

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
PIPEFITTERS LOCAL #533 VOLUNTEER POLITICAL FUND

ADDRESS (number and street) 8600 HILLCREST ROAD
 Check if different than previously reported. (ACC)
KANSAS CITY MO 64138

2. **FEC IDENTIFICATION NUMBER** C00206177
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 04 01 2008 through 06 30 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Neil Willis

Signature of Treasurer Electronically Filed by Neil Willis Date 07 11 2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only									
-----------------	--	--	--	--	--	--	--	--	--

FEC FORM 3X
(Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
PIPEFITTERS LOCAL #533 VOLUNTEER POLITICAL FUND

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		97358.50
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	124662.67									
(c) Total Receipts (from Line 19)	82366.50	152674.05								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	207029.17	250032.55								
7. Total Disbursements (from Line 31)	45069.66	88073.04								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	161959.51	161959.51								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
PIPEFITTERS LOCAL #533 VOLUNTEER POLITICAL FUND

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	81572.40	151360.76
(iii) TOTAL (add Lines 11(a)(i) and (ii)	81572.40	151360.76
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	81572.40	151360.76
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	794.10	1313.29
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	82366.50	152674.05
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	82366.50	152674.05

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	8644.66	19223.04
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	8644.66	19223.04
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	10000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	26425.00	58850.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	45069.66	88073.04
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	45069.66	88073.04

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3	81572.40	151360.76
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	81572.40	151360.76
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	8644.66	19223.04
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	8644.66	19223.04

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 24
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
PIPEFITTERS LOCAL #533 VOLUNTEER POLITICAL FUND

A.

Full Name (Last, First, Middle Initial)
Bank Midwest

Mailing Address 11th & Walnut

City State Zip Code
Kansas City MO 64106

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
70530.22

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 1 / 2 0 0 8

Transaction ID: SA17.6742

Amount of Each Receipt this Period
222.67

INTEREST

B.

Full Name (Last, First, Middle Initial)
Bank Midwest

Mailing Address 11th & Walnut

City State Zip Code
Kansas City MO 64106

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
70698.36

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 0 8

Transaction ID: SA17.6743

Amount of Each Receipt this Period
168.14

INTEREST

C.

Full Name (Last, First, Middle Initial)
Bank Midwest

Mailing Address 11th & Walnut

City State Zip Code
Kansas City MO 64106

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
70885.47

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: SA17.6744

Amount of Each Receipt this Period
187.11

INTEREST

SUBTOTAL of Receipts This Page (optional) ► **577.92**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 24

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
PIPEFITTERS LOCAL #533 VOLUNTEER POLITICAL FUND

A.

Full Name (Last, First, Middle Initial)
Bank Midwest

Mailing Address 11th & Walnut

City State Zip Code
Kansas City MO 64106

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
71101.65

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

Transaction ID: SA17.6745

Amount of Each Receipt this Period
216.18

INTEREST

SUBTOTAL of Receipts This Page (optional)	216.18
TOTAL This Period (last page this line number only)	794.10

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
PIPEFITTERS LOCAL #533 VOLUNTEER POLITICAL FUND

A.	Full Name (Last, First, Middle Initial) CHASE CARDMEMBER SERVICE	Transaction ID: SB21B.6754 Date of Disbursement
	Mailing Address PO BOX 94014	<input type="text" value="04"/> / <input type="text" value="22"/> / <input type="text" value="2008"/>
	City PALATINE State IL Zip Code 60094	Amount of Each Disbursement this Period
	Purpose of Disbursement CONFERENCE FEE	<input type="text" value="16.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) CHASE CARDMEMBER SERVICE	Transaction ID: SB21B.6755 Date of Disbursement
	Mailing Address PO BOX 94014	<input type="text" value="04"/> / <input type="text" value="22"/> / <input type="text" value="2008"/>
	City PALATINE State IL Zip Code 60094	Amount of Each Disbursement this Period
	Purpose of Disbursement CONFERENCE FEE	<input type="text" value="156.40"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) CHASE CARDMEMBER SERVICE	Transaction ID: SB21B.6759 Date of Disbursement
	Mailing Address PO BOX 94014	<input type="text" value="05"/> / <input type="text" value="27"/> / <input type="text" value="2008"/>
	City PALATINE State IL Zip Code 60094	Amount of Each Disbursement this Period
	Purpose of Disbursement LABOR RALLY	<input type="text" value="149.72"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="322.12"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
PIPEFITTERS LOCAL #533 VOLUNTEER POLITICAL FUND

A. Full Name (Last, First, Middle Initial)
CHASE CARDMEMBER SERVICE

Mailing Address PO BOX 94014

City PALATINE State IL Zip Code 60094

Purpose of Disbursement
TRAVEL AND CONFERENCE FEE

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.6760

Date of Disbursement

05 / 27 / 2008

Amount of Each Disbursement this Period

4279.68

B. Full Name (Last, First, Middle Initial)
Coalition of Union Retirees

Mailing Address Seth Sloan, Treas.
6301 Rockhill Rd., Suite 106

City Kansas City State MO Zip Code 64131

Purpose of Disbursement
DONATION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.6749

Date of Disbursement

04 / 09 / 2008

Amount of Each Disbursement this Period

500.00

C. Full Name (Last, First, Middle Initial)
ECONOMIC GROWTH COUNCIL

Mailing Address PO BOX 864

City JEFFERSON CITY State MO Zip Code 65102

Purpose of Disbursement
DONATION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.6763

Date of Disbursement

06 / 13 / 2008

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional) ►

7279.68

TOTAL This Period (last page this line number only) ►

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)

PAGE 10 / 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
PIPEFITTERS LOCAL #533 VOLUNTEER POLITICAL FUND

<p>A. Full Name (Last, First, Middle Initial) JENEE LOWE</p> <p>Mailing Address 7319 PENNSYLVANIA AVE</p> <p>City KANSAS CITY State MO Zip Code 64114</p> <p>Purpose of Disbursement CONSULTING FEE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.6748</p> <p>Date of Disbursement 04 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 125.00</p>
<p>B. Full Name (Last, First, Middle Initial) JENEE LOWE</p> <p>Mailing Address 7319 PENNSYLVANIA AVE</p> <p>City KANSAS CITY State MO Zip Code 64114</p> <p>Purpose of Disbursement CONSULTING FEE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.6757</p> <p>Date of Disbursement 05 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 125.00</p>
<p>C. Full Name (Last, First, Middle Initial) JENEE LOWE</p> <p>Mailing Address 7319 PENNSYLVANIA AVE</p> <p>City KANSAS CITY State MO Zip Code 64114</p> <p>Purpose of Disbursement CONSULTING FEE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.6762</p> <p>Date of Disbursement 06 / 03 / 2008</p> <p>Amount of Each Disbursement this Period 125.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

375.00

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

**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)

PAGE 11 / 24

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
PIPEFITTERS LOCAL #533 VOLUNTEER POLITICAL FUND

A.

Full Name (Last, First, Middle Initial)
Neil Willis

Mailing Address 8600 Hillcrest Road

City State Zip Code
Kansas City MO 64138

Purpose of Disbursement
REIMBURSEMENT

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.6751

Date of Disbursement

/ /

Amount of Each Disbursement this Period

272.00

SUBTOTAL of Disbursements This Page (optional)

272.00

TOTAL This Period (last page this line number only)

8248.80

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
PIPEFITTERS LOCAL #533 VOLUNTEER POLITICAL FUND

A. Full Name (Last, First, Middle Initial)
BILL FEUERBORN FOR STATE REPRESENTATIVE

Mailing Address 11600 PARK ROAD

City GARNETT State KS Zip Code 66032

Purpose of Disbursement
CONTRIBUTION

Category/
Type

Candidate Name
BILL FEUERBORN FOR STATE REPRESENTATIVE

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: SB29.6804

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
BOB GRANT FOR REPRESENTATIVE

Mailing Address 407 W. MAGNOLIA

City CHEROKEE State KS Zip Code 66725

Purpose of Disbursement
CONTRIBUTION

Category/
Type

Candidate Name
BOB GRANT FOR REPRESENTATIVE

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: SB29.6849

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
CITIZENS FOR BARBARA LANNING

Mailing Address PO BOX 609

City LAWSON State MO Zip Code 64062

Purpose of Disbursement
CONTRIBUTION

Category/
Type

Candidate Name
CITIZENS FOR BARBARA LANNING

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: SB29.6811

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ►

TOTAL This Period (last page this line number only) ►

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
PIPEFITTERS LOCAL #533 VOLUNTEER POLITICAL FUND

A. Full Name (Last, First, Middle Initial) CITIZENS FOR JOHN BURNETT <hr/> Mailing Address 3418 GLADSTONE BLVD. <hr/> City KANSAS CITY State MO Zip Code 64123 <hr/> Purpose of Disbursement CONTRIBUTION <hr/> Candidate Name CITIZENS FOR JOHN BURNETT <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.6790 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 8
	Amount of Each Disbursement this Period 325.00
	<input type="text" value="011"/> Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) CITIZENS FOR VICKI LORENZ ENGLUND <hr/> Mailing Address PO BOX 270545 <hr/> City ST. LOUIS State MO Zip Code 63127 <hr/> Purpose of Disbursement CONTRIBUTION <hr/> Candidate Name CITIZENS FOR VICKI LORENZ ENGLUND <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.6830 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 8
	Amount of Each Disbursement this Period 325.00
	<input type="text" value="011"/> Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) CITIZENS TO ELECT CHARLIE NORR <hr/> Mailing Address 2133 N. CAMPBELL <hr/> City SPRINGFIELD State MO Zip Code 65803 <hr/> Purpose of Disbursement CONTRIBUTION <hr/> Candidate Name CITIZENS TO ELECT CHARLIE NORR <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.6839 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 7 / 2 0 0 8
	Amount of Each Disbursement this Period 325.00
	<input type="text" value="011"/> Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

975.00

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

**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)

PAGE 15 / 24

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
PIPEFITTERS LOCAL #533 VOLUNTEER POLITICAL FUND

A.

Full Name (Last, First, Middle Initial)
CLAY COUNTY DEMOCRATIC CENTRAL COM.

Transaction ID: SB29.6838

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	0	8

Mailing Address 2110 HILLVIEW ROAD

Amount of Each Disbursement this Period

1500.00

City LIBERTY State MO Zip Code 64106

Purpose of Disbursement
CONTRIBUTION

011
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
CLINT FOR TREASURER

Transaction ID: SB29.6773

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	1		2	0	0	8

Mailing Address 2510 SUTTON

Amount of Each Disbursement this Period

-325.00

City ST. LOUIS State MO Zip Code 63143

Purpose of Disbursement
REFUND

011
Category/
Type

Candidate Name
CLINT FOR TREASURER

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
COMMITTEE TO ELECT JAKE HUMMEL

Transaction ID: SB29.6840

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	0	8

Mailing Address 4102 FEDERER PLACE

Amount of Each Disbursement this Period

325.00

City ST. LOUIS State MO Zip Code 63116

Purpose of Disbursement
CONTRIBUTION

011
Category/
Type

Candidate Name
COMMITTEE TO ELECT JAKE HUMMEL

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

1500.00

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

--

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
PIPEFITTERS LOCAL #533 VOLUNTEER POLITICAL FUND

<p>A. Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT NANCY HAGAN</p> <p>Mailing Address 2260 E. BRIAR</p> <p>City SPRINGFIELD State MO Zip Code 65804</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name COMMITTEE TO ELECT NANCY HAGAN</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.6819</p> <p>Date of Disbursement 06 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 325.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT SHALONN CURLS</p> <p>Mailing Address 4609 PASEO BLVD. SUITE 107</p> <p>City KANSAS CITY State MO Zip Code 64110</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name COMMITTEE TO ELECT SHALONN CURLS</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.6814</p> <p>Date of Disbursement 06 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 325.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT VERN HARLAN</p> <p>Mailing Address 7435 LEADALE DRIVE</p> <p>City ST. LOUIS State MO Zip Code 63121</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name COMMITTEE TO ELECT VERN HARLAN</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.6822</p> <p>Date of Disbursement 06 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 325.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

975.00

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

**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)

PAGE 17 / 24

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
PIPEFITTERS LOCAL #533 VOLUNTEER POLITICAL FUND

A.	Full Name (Last, First, Middle Initial) DENNIS MCKINNEY CAMPAIGN ACCOUNT	Transaction ID: SB29.6807 Date of Disbursement 06 / 13 / 2008
	Mailing Address 1220 SOUTH MAIN	Amount of Each Disbursement this Period 500.00
	City Greensburg State KS Zip Code 67054	011 Category/ Type
	Purpose of Disbursement CONTRIBUTION Candidate Name DENNIS MCKINNEY CAMPAIGN ACCOUNT	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) DEVRIES FOR KANSAS	Transaction ID: SB29.6846 Date of Disbursement 06 / 27 / 2008
	Mailing Address 1747 N. RIVERBIRCH COURT	Amount of Each Disbursement this Period 1000.00
	City Andover State KS Zip Code 67002	011 Category/ Type
	Purpose of Disbursement CONTRIBUTION Candidate Name DEVRIES FOR KANSAS	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) FINNEY FOR KANSAS CAMPAIGN	Transaction ID: SB29.6801 Date of Disbursement 06 / 13 / 2008
	Mailing Address PO BOX 20355	Amount of Each Disbursement this Period 500.00
	City Wichita State KS Zip Code 67208	011 Category/ Type
	Purpose of Disbursement CONTRIBUTION Candidate Name FINNEY FOR KANSAS CAMPAIGN	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

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

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
PIPEFITTERS LOCAL #533 VOLUNTEER POLITICAL FUND

A.

Full Name (Last, First, Middle Initial)
FRIENDS FOR KELLY SCHULTZ

Transaction ID: SB29.6843
Date of Disbursement

Mailing Address 10455 E. MEXICO GRAVEL

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	0	8

City State Zip Code
COLUMBIA MO 65202

Amount of Each Disbursement this Period

325.00

Purpose of Disbursement
CONTRIBUTIONS

011
Category/
Type

Candidate Name
FRIENDS FOR KELLY SCHULTZ

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
FRIENDS OF AMY COFFMAN

Transaction ID: SB29.6816
Date of Disbursement

Mailing Address 8440 JARBOE STREET

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	0	8

City State Zip Code
KANSAS CITY MO 64114

Amount of Each Disbursement this Period

325.00

Purpose of Disbursement
CONTRIBUTION

011
Category/
Type

Candidate Name
FRIENDS OF AMY COFFMAN

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
FRIENDS OF DONALD KRANK

Transaction ID: SB29.6770
Date of Disbursement

Mailing Address 1621 BRISTOL ROCK

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	9		2	0	0	8

City State Zip Code
BLACK JACK MO 63033

Amount of Each Disbursement this Period

325.00

Purpose of Disbursement
CONTRIBUTION

011
Category/
Type

Candidate Name
FRIENDS OF DONALD KRANK

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

975.00

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

--

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)

PAGE 19 / 24

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
PIPEFITTERS LOCAL #533 VOLUNTEER POLITICAL FUND

A. Full Name (Last, First, Middle Initial)
JEANNE KIRKTON FOR STATE REPRESENTATIVE

Mailing Address 659 TUXECO BLVD.

City ST. LOUIS State MO Zip Code 63119

Purpose of Disbursement

CONTRIBUTION

Category/
Type

Candidate Name
JEANNE KIRKTON FOR STATE REPRESENTATIVE

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: SB29.6827

Date of Disbursement

/

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
JILL SCHUPP FOR STATE REPRESENTATIVE

Mailing Address 418 NORTH MOSLEY

City CREVE COEUR State MO Zip Code 63141

Purpose of Disbursement
CONTRIBUTION

Category/
Type

Candidate Name
JILL SCHUPP FOR STATE REPRESENTATIVE

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: SB29.6833

Date of Disbursement

/

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
KANSAS AFL-CIO COPE FUND

Mailing Address 2131 SW 36TH ST.

City TOPEKA State KS Zip Code 66611

Purpose of Disbursement
CONTRIBUTION

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: SB29.6796

Date of Disbursement

/

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ▶

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

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)

PAGE 20 / 24

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
PIPEFITTERS LOCAL #533 VOLUNTEER POLITICAL FUND

<p>A. Full Name (Last, First, Middle Initial) KRISTI L. KENNEY FOR STATE REPRESENTATIVE</p> <p>Mailing Address 221 S. SECOND STREET</p> <p>City CLINTON State MO Zip Code 64735</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name KRISTI L. KENNEY FOR STATE REPRESENTATIVE</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB29.6824</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="325.00"/></p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) MIKE SLATTERY FOR KANSAS HOUSE</p> <p>Mailing Address 5015 REEDS ROAD</p> <p>City MISSION State KS Zip Code 66202</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name MIKE SLATTERY FOR KANSAS HOUSE</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB29.6852</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Missouri Democratic Party</p> <p>Mailing Address PO Box 719</p> <p>City Jefferson City State MO Zip Code 65102</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name MISSOURI DEMOCRATIC PARTY</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB29.6836</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2500.00"/></p> <p>011 Category/ Type</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="3325.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
PIPEFITTERS LOCAL #533 VOLUNTEER POLITICAL FUND

A. Full Name (Last, First, Middle Initial) MISSOURI HOUSE DEMOCRATIC CAMPAIGN COMMITTEE <hr/> Mailing Address PO BOX 2235 <hr/> City KANSAS CITY State MO Zip Code 65102 <hr/> Purpose of Disbursement CONTRIBUTION Candidate Name MISSOURI HOUSE DEMOCRATIC CAMPAIGN COMMITTEE Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.6778 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
	011 Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) NORBURY FOR STATE REPRESENTATIVE <hr/> Mailing Address 107A NE MAGGIE <hr/> City LEE'S SUMMIT State MO Zip Code 64063 <hr/> Purpose of Disbursement CONTRIBUTION Candidate Name NORBURY FOR STATE REPRESENTATIVE Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.6793 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 8
	Amount of Each Disbursement this Period 325.00
	011 Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) NORTHWEST MISSOURI VICTORY <hr/> Mailing Address PO BOX 14194 <hr/> City PARKVILLE State MO Zip Code 64152 <hr/> Purpose of Disbursement CONTRIBUTION Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.6780 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 8
	Amount of Each Disbursement this Period 5000.00
	011 Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

6325.00

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

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
PIPEFITTERS LOCAL #533 VOLUNTEER POLITICAL FUND

A.	Full Name (Last, First, Middle Initial) OLETHA FAUST-GOUDEAU	Transaction ID: SB29.6798 Date of Disbursement 06 / 13 / 2008
	Mailing Address PO BOX 20335	
	City WICHITA State KS Zip Code 67208	Amount of Each Disbursement this Period 325.00
	Purpose of Disbursement CONTRIBUTION Candidate Name OLETHA FAUST-GOUDEAU Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	011 Category/ Type

B.	Full Name (Last, First, Middle Initial) PEOPLE FOR TERRY STONE	Transaction ID: SB29.6777 Date of Disbursement 04 / 28 / 2008
	Mailing Address 1421 NE 83RD STREET	
	City KANSAS CITY State MO Zip Code 64118	Amount of Each Disbursement this Period 325.00
	Purpose of Disbursement CONTRIBUTION Candidate Name PEOPLE FOR TERRY STONE Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	011 Category/ Type

C.	Full Name (Last, First, Middle Initial) SCAVUZZO FOR STATE REPRESENTATIVE	Transaction ID: SB29.6810 Date of Disbursement 06 / 13 / 2008
	Mailing Address PO BOX 124	
	City HARRISONVILLE State MO Zip Code 64701	Amount of Each Disbursement this Period 325.00
	Purpose of Disbursement CONTRIBUTION Candidate Name SCAVUZZO FOR STATE REPRESENTATIVE Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	011 Category/ Type

SUBTOTAL of Disbursements This Page (optional)	975.00
TOTAL This Period (last page this line number only)	

**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)

PAGE 24 / 24

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
PIPEFITTERS LOCAL #533 VOLUNTEER POLITICAL FUND

A. Full Name (Last, First, Middle Initial) VERN HARLAN FOR STATE REPRESENTATIVE <hr/> Mailing Address 7435 LEADALE DRIVE <hr/> City ST. LOUIS State MO Zip Code 63121 <hr/> Purpose of Disbursement CONTRIBUTION Candidate Name VERN HARLAN FOR STATE REPRESENTATIVE Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.6786 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 8
	Amount of Each Disbursement this Period 325.00
	011 Category/ Type
B. Full Name (Last, First, Middle Initial) WRIGHT-JONES FOR SENATE <hr/> Mailing Address PO BOX 78815 <hr/> City ST. LOUIS State MO Zip Code 63178 <hr/> Purpose of Disbursement CONTRIBUTION Candidate Name WRIGHT-JONES FOR SENATE Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.6783 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 8
	Amount of Each Disbursement this Period 500.00
	011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

825.00

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

26425.00