



MISSOURI ETHICS COMMISSION  
STATEMENT OF COMMITTEE ORGANIZATION

MEC ID # \_\_\_\_\_ C081332

OFFICE USE ONLY  
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STATEMENT DATE SEPTEMBER 20, 2010		TYPE OF STATEMENT (CHECK ONE) <input type="checkbox"/> NEW <input checked="" type="checkbox"/> AMENDED		IF AMENDED, LIST ITEMS CHANGED (LINE NUMBERS) 6, 7, 8 & 14	
3. FULL NAME OF COMMITTEE FRIENDS OF JOE VACCARO, INC.					
4. COMMITTEE MAILING ADDRESS ADDRESS: 6227 HANCOCK AVE CITY / STATE / ZIP: ST. LOUIS, MO 63139				5. TELEPHONE NUMBER 314-645-3038	
6. TREASURER'S NAME BRIAN D. SWEENEY					
7. TREASURER'S MAILING ADDRESS ADDRESS: 727 LE MANNS DRIVE CITY / STATE / ZIP: BALLWIN, MO 63021-7059				8. TELEPHONE NUMBER HOME: 636-394-3430 WORK: 314-495-5641	
9. DEPUTY TREASURER'S NAME <input type="checkbox"/> CHECK IF NO DEPUTY TREASURER <i>CRYSTAL SUE VACCARO</i>					
10. DEPUTY TREASURER'S ADDRESS ADDRESS: 6227 HANCOCK AVE CITY / STATE / ZIP: ST. LOUIS, MO 63139				11. TELEPHONE NUMBER HOME: 314-645-3038 WORK: 314-781-8844	
12. OTHER COMMITTEE OFFICERS (IF ANY) A. NAME B. ADDRESS C. TITLE JOSEPH A. VACCARO JR   6227 HANCOCK AVE   PRES				13. IF CANDIDATE HAS OTHER COMMITTEES, IS THIS COMMITTEE DESIGNATED AS THE AGGREGATING COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	
14. OFFICIAL FUND DEPOSITORY: CHECKING ACCOUNT FIRST, THEN ANY SAVINGS ACCOUNT(S) A. NAME & ADDRESS OF BANK, SAVING & LOAN, OR CREDIT UNION B. ACCOUNT NAME C. ACCOUNT NO. PNC BANK   FRIENDS OF JOE VACCARO, INC   6025 CHIPPEWA, ST. LOUIS, MO 63139					
15. TYPE OF COMMITTEE <input checked="" type="checkbox"/> CANDIDATE <input type="checkbox"/> POLITICAL PARTY <input type="checkbox"/> POLITICAL ACTION (PAC) <input type="checkbox"/> CAMPAIGN <input type="checkbox"/> EXPLORATORY <input type="checkbox"/> DEBT SERVICE					
16. CANDIDATE SUPPORTED (CANDIDATE COMMITTEES ONLY) A. NAME B. ADDRESS C. TELEPHONE NO. D. POLITICAL PARTY JOSEPH A VACCARO, JR   6227 HANCOCK AVE   314-645-3038   DEMOCRAT					
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. CHECK ONE JOSEPH A VACCARO JR   MARCH, 2013   ALDERMAN   23RD WARD CITY OF ST. LOUIS   SUPPORT <input checked="" type="checkbox"/> OPPOSE <input type="checkbox"/>					
19. BALLOT MEASURE(S) SUPPORTED OR OPPOSED A. NAME(S) OF MEASURE(S) B. ELECTION DATE C. SUBJECT AND POLITICAL SUBDIVISION E. CHECK ONE         SUPPORT <input type="checkbox"/> OPPOSE <input type="checkbox"/>					
<b>AMENDMENT</b>					
20. COMMITTEE TREASURER'S SIGNATURE I CERTIFY THAT THIS STATEMENT IS COMPLETE, TRUE AND ACCURATE. <i>Brian D. Sweeney</i> TREASURER'S SIGNATURE				21. CANDIDATE'S SIGNATURE (CANDIDATE COMMITTEES ONLY) I CERTIFY THAT THIS STATEMENT IS COMPLETE, TRUE AND ACCURATE. Missouri Ethics Commission SEP 23 2010 <i>Joe Vaccaro</i> CANDIDATE'S SIGNATURE	