# SCHEDULE B (FEC Form 3X)
# ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29



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NAME OF COMMITTEE (In Full)
MISSOURI FARM BUREAU FARM PAC, ST LOUIS AREA

**A.**
Full Name (Last, First, Middle Initial)
Jefferson County Farm Bureau

Mailing Address
P. O. Box 199
City: Hillsboro
State: MO
Zip Code: 63050

Purpose of Disbursement
Cost Share

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement
02 / 08 / 2002

Amount of Each Disbursement this Period
240.00

Transaction ID: SB29.4211

**B.**
Full Name (Last, First, Middle Initial)
Union Planters Bank

Mailing Address
45 Honey Locust Lane
City: St. Charles
State: MO
Zip Code: 63303

Purpose of Disbursement
Monthly Service Charge

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement
01 / 01 / 2002

Amount of Each Disbursement this Period
8.00

Transaction ID: SB29.421D

**C.**

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ **248.00**

**TOTAL** This Period (last page this line number only) ..... ▶ **248.00**