

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 NORTHWEST MISSOURI VICTORY

ADDRESS (number and street) PO BOX 14194 Check if different than previously reported. (ACC) PARKVILLE MO 64152

2. FEC IDENTIFICATION NUMBER C00442608 3. IS THIS REPORT X NEW (N) OR AMENDED (A)

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

5. Covering Period 07 01 2008 through 09 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 Robert J. Saunders Signature of Treasurer Electronically Filed by Robert J. Saunders Date 10 15 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 FE6AN026 FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
NORTHWEST MISSOURI VICTORY

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	9

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		27460.00
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	18885.10									
(c) Total Receipts (from Line 19) .....	74850.00	219349.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	93735.10	246809.00								
7. Total Disbursements (from Line 31) .....	82019.27	235093.17								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	11715.83	11715.83								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> 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  
NORTHWEST MISSOURI VICTORY

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	9

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	66150.00	173150.00
(i) Itemized (use Schedule A) .....	1100.00	1100.00
(ii) Unitemized .....	67250.00	174250.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	7600.00	45099.00
(c) Other Political Committees (such as PACs) .....	74850.00	219349.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
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.) .....	0.00	0.00
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)) .....	74850.00	219349.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	74850.00	219349.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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.....	4114.27	5139.17
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	4114.27	5139.17
22. Transfers to Affiliated/Other Party Committees.....	77905.00	228955.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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	999.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	999.00
29. Other Disbursements.....	0.00	0.00
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))..	82019.27	235093.17
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	82019.27	235093.17

**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 .....	74850.00	219349.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	999.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	74850.00	218350.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	4114.27	5139.17
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	4114.27	5139.17

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 6 / 45  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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)  
NORTHWEST MISSOURI VICTORY

**A.** Full Name (Last, First, Middle Initial)  
Jawad Akhtar  
Mailing Address R.R. 1, Box 90B  
City Quincy State IL Zip Code 62301  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Assurant Employee Benefits Occupation Enterprise Architect  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00  
Date of Receipt 09 / 03 / 2008  
Transaction ID: SA11AI.4414  
Amount of Each Receipt this Period 250.00

**B.** Full Name (Last, First, Middle Initial)  
Janet K. Archer  
Mailing Address 6153 N. Mattox  
City Kansas City State MO Zip Code 64151  
FEC ID number of contributing federal political committee. **C**  
Name of Employer R&J Archer Petroleum Occupation Owner/Manager  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1250.00  
Date of Receipt 09 / 03 / 2008  
Transaction ID: SA11AI.4334  
Amount of Each Receipt this Period 1250.00

**C.** Full Name (Last, First, Middle Initial)  
James M. Ash  
Mailing Address 712 Westwoods Drive  
City Liberty State MO Zip Code 64068  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Blackwell Sanders Occupation Attorney  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 7500.00  
Date of Receipt 09 / 10 / 2008  
Transaction ID: SA11AI.4439  
Amount of Each Receipt this Period 2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4000.00  
**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 / 45  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**NORTHWEST MISSOURI VICTORY**

**A.** Full Name (Last, First, Middle Initial)  
Jacquelyn Belt

Mailing Address 9221 Ward Parkway #430

City State Zip Code  
**Kansas City MO 64114**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Self-employed Psychologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 03 / 2008

**Transaction ID: SA11AI.4406**

Amount of Each Receipt this Period 250.00

**B.** Full Name (Last, First, Middle Initial)  
John Bennett

Mailing Address 410 West 8th Street

City State Zip Code  
**Kansas City MO 64105**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Mastoe Realty Real Estate Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 29 / 2008

**Transaction ID: SA11AI.4446**

Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Barton S. Blond

Mailing Address 1121 Valentine

City State Zip Code  
**Kansas City MO 64111**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Blond & Allison Lawyer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 03 / 2008

**Transaction ID: SA11AI.4396**

Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... 1500.00

**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: (check only one)	PAGE 8 / 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NORTHWEST MISSOURI VICTORY

<b>A.</b>	Full Name (Last, First, Middle Initial) Stephen Bough		Date of Receipt	
	Mailing Address 917 West 43rd Street		M M / D D / Y Y Y Y Y 08 / 27 / 2008	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.4297
	Kansas City	MO	64111	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		1000.00	
Name of Employer Self-employed		Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Ronald Bremer		Date of Receipt	
	Mailing Address 636 West 69th Street		M M / D D / Y Y Y Y Y 09 / 18 / 2008	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.4332
	Kansas City	MO	64113	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		250.00	
Name of Employer Formation Strategies		Occupation Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Mary Breed Brink		Date of Receipt	
	Mailing Address 333 W. Meyer Blvd., #408		M M / D D / Y Y Y Y Y 09 / 03 / 2008	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.4352
	Kansas City	MO	64113	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		250.00	
Name of Employer Retired		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<b>TOTAL</b> 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 9 / 45  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NORTHWEST MISSOURI VICTORY

**A.** Full Name (Last, First, Middle Initial)  
Anita B. Butler

Mailing Address 8123 S. Cummings Road

City State Zip Code  
Oak Grove MO 64075

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

Name of Employer Occupation  
Krigel & Krigel Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
09 / 07 / 2008

**Transaction ID:** SA11AI.4432

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Jack L. Campbell

Mailing Address 6318 Morningside

City State Zip Code  
Kansas City MO 64113

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

Name of Employer Occupation  
Shughart Thomson Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
09 / 03 / 2008

**Transaction ID:** SA11AI.4390

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Michele M. Chollet

Mailing Address 444 East 74th Terrace

City State Zip Code  
Kansas City MO 64131

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

Name of Employer Occupation  
Devine and Chollet Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
09 / 03 / 2008

**Transaction ID:** SA11AI.4416

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1250.00**

**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 10 / 45

(check only one)

<input checked="" 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 type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NORTHWEST MISSOURI VICTORY

**A.**

Full Name (Last, First, Middle Initial)

David L. Cochran

Mailing Address 5629 Cove View Court

City State Zip Code  
Parkville MO 64152

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

Name of Employer Occupation  
Cochran Head & Co. CPA

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.4314

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Collins Noteis & Associates

Mailing Address 1600 Genessee Street #354

City State Zip Code  
Kansas City MO 64102

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.4398

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Vicki L. Noteis

Mailing Address 1600 Genessee Street #354

City State Zip Code  
Kansas City MO 64102

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

Name of Employer Occupation  
Collins Noteis & Associates Architect

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.4398.0

Amount of Each Receipt this Period

250.00

[MEMO ITEM]

**SUBTOTAL** of Receipts This Page (optional) .....

1250.00

**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 11 / 45  
(check only one)

<input checked="" 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 type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
NORTHWEST MISSOURI VICTORY

**A.**

Full Name (Last, First, Middle Initial) Louise Cummings		Date of Receipt MM / DD / YYYY 09 / 03 / 2008
Mailing Address 1213 North Summers Street		<b>Transaction ID:</b> SA11AI.4328
City Stanberry	State MO	Zip Code 64489
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

**B.**

Full Name (Last, First, Middle Initial) Don F. Dagenais		Date of Receipt MM / DD / YYYY 09 / 03 / 2008
Mailing Address 815 Arno Road		<b>Transaction ID:</b> SA11AI.4326
City Kansas City	State MO	Zip Code 64113
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Lathrop & Gage	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

**C.**

Full Name (Last, First, Middle Initial) Leland F. Dempsey		Date of Receipt MM / DD / YYYY 09 / 03 / 2008
Mailing Address 1100 Main Street #1860		<b>Transaction ID:</b> SA11AI.4418
City Kansas City	State MO	Zip Code 64105
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Dempsey and Kingsland	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<b>TOTAL</b> 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: (check only one)	PAGE 12 / 45
	<input checked="" 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 type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NORTHWEST MISSOURI VICTORY

<b>A.</b>	Full Name (Last, First, Middle Initial) Mignon G. Deshon	Date of Receipt MM / DD / YYYY 09 / 03 / 2008
	Mailing Address 2810 Ashland Avenue	<b>Transaction ID:</b> SA11AI.4338
	City State Zip Code St. Joseph MO 64506	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self-employed Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Laurie N. DiPadova-Stocks	Date of Receipt MM / DD / YYYY 09 / 05 / 2008
	Mailing Address 909 Walnut Street #2304	<b>Transaction ID:</b> SA11AI.4422
	City State Zip Code Kansas City MO 64106	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Park University Occupation Dean Hauptmann School Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Molly A. Droge	Date of Receipt MM / DD / YYYY 09 / 04 / 2008
	Mailing Address 4343 N. Jarboe Court	<b>Transaction ID:</b> SA11AI.4320
	City State Zip Code Kansas City MO 64116	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self-employed Occupation Physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1750.00
<b>TOTAL</b> 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 13 / 45  
(check only one)

<input checked="" 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 type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NORTHWEST MISSOURI VICTORY

**A.**

Full Name (Last, First, Middle Initial) Todd Epsten		Date of Receipt MM / DD / YYYY 08 / 27 / 2008
Mailing Address 48 Westmoreland Place		<b>Transaction ID:</b> SA11AI.4302
City St. Louis	State MO	Zip Code 63108
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5000.00
Name of Employer Major Brands Inc.	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

**B.**

Full Name (Last, First, Middle Initial) Harold L. Fridkin		Date of Receipt MM / DD / YYYY 09 / 03 / 2008
Mailing Address 2345 Grand Blvd.		<b>Transaction ID:</b> SA11AI.4384
City Kansas City	State MO	Zip Code 64100
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Lathrop & Gage	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

**C.**

Full Name (Last, First, Middle Initial) Thomas J. Fritzen		Date of Receipt MM / DD / YYYY 08 / 24 / 2008
Mailing Address 12307 Baltimore Avenue		<b>Transaction ID:</b> SA11AI.4273
City Kansas City	State MO	Zip Code 64145
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Self-employed	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	6000.00
<b>TOTAL</b> 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 14 / 45

(check only one)

<input checked="" 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 type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NORTHWEST MISSOURI VICTORY

**A.**

Full Name (Last, First, Middle Initial)  
Grill Law Firm LLC

Mailing Address 5555 NW Barry Road Suite A

City State Zip Code  
Kansas City MO 64154

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.4342

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)  
Brad A. Grill

Mailing Address 5555 NW Barry Road Suite A

City State Zip Code  
Kansas City MO 64154

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

Name of Employer Occupation  
Self-employed Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.4342.0

Amount of Each Receipt this Period

250.00

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
Tom Hansen

Mailing Address 1732 SW 24th Street

City State Zip Code  
Blue Springs MO 64105

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

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt

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

Transaction ID: SA11AI.4300

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1250.00

**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 15 / 45  
(check only one)

<input checked="" 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 type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
NORTHWEST MISSOURI VICTORY

**A.**

Full Name (Last, First, Middle Initial)  
Jim Heeter

Mailing Address 3100 W. 68th Street

City Mission Hills State KS Zip Code 66208

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

Name of Employer Sonnenschein Nath Rosenthal Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 09 / 03 / 2008  
Transaction ID: SA11AI.4376  
Amount of Each Receipt this Period: 1000.00

**B.**

Full Name (Last, First, Middle Initial)  
High Impact Solutons LLC

Mailing Address 6518 Claret

City Parkville State MO Zip Code 64152

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 09 / 03 / 2008  
Transaction ID: SA11AI.4392  
Amount of Each Receipt this Period: 1000.00

**C.**

Full Name (Last, First, Middle Initial)  
John B. Wood

Mailing Address 6518 Claret

City Parkville State MO Zip Code 64152

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

Name of Employer Self-employed Occupation Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 09 / 03 / 2008  
Transaction ID: SA11AI.4392.0  
Amount of Each Receipt this Period: 1000.00

[MEMO ITEM]

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2000.00

**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 16 / 45
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NORTHWEST MISSOURI VICTORY

<b>A.</b>	Full Name (Last, First, Middle Initial) Stuart P. Hunt		Date of Receipt
	Mailing Address 412 NW 43rd Terrace		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 03 / 2008
	City	State	Zip Code
	Kansas City	MO	64116
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Yarco		Occupation Real Estate Developer	<b>Transaction ID:</b> SA11AI.4316
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 250.00	<input type="text"/> 250.00

<b>B.</b>	Full Name (Last, First, Middle Initial) David L. Johnson		Date of Receipt
	Mailing Address 104 Armour Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 03 / 2008
	City	State	Zip Code
	North Kansas City	MO	64116
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Maxus Properties		Occupation CEO	<b>Transaction ID:</b> SA11AI.4420
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 5000.00	<input type="text"/> 5000.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Charles M. Johnston		Date of Receipt
	Mailing Address P.O. Box 346		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 08 / 28 / 2008
	City	State	Zip Code
	Platte City	MO	64079
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Retired		Occupation Retired	<b>Transaction ID:</b> SA11AI.4304
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 300.00	<input type="text"/> 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 5550.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NORTHWEST MISSOURI VICTORY

<b>A.</b>	Full Name (Last, First, Middle Initial) Harry S. Jonas		Date of Receipt
	Mailing Address 207 NW Spruce Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 03 / 2008
	City	State	Zip Code
	Lees Summit	MO	64064
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.4354
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Pamela J. Kelley		Date of Receipt
	Mailing Address 17507 Penrose Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 03 / 2008
	City	State	Zip Code
	Lenexa	KS	66219
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.4340
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Joe Kenton		Date of Receipt
	Mailing Address P.O. Box 480456		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 08 / 25 / 2008
	City	State	Zip Code
	Kansas City	MO	64148
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.4285
Name of Employer Self-employed		Occupation Stamp Dealer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 45
	<input checked="" 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 type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NORTHWEST MISSOURI VICTORY**

<b>A.</b>	Full Name (Last, First, Middle Initial) Marta (Deedee) King	Date of Receipt MM / DD / YYYY 09 / 04 / 2008
	Mailing Address 4950 Central Street #1002	<b>Transaction ID:</b> SA11AI.4318
	City State Zip Code Kansas City MO 64112	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Retired Occupation Retired	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Jr. Robert D. Kingsland	Date of Receipt MM / DD / YYYY 09 / 03 / 2008
	Mailing Address 8411 Hall	<b>Transaction ID:</b> SA11AI.4402
	City State Zip Code Lenexa KS 66219	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Dempsey & Kingsland Occupation Attorney	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00

<b>C.</b>	Full Name (Last, First, Middle Initial) L.J. Kissick	Date of Receipt MM / DD / YYYY 09 / 03 / 2008
	Mailing Address 8131 Indiana	<b>Transaction ID:</b> SA11AI.4336
	City State Zip Code Kansas City MO 64132	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Kissick Construction Co. Occupation Owner	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1500.00</b>
<b>TOTAL</b> 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 19 / 45  
(check only one)

<input checked="" 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 type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
NORTHWEST MISSOURI VICTORY

**A.**

Full Name (Last, First, Middle Initial)  
Roxen E. Koch

Mailing Address 2926 Grand Avenue

City State Zip Code  
Kansas City MO 64108

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

Name of Employer King Hershey Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
09 / 03 / 2008

**Transaction ID:** SA11AI.4322

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
Herbert M. Kohn

Mailing Address 5049 Wornall, Unit 6B

City State Zip Code  
Kansas City MO 64112

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

Name of Employer Bryan Cave Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
MM / DD / YYYY  
09 / 07 / 2008

**Transaction ID:** SA11AI.4430

Amount of Each Receipt this Period  
1500.00

**C.**

Full Name (Last, First, Middle Initial)  
Herbert M. Kohn

Mailing Address 5049 Wornall, Unit 6B

City State Zip Code  
Kansas City MO 64112

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

Name of Employer Bryan Cave Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2600.00

Date of Receipt  
MM / DD / YYYY  
09 / 12 / 2008

**Transaction ID:** SA11AI.4442

Amount of Each Receipt this Period  
1100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2850.00**

**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: (check only one)	PAGE 20 / 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NORTHWEST MISSOURI VICTORY

<b>A.</b>	Full Name (Last, First, Middle Initial) Audrey H. Langworthy	Date of Receipt MM / DD / YYYY 09 / 07 / 2008
	Mailing Address 6324 Ash	<b>Transaction ID:</b> SA11AI.4434
	City State Zip Code Prairie Village KS 66208	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Jeanne P. Lawing	Date of Receipt MM / DD / YYYY 09 / 12 / 2008
	Mailing Address 3205 NE 47th Street	<b>Transaction ID:</b> SA11AI.4444
	City State Zip Code Kansas City MO 64117	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Charles R. McCann	Date of Receipt MM / DD / YYYY 09 / 03 / 2008
	Mailing Address 2011 West 70th Terrace	<b>Transaction ID:</b> SA11AI.4324
	City State Zip Code Mission Hills KS 66208	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self-employed Occupation CPA Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	850.00
<b>TOTAL</b> 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 21 / 45  
(check only one)

<input checked="" 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 type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
NORTHWEST MISSOURI VICTORY

**A.** Full Name (Last, First, Middle Initial)  
Mary Kay McPhee

Mailing Address 4740 Roanoke Parkway #1105

City State Zip Code  
Kansas City MO 64112

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: MM / DD / YYYY  
08 / 21 / 2008

Transaction ID: SA11AI.4269

Amount of Each Receipt this Period: 500.00

**B.** Full Name (Last, First, Middle Initial)  
C. Stephen Metzler

Mailing Address 3724 Holmes

City State Zip Code  
Kansas City MO 64109

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

Name of Employer Metzler Brothers Inc. Occupation Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: MM / DD / YYYY  
08 / 29 / 2008

Transaction ID: SA11AI.4308

Amount of Each Receipt this Period: 500.00

**C.** Full Name (Last, First, Middle Initial)  
Marshall V. Miller

Mailing Address 701 E. 45th Street

City State Zip Code  
Kansas City MO 64110

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

Name of Employer Miller & Company Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: MM / DD / YYYY  
09 / 03 / 2008

Transaction ID: SA11AI.4360

Amount of Each Receipt this Period: 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2000.00**

**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: (check only one)	PAGE 22 / 45
	<input checked="" 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 type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NORTHWEST MISSOURI VICTORY**

<b>A.</b>	Full Name (Last, First, Middle Initial) Donvan D. Mouton	Date of Receipt MM / DD / YYYY 09 / 03 / 2008
	Mailing Address P.O. Box 7205	<b>Transaction ID:</b> SA11AI.4364
	City State Zip Code Kansas City MO 64113	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer One Economy Corp. Occupation Program Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Charles F. Myers	Date of Receipt MM / DD / YYYY 09 / 03 / 2008
	Mailing Address 505 NW 43rd Terrace	<b>Transaction ID:</b> SA11AI.4382
	City State Zip Code Kansas City MO 64116	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Lathrop & Gage Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Kay L. Myers	Date of Receipt MM / DD / YYYY 09 / 03 / 2008
	Mailing Address 505 NW 43rd Terrace	<b>Transaction ID:</b> SA11AI.4386
	City State Zip Code Kansas City MO 64116	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Self-employed Occupation Community Volunteer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>750.00</b>
<b>TOTAL</b> 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 23 / 45  
(check only one)

<input checked="" 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 type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NORTHWEST MISSOURI VICTORY

**A.**

Full Name (Last, First, Middle Initial)  
Bobbie Lou Nailling

Mailing Address 1125 Grand Blvd., #400

City State Zip Code  
Kansas City MO 64106

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 08 / 29 / 2008  
Transaction ID: SA11AI.4310  
Amount of Each Receipt this Period: 250.00

**B.**

Full Name (Last, First, Middle Initial)  
William C. Nelson

Mailing Address 6521 Wenonga Terrace

City State Zip Code  
Mission Hills KS 66208

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

Name of Employer GK Baum Holdings Occupation Chairman, Asset Management

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 08 / 28 / 2008  
Transaction ID: SA11AI.4312  
Amount of Each Receipt this Period: 1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Richard R. Oswald

Mailing Address 15593 245th Street

City State Zip Code  
Langdon MO 64446

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

Name of Employer Self-employed Occupation Farmer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 09 / 03 / 2008  
Transaction ID: SA11AI.4362  
Amount of Each Receipt this Period: 300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1550.00

**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: (check only one)	PAGE 24 / 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NORTHWEST MISSOURI VICTORY

<b>A.</b>	Full Name (Last, First, Middle Initial) Glen W. Overton	Date of Receipt MM / DD / YYYY 09 / 03 / 2008
	Mailing Address 441 West 67th Street	<b>Transaction ID:</b> SA11AI.4380
	City State Zip Code Kansas City MO 64113	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation Overton Group Principal	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Joel Pelofsky	Date of Receipt MM / DD / YYYY 09 / 03 / 2008
	Mailing Address 421 West Dartmouth	<b>Transaction ID:</b> SA11AI.4404
	City State Zip Code Kansas City MO 64113	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation Self-employed Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Lisa Pelofsky	Date of Receipt MM / DD / YYYY 09 / 03 / 2008
	Mailing Address 2750 Charlotte Street	<b>Transaction ID:</b> SA11AI.4394
	City State Zip Code Kansas City MO 64109	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation Self-employed Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>750.00</b>
<b>TOTAL</b> 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: (check only one)	PAGE 25 / 45
	<input checked="" 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 type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NORTHWEST MISSOURI VICTORY

<b>A.</b>	Full Name (Last, First, Middle Initial) Robert Permut		Date of Receipt
	Mailing Address 3504 Woodland Pointe		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 07 / 2008
	City	State	Zip Code
	St. Joseph	MO	64506
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.4436
Name of Employer Heartland Health		Occupation Physician	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Robert Pevitts		Date of Receipt
	Mailing Address 8650 NW River Park Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 05 / 2008
	City	State	Zip Code
	Parkville	MO	64153
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.4426
Name of Employer Park University		Occupation University Administrator	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Sr. William E. Pfeiffer		Date of Receipt
	Mailing Address 4740 Roanoke Parkway #1105		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 21 / 2008
	City	State	Zip Code
	Kansas City	MO	64112
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.4267
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 45  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NORTHWEST MISSOURI VICTORY

**A.** Full Name (Last, First, Middle Initial)  
Ron Pressman

Mailing Address 673 Weed Street

City State Zip Code  
New Canaan CT 06840

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

Name of Employer Occupation  
General Electric General Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
07 / 21 / 2008

Transaction ID: SA11AI.4265

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Patricia E. Raffel

Mailing Address 7019 NW Emerald Hills Drive

City State Zip Code  
Parkville MO 64152

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

Name of Employer Occupation  
Self-employed Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 7500.00

Date of Receipt  
MM / DD / YYYY  
08 / 27 / 2008

Transaction ID: SA11AI.4298

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Nancy J. Reed

Mailing Address 2602 Francis Street

City State Zip Code  
St. Joseph MO 64501

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

Name of Employer Occupation  
Self-employed Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
08 / 27 / 2008

Transaction ID: SA11AI.4295

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **10500.00**

**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: (check only one)	PAGE 27 / 45
	<input checked="" 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 type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NORTHWEST MISSOURI VICTORY**

**A.** Full Name (Last, First, Middle Initial)  
Albert A. Riederer

Mailing Address 5401 Wyandotte Street

City State Zip Code  
Kansas City MO 64112

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

Name of Employer Self-employed Occupation Lawyer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2300.00

Date of Receipt: 09 / 03 / 2008  
**Transaction ID: SA11AI.4344**  
Amount of Each Receipt this Period: 2300.00

**B.** Full Name (Last, First, Middle Initial)  
Jerome D. Riffel

Mailing Address 3701 Valentine Road

City State Zip Code  
Kansas City MO 64111

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

Name of Employer Lathrop & Gage Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt: 09 / 03 / 2008  
**Transaction ID: SA11AI.4378**  
Amount of Each Receipt this Period: 1250.00

**C.** Full Name (Last, First, Middle Initial)  
Landon H. Rowland

Mailing Address 920 Main Street #204

City State Zip Code  
Kansas City MO 64105

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

Name of Employer Janus Capital Occupation Chairman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2300.00

Date of Receipt: 08 / 27 / 2008  
**Transaction ID: SA11AI.4293**  
Amount of Each Receipt this Period: 2300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5850.00**

**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 28 / 45

(check only one)

<input checked="" 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 type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NORTHWEST MISSOURI VICTORY

**A.**

Full Name (Last, First, Middle Initial)  
William E. Royster

Mailing Address 3500 Gladstone Blvd.

City State Zip Code  
Kansas City MO 64123

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

Name of Employer Occupation  
Self-employed Activist/Facilitator

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 05 / 2008

Transaction ID: SA11AI.4428

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)  
David W. Russell

Mailing Address 51 The Woodlands

City State Zip Code  
Gladstone MO 64119

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

Name of Employer Occupation  
Self-employed Attorney

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 27 / 2008

Transaction ID: SA11AI.4291

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)  
Phillip Patrick Scaglia

Mailing Address 2903 SW 13th Terrace

City State Zip Code  
Lee's Summit MO 64081

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

Name of Employer Occupation  
Powerful Performance Solutions President

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 24 / 2008

Transaction ID: SA11AI.4271

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1250.00

**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 29 / 45

(check only one)

<input checked="" 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 type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NORTHWEST MISSOURI VICTORY

**A.**

Full Name (Last, First, Middle Initial)  
Joe R. Serviss

Mailing Address 4933 Westwood Terrace

City State Zip Code  
Kansas City MO 64112

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.4412

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)  
Laura E. Shultz

Mailing Address 4817 Jarboe Street

City State Zip Code  
Kansas City MO 64112

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

Name of Employer Occupation  
Self-employed Photographer

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.4346

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)  
Kevin S. Smith

Mailing Address 3747 Valentine Road

City State Zip Code  
Kansas City MO 64111

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

Name of Employer Occupation  
Self-employed Consultant

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.4370

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1000.00

**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 30 / 45  
(check only one)

<input checked="" 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 type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)  
NORTHWEST MISSOURI VICTORY

**A.**

Full Name (Last, First, Middle Initial)  
Stewart J. Smith

Mailing Address 214 East 30th Street

City State Zip Code  
Kansas City MO 64108

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

Name of Employer Occupation  
Ellerbe Becket Architect

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
09 / 11 / 2008

Transaction ID: SA11AI.4438

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
Brian K. Staihr

Mailing Address 110 Morningside Drive

City State Zip Code  
Kansas City MO 64113

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

Name of Employer Occupation  
Embarq Economist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
08 / 25 / 2008

Transaction ID: SA11AI.4283

Amount of Each Receipt this Period  
500.00

**C.**

Full Name (Last, First, Middle Initial)  
Doris Ann Stanton

Mailing Address 800 Stanton Drive

City State Zip Code  
Rock Port MO 64482

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
09 / 03 / 2008

Transaction ID: SA11AI.4410

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1250.00

**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 31 / 45

(check only one)

<input checked="" 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 type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NORTHWEST MISSOURI VICTORY

**A.**

Full Name (Last, First, Middle Initial)  
Robert Steinbach

Mailing Address 720 West 44th #3008

City State Zip Code  
Kansas City MO 64111

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.4287

Amount of Each Receipt this Period  
500.00

**B.**

Full Name (Last, First, Middle Initial)  
Richard P. Stitt

Mailing Address 110 Morningside Drive

City State Zip Code  
Kansas City MO 64113

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

Name of Employer Occupation  
Shughart Thomson Lawyer

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.4281

Amount of Each Receipt this Period  
500.00

**C.**

Full Name (Last, First, Middle Initial)  
Scott S. Taylor

Mailing Address 632 E. 108th Street

City State Zip Code  
Kansas City MO 64131

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

Name of Employer Occupation  
Miller & Company Attorney

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.4358

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶

1250.00

**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: (check only one)	PAGE 32 / 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NORTHWEST MISSOURI VICTORY

<b>A.</b>	Full Name (Last, First, Middle Initial) Brenda A. Tinnen	Date of Receipt MM / DD / YYYY 09 / 11 / 2008
	Mailing Address 1101 Walnut #1709	<b>Transaction ID:</b> SA11AI.4441
	City State Zip Code Kansas City MO 64106	Amount of Each Receipt this Period 1500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Sprint Center Senior Vice President, Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Ruth Krigel Tivol	Date of Receipt MM / DD / YYYY 08 / 29 / 2008
	Mailing Address 400 W. 49th Terrace	<b>Transaction ID:</b> SA11AI.4306
	City State Zip Code Kansas City MO 64112	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Retired Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) John H. Wandless	Date of Receipt MM / DD / YYYY 08 / 25 / 2008
	Mailing Address 5426 Wyandotte Street	<b>Transaction ID:</b> SA11AI.4279
	City State Zip Code Kansas City MO 64112	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Computer Tech Corp. Chair	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3500.00
<b>TOTAL</b> 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: (check only one)	PAGE 33 / 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NORTHWEST MISSOURI VICTORY

<b>A.</b>	Full Name (Last, First, Middle Initial) Cynthia Wendt	Date of Receipt MM / DD / YYYY 09 / 03 / 2008
	Mailing Address 13007 Windsor Circle	<b>Transaction ID:</b> SA11AI.4372
	City State Zip Code Leawood KS 66209	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer US House of Representatives Occupation Congressional Aide Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) J. Ryan Williams	Date of Receipt MM / DD / YYYY 09 / 03 / 2008
	Mailing Address 4705 NE 60th Terrace	<b>Transaction ID:</b> SA11AI.4408
	City State Zip Code Kansas City MO 64119	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self-employed Occupation Businessman Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Jerome T. Wolf	Date of Receipt MM / DD / YYYY 09 / 03 / 2008
	Mailing Address 2411 West 70th Terrace	<b>Transaction ID:</b> SA11AI.4388
	City State Zip Code Mission Hills KS 66208	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Sonnenschein Nath Rosenthal Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1000.00
<b>TOTAL</b> 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 34 / 45	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NORTHWEST MISSOURI VICTORY

<b>A.</b>	Full Name (Last, First, Middle Initial) James R. Wyrsh		Date of Receipt	
	Mailing Address 1501 NE Sunnycreek Lane		M M / D D / Y Y Y Y 09 / 03 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.4330
	Blue Springs	MO	64014	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
	C		500.00	
Name of Employer Wyrsh Hobbs Mirakian		Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	500.00
<b>TOTAL</b> This Period (last page this line number only) .....	66150.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 35 / 45  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NORTHWEST MISSOURI VICTORY

**A.** Full Name (Last, First, Middle Initial)  
Committee to Elect Jason Holsm

Mailing Address 2511 Red Bridge Terrace

City State Zip Code  
Kansas City MO 64131

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 0 3 / 2 0 0 8

**Transaction ID:** SA11C.4450

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
EMILY's List

Mailing Address 1120 Connecticut Avenue NW #1100

City State Zip Code  
Washington DC 20036

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 2 6 / 2 0 0 8

**Transaction ID:** SA11C.4451

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
Service Employees International Union COPE

Mailing Address 1800 Massachusetts Avenue NW

City State Zip Code  
Washington DC 20036

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

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

**Transaction ID:** SA11C.4448

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **7600.00**

**TOTAL** This Period (last page this line number only) ..... ► **7600.00**

# 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

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NAME OF COMMITTEE (In Full)  
NORTHWEST MISSOURI VICTORY

<p><b>A.</b> Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address P.O. Box 53852</p> <p>City Phoenix State AZ Zip Code 85072</p> <p>Purpose of Disbursement Credit Card Processing 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><b>Transaction ID:</b> SB21B.4233</p> <p>Date of Disbursement 07 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 4.50</p> <p>Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address P.O. Box 53852</p> <p>City Phoenix State AZ Zip Code 85072</p> <p>Purpose of Disbursement Credit Card Processing 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><b>Transaction ID:</b> SB21B.4235</p> <p>Date of Disbursement 08 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 5.95</p> <p>Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address P.O. Box 53852</p> <p>City Phoenix State AZ Zip Code 85072</p> <p>Purpose of Disbursement Credit Card Processing Fees</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><b>Transaction ID:</b> SB21B.4242</p> <p>Date of Disbursement 09 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 169.63</p> <p>Category/Type</p>

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

180.08

**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 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

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NAME OF COMMITTEE (In Full)  
NORTHWEST MISSOURI VICTORY

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address P.O. Box 53852</p> <p>City Phoenix State AZ Zip Code 85072</p> <p>Purpose of Disbursement Credit Card Processing Fees</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><b>Transaction ID:</b> SB21B.4244</p> <p>Date of Disbursement 09 / 03 / 2008</p> <p>Amount of Each Disbursement this Period 5.95</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address P.O. Box 53852</p> <p>City Phoenix State AZ Zip Code 85072</p> <p>Purpose of Disbursement Credit Card Processing Fees</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><b>Transaction ID:</b> SB21B.4251</p> <p>Date of Disbursement 09 / 08 / 2008</p> <p>Amount of Each Disbursement this Period 29.50</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address P.O. Box 53852</p> <p>City Phoenix State AZ Zip Code 85072</p> <p>Purpose of Disbursement Credit Card Processing Fees</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><b>Transaction ID:</b> SB21B.4253</p> <p>Date of Disbursement 09 / 11 / 2008</p> <p>Amount of Each Disbursement this Period 39.83</p>

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

75.28

**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 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

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NAME OF COMMITTEE (In Full)  
NORTHWEST MISSOURI VICTORY

A.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: SB21B.4232 Date of Disbursement 07 / 01 / 2008
	Mailing Address 8351 NW Prairie View Road	Amount of Each Disbursement this Period 1.60
	City Kansas City State MO Zip Code 64151	
	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: SB21B.4234 Date of Disbursement 08 / 01 / 2008
	Mailing Address 8351 NW Prairie View Road	Amount of Each Disbursement this Period 161.50
	City Kansas City State MO Zip Code 64151	
	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: SB21B.4240 Date of Disbursement 08 / 29 / 2008
	Mailing Address 8351 NW Prairie View Road	Amount of Each Disbursement this Period 25.00
	City Kansas City State MO Zip Code 64151	
	Purpose of Disbursement Bank Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	188.10
<b>TOTAL</b> 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)

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<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

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NAME OF COMMITTEE (In Full)  
NORTHWEST MISSOURI VICTORY

<b>A.</b> Full Name (Last, First, Middle Initial) Bank of America Mailing Address 8351 NW Prairie View Road City Kansas City State MO Zip Code 64151 Purpose of Disbursement Credit Card Processing Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21B.4241 Date of Disbursement 09 / 02 / 2008
	Amount of Each Disbursement this Period 175.40
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>B.</b> Full Name (Last, First, Middle Initial) Bank of America Mailing Address 8351 NW Prairie View Road City Kansas City State MO Zip Code 64151 Purpose of Disbursement Bank Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21B.4247 Date of Disbursement 09 / 03 / 2008
	Amount of Each Disbursement this Period 25.00
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>C.</b> Full Name (Last, First, Middle Initial) Bank of America Mailing Address 8351 NW Prairie View Road City Kansas City State MO Zip Code 64151 Purpose of Disbursement Bank Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21B.4250 Date of Disbursement 09 / 05 / 2008
	Amount of Each Disbursement this Period 25.00
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	225.40
<b>TOTAL</b> 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)

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<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

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NAME OF COMMITTEE (In Full)  
NORTHWEST MISSOURI VICTORY

A.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: SB21B.4252 Date of Disbursement
	Mailing Address 8351 NW Prairie View Road	<input type="text" value="09"/> / <input type="text" value="08"/> / <input type="text" value="2008"/>
	City Kansas City State MO Zip Code 64151	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Fee	<input type="text" value="25.00"/>
	Candidate Name	<input type="text"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: SB21B.4254 Date of Disbursement
	Mailing Address 8351 NW Prairie View Road	<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2008"/>
	City Kansas City State MO Zip Code 64151	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Fee	<input type="text" value="25.00"/>
	Candidate Name	<input type="text"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: SB21B.4255 Date of Disbursement
	Mailing Address 8351 NW Prairie View Road	<input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City Kansas City State MO Zip Code 64151	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Fee	<input type="text" value="5.00"/>
	Candidate Name	<input type="text"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="55.00"/>
<b>TOTAL</b> 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

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NAME OF COMMITTEE (In Full)  
NORTHWEST MISSOURI VICTORY

A.	Full Name (Last, First, Middle Initial) Marriott Hotel <hr/> Mailing Address 775 Brasilia Avenue <hr/> City Kansas City State MO Zip Code 64153 <hr/> Purpose of Disbursement Travel Expenses Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.4245 Date of Disbursement 09 / 03 / 2008	Amount of Each Disbursement this Period 292.91
B.	Full Name (Last, First, Middle Initial) Midwest Airlines <hr/> Mailing Address 6744 South Howell Avenue <hr/> City Oak Creek State WI Zip Code 53154 <hr/> Purpose of Disbursement Travel Expenses Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.4236 Date of Disbursement 08 / 22 / 2008	Amount of Each Disbursement this Period 424.50
C.	Full Name (Last, First, Middle Initial) Northwest Airliens <hr/> Mailing Address 2700 Lone Oak Parkway <hr/> City Egan State MN Zip Code 55121 <hr/> Purpose of Disbursement Travel Expenses Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.4238 Date of Disbursement 08 / 25 / 2008	Amount of Each Disbursement this Period 843.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1560.41
<b>TOTAL</b> 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)

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<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

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NAME OF COMMITTEE (In Full)  
NORTHWEST MISSOURI VICTORY

A.

Full Name (Last, First, Middle Initial)

Trezo Mare Restaurant

Mailing Address 4105 N. Mulberry Drive

City State Zip Code  
Kansas City MO 64116

Purpose of Disbursement  
Catering

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.4248

Date of Disbursement

09 / 04 / 2008

Amount of Each Disbursement this Period

1808.60

SUBTOTAL of Disbursements This Page (optional) .....

1808.60

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

4092.87

# 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 checked="" 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

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NAME OF COMMITTEE (In Full)  
NORTHWEST MISSOURI VICTORY

<p><b>A.</b> Full Name (Last, First, Middle Initial) KAY FOR CONGRESS</p> <p>Mailing Address PO BOX 14194</p> <p>City PARKVILLE State MO Zip Code 64152</p> <p>Purpose of Disbursement Joint Fundraising Proceeds</p> <p>Candidate Name KAY BARNES</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MO District: 06</p>	<p><b>Transaction ID:</b> SB22.4256</p> <p>Date of Disbursement 07 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 3300.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) KAY FOR CONGRESS</p> <p>Mailing Address PO BOX 14194</p> <p>City PARKVILLE State MO Zip Code 64152</p> <p>Purpose of Disbursement Joint Fundraising Proceeds</p> <p>Candidate Name KAY BARNES</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MO District: 06</p>	<p><b>Transaction ID:</b> SB22.4263</p> <p>Date of Disbursement 09 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 30000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) MISSOURI DEMOCRATIC STATE COMMITTEE</p> <p>Mailing Address P.O. Box 719</p> <p>City Jefferson City State MO Zip Code 65102</p> <p>Purpose of Disbursement Joint Fundraising Proceeds</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB22.4257</p> <p>Date of Disbursement 08 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 24000.00</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>57300.00</b>
<b>TOTAL</b> 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)

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<input type="checkbox"/> 21b	<input checked="" 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

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NAME OF COMMITTEE (In Full)  
NORTHWEST MISSOURI VICTORY

**A.** Full Name (Last, First, Middle Initial)  
MISSOURI DEMOCRATIC STATE COMMITTEE

Mailing Address P.O. Box 719

City State Zip Code  
Jefferson City MO 65102

Purpose of Disbursement  
Joint Fundraising Proceeds

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB22.4258

Date of Disbursement

09 / 03 / 2008

Amount of Each Disbursement this Period

4500.00

**B.** Full Name (Last, First, Middle Initial)  
MISSOURI DEMOCRATIC STATE COMMITTEE

Mailing Address P.O. Box 719

City State Zip Code  
Jefferson City MO 65102

Purpose of Disbursement  
Joint Fundraising Proceeds

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB22.4259

Date of Disbursement

09 / 05 / 2008

Amount of Each Disbursement this Period

4500.00

**C.** Full Name (Last, First, Middle Initial)  
MISSOURI DEMOCRATIC STATE COMMITTEE

Mailing Address P.O. Box 719

City State Zip Code  
Jefferson City MO 65102

Purpose of Disbursement  
Joint Fundraising Proceeds

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB22.4260

Date of Disbursement

09 / 08 / 2008

Amount of Each Disbursement this Period

9825.00

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

18825.00

**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)

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<input type="checkbox"/> 21b	<input checked="" 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

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NAME OF COMMITTEE (In Full)  
NORTHWEST MISSOURI VICTORY

A.	Full Name (Last, First, Middle Initial) MISSOURI DEMOCRATIC STATE COMMITTEE		Transaction ID: SB22.4261	
	Mailing Address P.O. Box 719		Date of Disbursement 09 / 11 / 2008	
	City Jefferson City	State MO	Zip Code 65102	Amount of Each Disbursement this Period 1780.00
	Purpose of Disbursement Joint Fundraising Proceeds		Category/ Type	
	Candidate Name			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1780.00
<b>TOTAL</b> This Period (last page this line number only) .....	77905.00