Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 X COMMITTEE (in full) is changed) over the lines. Get Stuff Done PO Box 15845 ADDRESS (number and street) (Check if address is changed) Washington 20003 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS smele@mbacg.com (Check if address X is changed) Optional Second E-Mail Address ibegun@mbacg.com COMMITTEE'S WEB PAGE ADDRESS (URL) http://www.clairemccaskill.com (Check if address is changed) DATE 01 2019 C00431304 FEC IDENTIFICATION NUMBER > 3. X 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. Sherod, Michelle, , , Type or Print Name of Treasurer Sherod, Michelle, , , [Electronically Filed] 04 03 2019 Signature of Treasurer Date 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 For further information contact: **FEC FORM 1** Federal Election Commission Use (Revised 06/2012)

Toll Free 800-424-9530

Local 202-694-1100

FF0 =	4 (Davided 00/0000)	D 0
	orm 1 (Revised 02/2009) COMMITTEE	Page 2
	e 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. (Compinformation below.)	plete the candidate
Name of Candidate		
Candidate Party Affiliat	ion 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 Cor		_
(d)		Democratic, Republican, etc.) Party
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nected organization is
_	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f) x	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	gregated 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 Fund	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, at least one of which is an authorized committee of a federal candidate.	o 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.	o or more political
Com	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

FEC Form 1 (Revised 0)	2/2009)	Page 3
Write or Type Committee Name	.1.2000)	i age 3
Get Stuff Done		
	requirestion Affiliated Committee Loint Fundraining Depresentative of	r Loodorohin DAC Snoncor
-	rganization, Affiliated Committee, Joint Fundraising Representative, o	r Leadership PAC Sponsor
McCaskill Senate Fund		
Mailing Address	PO Box 300077	
Walling Address		
	St Louis MO	63130
	CITY STATE	ZIP CODE
	SINIE	ZII CODE
Relationship: Connected	Organization Affiliated Committee X Joint Fundraising Representative	ve Leadership PAC Sponso
 Custodian of Records: Ident books and records. 	ify by name, address (phone number optional) and position of the per-	son in possession of committee
Mele, Steve	en, , ,	
Full Name	611 Pennsylvania Ave SE	
Mailing Address	Ste 143	
		,20003
	Washington	20003
Title or Position	CITY STATE	ZIP CODE
Asst. Treasurer	Telephone number	2 552 0221
B. Treasurer: List the name and any designated agent (e.g., as	address (phone number optional) of the treasurer of the committee; a ssistant treasurer).	nd the name and address of
Full Name Sherod, Mic	helle, , ,	
of Treasurer		
Mailing Address	PO Box 300077	
	St Louis MO	63130
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	4 - 749 - 5606

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Full Name of Designated Me Agent	ele, Steven, , ,		
Mailing Address	611 Pennsylvania Ave SE		
	Ste 143		
	Washington	DC 2 STATE	20003 ZIP CODE
Title or Position Asst. Treasurer	Telep	phone number 202	552 0221
safety deposit boxes Name of Bank, Depos	sitory, etc.	e committee deposits func	ds, holds accounts, rents
LAr	malgamated Bank		
Mailing Address	1825 K St NW		
	Washington	DC 2	20006
	CITY	STATE	ZIP CODE
Name of Bank, Depor	sitory, etc.		
L			
Mailing Address			

FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page ____ **of** ____

anks or Other Depositor afety deposit boxes or made ame of Bank, epository, etc. Mailing Address	ries: List all bank	s or other depositories in v	Telephone Nu		s funds, holds accounts, rents
anks or Other Depositor afety deposit boxes or ma ame of Bank, epository, etc.	ries: List all bank	cs or other depositories in v			s funds, holds accounts, rents
anks or Other Depositor afety deposit boxes or ma	ries: List all bank	s or other depositories in v			s funds, holds accounts, rents
anks or Other Depositor	ries: List all bank	s or other depositories in v			s funds, holds accounts, rents
TITLE OR POSITION			Telephone Nu	mber	
TITLE OR POSITION		1	Talanti e e N		_ !_
	▼	- · -		- -	
		CITY A		TATE A	ZIP CODE ▲
amig / taalooo					
Mailing Address					
esignated Agent: Identify	by name, addre	ess (phone number – option	al)	1 1 1	
Connected	d Organization	Affiliated Committee	Joint Fundraising	Representa	ative Leadership PAC Sp
Relationship:	_	CITY A		STATE A	ZIP CODE ▲
	Columbia	<u> </u>		MO	65201
	Ste 104				<u> </u>
Mailing Address	300 St James				
McCaskill Victory	runa 				
		ffiliated Committee, Joint	Fundraising Rep	esentative	e, or Leadership PAC Spons
4			FEC ID	number	C
				number	C
3.				number	C
				number	C