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PAGE 1 / 16

FEC FORM 3		ND DIS		CEIPTS EMENTS			Office Use Only
1. NAME OF COMMITTEE (in	full)	TYPE OR PRIN		Example: If typin over the lines.	g, type	12FE4M5	
		ESS					
ADDRESS (number ar	id street)	PO BOX 243					
Check if dif	ferent						
than previou reported. (A		SILVA				MO	63964
2. FEC IDENTIFIC	CATION NU	IMBER 🔻				STATE	ZIP CODE ▲ STATE ▼ DISTRICT
C C0054928	37		3. IS THIS REPORT	NEW (N)	OR	AMEND (A)	
4. TYPE OF RE			(b) 12-Day P I	RE-Election Repo Primary (12P) Convention (General (1 Special (1	
	Quarterly R r 15 Quarter	eport (Q2) ly Report (Q3)	Election of	on M M /	D D /	YYYYY	in the State of
January	v 31 Year-En	d Report (YE)	(c) 30-Day P (OST-Election Rep General (30G		Runoff (30	OR) Special (30S)
X Termina	ation Report	(TER)	Election	on/	D D /	Y Y Y Y	in the State of
5. Covering Period	M 07	M / D D / 01	Y Y Y Y 2015	through	м м 07	/ D D / 08	Y Y Y Y 2015
I certify that I have e			the best of my	knowledge and l	belief it is tr	rue, correct and	l complete.
Type or Print Name	of Treasurer	Mr. Chuck Ba	nks				
Signature of Treasure	er <u>Mr.</u> (Chuck Banks		[Electronically]	Filed]	Date	/ D D / Y Y Y Y 08 2015
NOTE: Submission of	false, errone	ous, or incomple	ete information ma	ay subject the per	son signing	this Report to th	ne penalties of 2 U.S.C. §437g.
Office Use Only							FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name STOCKER IN CONGRESS D 07 07 08 2015 01 2015 Report Covering the Period: From: To: COLUMN B COLUMN A This Period **Election Cycle-to-Date** 6. Net Contributions (other than loans) **Total Contributions** (a) 0.00 23392.00 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 0.00 23392.00 (subtract Line 6(b) from Line 6(a)) 7. Net Operating Expenditures (a) Total Operating Expenditures 0.00 72700.56 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 0.00 72700.56 (subtract Line 7(b) from Line 7(a)) 8. Cash on Hand at Close of 0.00 Reporting Period (from Line 27)..... 9. Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 210700.00 Schedule C and/or Schedule D)

For further information contact:

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

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

-	FEC Form 3 (Revised 12/2003) /rite or Type Committee Name STOCKER IN CONGRESS	ETAILED SUMMARY PAGE of Receipts	PAGE 3 / 16
	eport Covering the Period: From: 07	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11.	CONTRIBUTIONS (other than loans) FROM:		
	 (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A) (ii) Unitemized (iii) TOTAL of contributions 		15750.00 5142.00
	 from individuals (b) Political Party Committees (c) Other Political Committees (such as PACs) 		20892.00 0.00 2500.00 0.00
	 (d) The Candidate (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)) 	0.00	23392.00
12.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13.	LOANS: (a) Made or Guaranteed by the Candidate (b) All Other Loans (c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	50650.00 0.00 50650.00
14.	OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15.	OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16.	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	0.00	74042.00

Image# 201507089000065211

of Disbursements PAGE 4 / 16 FEC Form 3 (Revised 02/2003) COLUMN A COLUMN B **II. DISBURSEMENTS Total This Period Election Cycle-to-Date** 0.00 72700.56 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER 0.00 0.00 AUTHORIZED COMMITTEES 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed 0.00 0.00 by the Candidate..... 0.00 0.00 (b) Of All Other Loans (c) TOTAL LOAN REPAYMENTS 0.00 0.00 (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other (a) 0.00 0.00 Than Political Committees 0.00 0.00 (b) Political Party Committees..... Other Political Committees (c) 0.00 0.00 (such as PACs) (d) TOTAL CONTRIBUTION REFUNDS 0.00 0.00 (add Lines 20(a), (b), and (c))..... 0.00 0.00 21. OTHER DISBURSEMENTS 22. TOTAL DISBURSEMENTS 0.00 72700.56 (add Lines 17, 18, 19(c), 20(d), and 21)

DETAILED SUMMARY PAGE

III. CASH SUMMARY

23.	CASH ON HAND AT BEGINNING OF REPORTING PERIOD		7		7	_	0.00
24	TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)		7		7	_	0.00
25.	SUBTOTAL (add Line 23 and Line 24)		7		,	-	0.00
26.	TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)		7		7	-	0.00
27.	CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)		7		7		0.00

Image# 201507089000065212

					PAGE 5 OF 16			
SCHEDULE C (FEC Form 3) LOANS				Use separate schedule(s) for each category of the Detailed Summary Page				
AME OF COMMITTEE (In Full) STOCKER IN CONGRESS				Transa	ction ID : SC/10.4117			
LOAN SOURCE Full Name (Last, I Mrs. Barbara H Stocker	First, Mid	dle Initial)		[PERSONAL FUNDS]	Election: 2014 Primary X General			
Mailing Address 2518 Meredith Dr					Other (specify)			
City		State	ZIP Cod	e				
DeSoto		MO	63020					
Original Amount of Loan		Cumulative I	Payment To I	Date Bal	ance Outstanding at Close of This Perio			
5000	0.00			0.00	5000.00			
TERMS Date Incurred			Date Due	Interest Rat	e Secured:			
M08 ^M / D20 ^D / Y Ž013	Y	/ M / D	D / Y12/	31/2014 ^Y 0.0	0 % (apr) Yes No			
List All Endorsers or Guarantors ((if any) to	Loan Sourc	ce					
1. Full Name (Last, First, Middle Ir	nitial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	y			
2. Full Name (Last, First, Middle Ini	itial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	y			
3. Full Name (Last, First, Middle Ini	itial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	-y			
4. Full Name (Last, First, Middle Ini	itial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:				
SUBTOTALS This Period This Page (o					5000.00			

		r	PAGE 6 OF 16	
CHEDULE C (FEC Form 3) OANS		Use separate schedule(s) for each category of the Detailed Summary Page		
AME OF COMMITTEE (In Full)		Transacti	ion ID : SC/10.4119	
LOAN SOURCE Full Name (Last, F Mrs. Barbara H Stocker	irst, Middle Initial)	[PERSONAL FUNDS]	Election: 2014 Primary General	
Mailing Address 2518 Meredith Dr			Other (specify)	
City	State ZIP C	Code		
DeSoto	MO 63020	0		
Original Amount of Loan	Cumulative Payment T	To Date Balan	ce Outstanding at Close of This Perio	
150.0	00	0.00	150.00	
TERMS Date Incurred	Date Due	e Interest Rate	Secured:	
$\begin{array}{c} \text{M}_{08} \\ \text{M}_{08} \\$		12/31/2014 ^Y 0.00	(apr)	
List All Endorsers or Guarantors (in	f any) to Loan Source			
1. Full Name (Last, First, Middle Ini	tial)	Name of Employer		
Mailing Address		Occupation		
City	State ZIP Code	Amount Guaranteed Outstanding:	y y	
2. Full Name (Last, First, Middle Initi	al)	Name of Employer		
Mailing Address		Occupation		
City	State ZIP Code	Amount Guaranteed Outstanding:	9 9	
3. Full Name (Last, First, Middle Initi	al)	Name of Employer		
Mailing Address		Occupation		
City	State ZIP Code	Amount Guaranteed Outstanding:	y	
4. Full Name (Last, First, Middle Initiation	al)	Name of Employer		
Mailing Address		Occupation		
City	State ZIP Code	Amount Guaranteed Outstanding:	9	
UBTOTALS This Period This Page (op OTALS This Period (last page in this I	otional)	Outstanding:	7 7 150.00 7 7 7	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

CHEDULE C (FEC Form 3) OANS		Use separate schedule(s) for each category of the Detailed Summary Page	R:
ME OF COMMITTEE (In Full)		Transaction ID : SC/10.4120	
LOAN SOURCE Full Name (Last, F Mrs. Barbara H Stocker	irst, Middle Initial)	[PERSONAL FUNDS] Election: 2014 Primary Ceneral	
Mailing Address 2518 Meredith Dr		Other (specify)	
City	State ZIP (Code	
DeSoto	MO 6302	20	
Original Amount of Loan	Cumulative Payment		
5000.	00	0.00 5000.0	J
TERMS Date Incurred M 09 ^M / D 17 ^D / Y 2013	M M D D /	^v 21/31/2014 ^v 0.00 % (apr)	X
List All Endorsers or Guarantors (i	f any) to Loan Source	Yes	No
1. Full Name (Last, First, Middle In	itial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Init	ial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Init	ial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Init	ial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	
UBTOTALS This Period This Page (o OTALS This Period (last page in this			5

				ГТ	PAGE 8 OF 16			
SCHEDULE C (FEC Form 3) LOANS				Use separate schedule(s) for each category of the Detailed Summary Page				
AME OF COMMITTEE (In Full) STOCKER IN CONGRESS				Transaction ID : SC/10	ı.4181			
LOAN SOURCE Full Name (Last, Mrs. Barbara H Stocker	First, Mido	lle Initial)		[PERSONAL FUNDS] Election: 2 Primary General	014			
Mailing Address 2518 Meredith Dr					pecify) 🔻			
City	:	State	ZIP Co	le				
DeSoto		MO	63020					
Original Amount of Loan		Cumulative	Payment To	Date Balance Outstandi	ng at Close of This Perio			
6000).00		9 9	0.00	6000.00			
TERMS Date Incurred			Date Due	Interest Rate	Secured:			
M10 ^M / D29 ^D / Y Ž013	Y	M / D	D / Y12	31/2014 [×] 0.00 % (а	pr)YesNo			
List All Endorsers or Guarantors	(if any) to	Loan Sour	се					
1. Full Name (Last, First, Middle Ir	nitial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:				
2. Full Name (Last, First, Middle Ini	itial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:				
3. Full Name (Last, First, Middle Ini	itial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:				
4. Full Name (Last, First, Middle Ini	itial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:				
SUBTOTALS This Period This Page (c					6000.00			

- -					PAGE 9 OF 16			
SCHEDULE C (FEC Form 3) LOANS				Use separate schedule(s) for each category of the Detailed Summary Page				
AME OF COMMITTEE (In Full) STOCKER IN CONGRESS				Transa	ction ID : SC/10.4182			
LOAN SOURCE Full Name (Last, Mrs. Barbara H Stocker	First, Mic	ddle Initial)		[PERSONAL FUNDS]	Election: 2014 Primary Ceneral			
Mailing Address 2518 Meredith Dr					Other (specify) ▼			
City		State	ZIP Cod	e				
DeSoto		МО	63020					
Original Amount of Loan		Cumulative F	Payment To [Date Bala	ance Outstanding at Close of This Perio			
6000	0.00			0.00	6000.00			
TERMS Date Incurred			Date Due	Interest Rate	e Secured:			
M 11 / D 27 / Y Ž013	Y	M M / D	D / Y12/	31/2014 ^Y 0.00	0 % (apr) □Yes ⊠No			
List All Endorsers or Guarantors	(if any) t	o Loan Sourc	e					
1. Full Name (Last, First, Middle I	nitial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:				
2. Full Name (Last, First, Middle In	nitial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	y			
3. Full Name (Last, First, Middle In	nitial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	y			
4. Full Name (Last, First, Middle In	nitial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	9 1 9 1 1 1 1			
SUBTOTALS This Period This Page (Ľ	6000.00			

CHEDULE C (FEC Form 3) OANS		Use separate scheduled for each category of th Detailed Summary Page	(check only one) X 13a
AME OF COMMITTEE (In Full)		Transact	tion ID : SC/10.4204
LOAN SOURCE Full Name (Last, Finder Structure) Mrs. Barbara H Stocker	rst, Middle Initial)	[PERSONAL FUNDS]	Election: 2014 Primary General
Mailing Address 2518 Meredith Dr			Other (specify)
City DeSoto	State ZIP C MO 63020		
Original Amount of Loan 3000.0	Cumulative Payment T	o Date Balar	nce Outstanding at Close of This Perio 3000.00
TERMS Date Incurred M 01 / 30 / 2014		e Interest Rate 12/31/2014 0.00	Secured:
List All Endorsers or Guarantors (if 1. Full Name (Last, First, Middle Ini-	• •	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	y
2. Full Name (Last, First, Middle Initi Mailing Address	al)	Name of Employer Occupation	
City S	State ZIP Code	Amount Guaranteed Outstanding:	л
3. Full Name (Last, First, Middle Initi	al)	Name of Employer	
Mailing Address	State ZIP Code	Occupation Amount Guaranteed Outstanding:	y
4. Full Name (Last, First, Middle Initi	al)	Name of Employer	
Mailing Address		Occupation	
City S	State ZIP Code	Amount Guaranteed Outstanding:	9 1 9 1 9 1
UBTOTALS This Period This Page (op OTALS This Period (last page in this I	· · · · · · · · · · · · · · · · · · ·		3000.00

		Г		PAGE 11 OF 16			
SCHEDULE C (FEC Form 3) LOANS			Use separate schedule(s) for each category of the Detailed Summary Page				
AME OF COMMITTEE (In Full) STOCKER IN CONGRESS			Transac	tion ID : SC/10.4205			
LOAN SOURCE Full Name (Last, F Mrs. Barbara H Stocker	First, Middle Initial)		[PERSONAL FUNDS]	Election: 2014 Primary X General			
Mailing Address 2518 Meredith Dr				Other (specify)			
City	State	ZIP Code		I			
DeSoto	MO	63020					
Original Amount of Loan	Cumulative Pa	ayment To Da	te Bala	nce Outstanding at Close of This Perio			
10000.	.00		0.00	10000.00			
TERMS Date Incurred		Date Due	Interest Rate	e Secured:			
M03 ^M / D04 ^D / Y Ž01Å	Y M M / D	D / Y12/31	0.00 0.00	₩ (apr)			
List All Endorsers or Guarantors (i	if any) to Loan Source	e					
1. Full Name (Last, First, Middle In	itial)	N	ame of Employer				
Mailing Address		0	ccupation				
City	State ZIP Code	G	mount uaranteed utstanding:	y			
2. Full Name (Last, First, Middle Init	tial)	N	ame of Employer				
Mailing Address		0	ccupation				
City	State ZIP Code	G	mount uaranteed utstanding:	y y			
3. Full Name (Last, First, Middle Init	tial)	N	ame of Employer				
Mailing Address		0	ccupation				
City	State ZIP Code	G	mount uaranteed utstanding:	y			
4. Full Name (Last, First, Middle Init	tial)	N	ame of Employer				
Mailing Address		0	ccupation				
City	State ZIP Code	G	mount uaranteed utstanding:	9 1 9 1 9 1			
SUBTOTALS This Period This Page (op TOTALS This Period (last page in this				10000.00 7 7			

SCHEDULE C (FEC Form 3) OANS		Use separate schedule(for each category of the Detailed Summary Page	e^{-10R} (check only one) X 13a
ME OF COMMITTEE (In Full) TOCKER IN CONGRESS		Transact	ion ID:SC/10.4294
LOAN SOURCE Full Name (Last, F Mrs. Barbara H Stocker	First, Middle Initial)	[PERSONAL FUNDS]	Election: 2014 Primary General
Mailing Address 2518 Meredith Dr			Other (specify)
City	State ZIP C	Code	
DeSoto	MO 6302	0	
Original Amount of Loan	Cumulative Payment	To Date Balan	ice Outstanding at Close of This Perio
5000	.00	0.00	5000.00
TERMS Date Incurred	Date Du	e Interest Rate	Secured:
M04 ^M / D25 ^D / Y Ž014		(12/31/2014 ^Y 0.00	% (apr) □Yes ⊠No
List All Endorsers or Guarantors (if any) to Loan Source		
1. Full Name (Last, First, Middle In	itial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	y y
2. Full Name (Last, First, Middle Init	tial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	y
3. Full Name (Last, First, Middle Ini	tial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	y 1 1 y 1 1 x 1
4. Full Name (Last, First, Middle Ini	tial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	9 1 9 1 8 1
UBTOTALS This Period This Page (o	· · ·	<u> </u>	5000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

			PAGE 13 OF 16
CHEDULE C (FEC Form 3) OANS		Use separate schedule for each category of th Detailed Summary Pag	(S) FOR LINE NUMBER:
AME OF COMMITTEE (In Full) STOCKER IN CONGRESS		Transac	tion ID : SC/10.4295
LOAN SOURCE Full Name (Last, First, Mic	ddle Initial)	[PERSONAL FUNDS]	Election: 2014
Mrs. Barbara H Stocker			Primary
Mailing Address 2518 Meredith Dr			X General Other (specify) ▼
City	State ZIP Co	de	
DeSoto	MO 63020		
Original Amount of Loan	Cumulative Payment To	Date Bala	nce Outstanding at Close of This Period
8000.00		0.00	8000.00
TERMS Date Incurred	Date Due	Interest Rate	Secured:
M05 ^M / D28 ^D / Y Ž014 Y		2/31/2014 [¥] 0.00	
List All Endorsers or Guarantors (if any) t	o Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	y 1 1 y 1 1 x 1
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	9 9 9 9
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	g - 1 - g - 1 - m - 1
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	9 1 9 1 1 9 1
SUBTOTALS This Period This Page (optional).		H	8000.00

CHEDULE C (FEC Form S DANS	3)	Use separate schedule(s) for each category of the Detailed Summary Page
ME OF COMMITTEE (In Full)		Transaction ID : SC/10.4296
LOAN SOURCE Full Name (Last, F Mrs. Barbara H Stocker	irst, Middle Initial)	[PERSONAL FUNDS] Election: 2014 Primary General
Mailing Address 2518 Meredith Dr		Other (specify)
City DeSoto		P Code
Original Amount of Loan	Cumulative Paymer	
2500.		
TERMS Date Incurred MO6 ^M / DO0 / Y 2014	Date	Due Interest Rate Secured: ^Y 12/31/2014 ^Y 0.00 % (apr) Yes
List All Endorsers or Guarantors (i 1. Full Name (Last, First, Middle In	• ·	Name of Employer
Mailing Address	·	Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Init	tial)	Name of Employer
Mailing Address		Occupation Amount
City	State ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Init	ial)	Name of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Init	ial)	Name of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:
UBTOTALS This Period This Page (o OTALS This Period (last page in this		

			PAGE 15 OF 16
CHEDULE C (FEC Form 3) OANS		Use separate schedule for each category of th Detailed Summary Pag	P(S) FOR LINE NUMBER:
IAME OF COMMITTEE (In Full) STOCKER IN CONGRESS		Transac	tion ID : SC/10.4414
LOAN SOURCE Full Name (Last, First, M Mrs. Barbara H Stocker	iddle Initial)	[PERSONAL FUNDS]	Election: 2014 Primary X General
Mailing Address 2518 Meredith Dr			Other (specify)
City	State ZIP Co MO 63020		
DeSoto	MO 63020		
Original Amount of Loan 150000.00	Cumulative Payment To	Date Bala	nce Outstanding at Close of This Period 150000.00
TERMS Date Incurred	Date Due	Interest Rate	e Secured:
$\frac{1}{11} \frac{1}{11} \frac$		2/31/2014 0.00	
List All Endorsers or Guarantors (if any)	to Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	y 1 y 1 x 1
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	g
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	9 9
SUBTOTALS This Period This Page (optional)			7 7 7

		PAGE 16 OF 16
CHEDULE C (FEC Form 3) OANS		Use separate schedule(s) for each category of the Detailed Summary Page
NAME OF COMMITTEE (In Full) STOCKER IN CONGRESS		Transaction ID : SC/10.4502
LOAN SOURCE Full Name (Last, First, Mi Mrs. Barbara H Stocker	iddle Initial)	[PERSONAL FUNDS] Election: 2014 Primary General
Mailing Address 2518 Meredith Dr		Other (specify) ▼
City	State Z	IP Code
DeSoto	MO	3020
Original Amount of Loan	Cumulative Paym	ent To Date Balance Outstanding at Close of This Period
10050.00		0.00 10050.00
TERMS Date Incurred	Date	e Due Interest Rate Secured:
M02 ^M / D09 ^D / Y Ž01Š Y	M M / D D	/ Y y y y y y y y y y y y y y y y y y y
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)		

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.