



MISSOURI ETHICS COMMISSION  
STATEMENT OF COMMITTEE ORGANIZATION

MEC ID # C000316

OFFICE USE ONLY  
*BB* *JE*

STATEMENT DATE		TYPE OF STATEMENT (CHECK ONE) <input type="checkbox"/> NEW <input checked="" type="checkbox"/> AMENDED		IF AMENDED, LIST ITEMS CHANGED (LINE NUMBERS)	
3. FULL NAME OF COMMITTEE <i>Terry Kennedy Campaign Committee</i>					
4. COMMITTEE MAILING ADDRESS ADDRESS: <i>4101 Washington</i> CITY/STATE/ZIP: <i>ST. LOUIS, MO. 63108</i>				5. TELEPHONE NUMBER <i>314 535-5574</i>	
6. TREASURER'S NAME <i>Johnson Lancaster</i>					
7. TREASURER'S MAILING ADDRESS ADDRESS: <i>4236 McPherson, Apt 25</i> CITY/STATE/ZIP: <i>ST. LOUIS, MO. 63108</i>				8. TELEPHONE NUMBER HOME: <i>314 933 0274</i> WORK:	
9. DEPUTY TREASURER'S NAME <input type="checkbox"/> CHECK IF NO DEPUTY TREASURER <i>NA</i>					
10. DEPUTY TREASURER'S ADDRESS ADDRESS: <i>NA</i> CITY/STATE/ZIP:				11. TELEPHONE NUMBER HOME: WORK:	
12. OTHER COMMITTEE OFFICERS (IF ANY) A. NAME B. ADDRESS C. TITLE <b>AMENDMENT</b>				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					
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. PARTY <i>Terry Kennedy</i> <i>4101 Washington</i> <i>314 535-5574</i> <i>Dem.</i> <i>ST. LOUIS, MO. 63108</i>					
17. CONNECTED ORGANIZATION (IF ANY) (CONTINUING COMMITTEES ONLY) A. NAME B. ADDRESS <i>NA</i>					
18. CANDIDATES SUPPORTED OR OPPOSED A. NAME(S) OF CANDIDATE(S) B. ELECTION DATE C. OFFICE SOUGHT D. POLITICAL SUBDIVISION E. SUPPORT F. OPPOSE <i>Terry Kennedy</i> <i>3/2015</i> <i>Alderman</i> <i>St. Louis</i> <input checked="" type="checkbox"/> <input type="checkbox"/> <i>18th Ward</i> <i>City</i>					
19. BALLOT MEASURE(S) SUPPORTED OR OPPOSED A. NAME(S) OF MEASURE(S) B. ELECTION DATE C. SUBJECT AND POLITICAL SUBDIVISION E. SUPPORT F. OPPOSE <i>TR</i> <input type="checkbox"/> <input type="checkbox"/>					
20. COMMITTEE TREASURER'S SIGNATURE			21. CANDIDATE'S SIGNATURE (CANDIDATE COMMITTEES ONLY)		

I CERTIFY THAT THIS STATEMENT IS COMPLETE, TRUE AND ACCURATE.

Missouri Ethics Commission

MAY 16 2011

*Johnson Lancaster*  
TREASURER'S SIGNATURE

I CERTIFY THAT THIS STATEMENT IS COMPLETE, TRUE AND ACCURATE.

*Terry Kennedy*  
CANDIDATE'S SIGNATURE