

# 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

MISSOURI VICTORY 2006

ADDRESS (number and street)

POST OFFICE BOX 300077

(Check if address is changed)

ST LOUIS

MO

63130

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

info@claireonline.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

None

COMMITTEE'S FAX NUMBER

3149188696

2. DATE

05 / 21 / 2007

3. FEC IDENTIFICATION NUMBER

C C00419739

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

David Kirby

Signature of Treasurer

Electronically Filed by David Kirby

Date

05 / 21 / 2007

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 02/2003)

5. TYPE OF COMMITTEE (Check One)

- (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 \_\_\_\_\_

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

- (e)  This committee is a separate segregated fund

- (f)  This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

MCCASKILL FOR MISSOURI  
\_\_\_\_\_

Mailing Address  PO BOX 300077

\_\_\_\_\_

ST LOUIS  MO  63130 -

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship  Jr Fundr Participant

Type of Connected Organization:

- Corporation  Corporation w/o Capital Stock  Labor Organization
- Membership Organization  Trade Association  Cooperative

Write or Type Committee Name

**MISSOURI VICTORY 2006**

- 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 David Kirby

Mailing Address P.O. Box 300077

St. Louis MO 63130 - -

Title or Position ▼ **Treasurer** CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number 314 - 918 - 8693

- 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 David Kirby

Mailing Address P.O. Box 300077

St. Louis MO 63130 - -

Title or Position ▼ **Treasurer** CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number 314 - 918 - 8693

Full Name of Designated Agent \_\_\_\_\_

Mailing Address \_\_\_\_\_

\_\_\_\_\_ - -

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

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.

**The Business Bank**

Mailing Address

**8000 Maryland Avenue**

**Clayton**

**MO**

**63105**

CITY ▲

STATE ▲

ZIP CODE ▲

**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.

[ ADDITIONAL ]

Mailing Address

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

CITY ▲ STATE ▲ ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ ADDITIONAL ]

MISSOURI DEMOCRATIC STATE COMMITTEE

Mailing Address

P.O. Box 719

Jefferson City

MO

65102

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Jr Fundr Participant

Type of Connected Organization:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

**Designated Agent**

**[ ADDITIONAL ]**

Full Name

Mailing Address

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number  -  -

