ FEC ID number **C** _____

13031063262

Write or Type Committee Name

McCaskill Senate Fund

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

None

Mailing Address

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

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

Kathryn Jayne Drennen

Mailing Address

347 Hazel Avenue

St. Louis

MO

63119

Title or Position

CITY

STATE

ZIP CODE

Deputy Treasurer

Telephone number

314

968

2600

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

Michelle Sherod

Mailing Address

PO Box 300077

St. Louis

MO

63130

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number

13031063263

Full Name of Designated Agent

Kathryn Jayne Drennen

Mailing Address

347 Hazel Avenue

St. Louis

CITY

MO

STATE

63119

ZIP CODE

Title or Position

Deputy Treasurer

Telephone number

13031063264

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.

Pulaski Bank

Mailing Address

175 Carondelet Plaza

St. Louis

CITY

MO

STATE

63105

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt
4/24/13

USPS First Class Mail Postmarked

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Next Business Day Delivery

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4/24/13

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Other (Specify): Date of Receipt or Postmarked

 4/25/13
PREPARER DATE PREPARED

13031063265