



MISSOURI ETHICS COMMISSION
STATEMENT OF COMMITTEE ORGANIZATION

0000885
MEC ID # ~~0001373~~ SW *pmg* *AW*
OFFICE USE ONLY

STATEMENT DATE <u>7/31/08</u>		1. TYPE OF STATEMENT (CHECK ONE) <input checked="" type="checkbox"/> NEW <input checked="" type="checkbox"/> AMENDED <i>SW</i>		IF AMENDED, LIST ITEMS CHANGED (LINE NUMBERS)	
3. FULL NAME OF COMMITTEE <u>24TH WARD DEMOCRATIC ORGANIZATION</u>					
4. COMMITTEE MAILING ADDRESS ADDRESS: <u>1221 Louisville AVE</u> CITY/STATE/ZIP: <u>ST. LOUIS, MO. 63139</u>				5. TELEPHONE NUMBER	
6. TREASURER'S NAME <u>DENNIS M. WILBERS</u>					
7. TREASURER'S MAILING ADDRESS ADDRESS: <u>1322 KEAST AVE.</u> CITY/STATE/ZIP: <u>ST. LOUIS, MO. 63139</u>				8. TELEPHONE NUMBER HOME: <u>(314) 646-7220</u> WORK:	
9. DEPUTY TREASURER'S NAME <input checked="" type="checkbox"/> CHECK IF NO DEPUTY TREASURER					
10. DEPUTY TREASURER'S ADDRESS ADDRESS: CITY/STATE/ZIP:				11. TELEPHONE NUMBER HOME: WORK:	
12. OTHER COMMITTEE OFFICERS (IF ANY) A. NAME B. ADDRESS C. TITLE				13. IF CANDIDATE HAS OTHER COMMITTEES, IS THIS COMMITTEE DESIGNATED AS THE AGGREGATING COMMITTEE? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A	
14. OFFICIAL FUND DEPOSITORY: CHECKING ACCOUNT FIRST, THEN ANY SAVINGS ACCOUNT(S) A. NAME & ADDRESS OF BANK, SAVINGS & LOAN, OR CREDIT UNION <u>LINDELL BANK</u> <u>ST. LOUIS, MO. 63166-0211</u>					
B. ACCOUNT NAME <u>24TH WARD DEMOCRATIC ORGANIZATION</u>					
16. TYPE OF COMMITTEE <input type="checkbox"/> CANDIDATE <input checked="" type="checkbox"/> POLITICAL PARTY <input checked="" type="checkbox"/> CONTINUING <input type="checkbox"/> CAMPAIGN <input type="checkbox"/> EXPLORATORY <input type="checkbox"/> DEBT SERVICE					
18. CANDIDATE SUPPORTED (CANDIDATE COMMITTEES ONLY) A. NAME B. ADDRESS C. TELEPHONE NO. D. POLITICAL PARTY AMENDMENT					
17. CONNECTED ORGANIZATION (IF ANY) (CONTINUING COMMITTEES ONLY) A. NAME B. ADDRESS					
18. CANDIDATES SUPPORTED OR OPPOSED A. NAME(S) OF CANDIDATE(S) B. ELECTION DATE C. OFFICE SOUGHT D. POLITICAL SUBDIVISION E. SUPPORT F. OPPOSE <input type="checkbox"/> <input type="checkbox"/>					
19. BALLOT MEASURE(S) SUPPORTED OR OPPOSED A. NAME(S) OF MEASURE(S) B. ELECTION DATE C. SUBJECT AND POLITICAL SUBDIVISION D. SUPPORT E. OPPOSE <input type="checkbox"/> <input type="checkbox"/>					
20. TREASURER'S STATEMENT (ALL COMMITTEES) I CERTIFY THAT THIS STATEMENT IS COMPLETE, TRUE AND ACCURATE. <u>Dennis M. Wilbers</u> TREASURER'S SIGNATURE			21. CANDIDATE'S STATEMENT (CANDIDATE & DEPUTY COMMITTEES) I CERTIFY THAT THIS STATEMENT IS COMPLETE, TRUE AND ACCURATE. MISSOURI ETHICS COMMISSION <u>AUG 04 2008</u> CANDIDATE'S SIGNATURE		