

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
ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

ADDRESS (number and street) 5850 ELIZABETH AVE
 Check if different than previously reported. (ACC)
ST. LOUIS MO 63110

2. **FEC IDENTIFICATION NUMBER** C00041939
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

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

5. Covering Period 07 01 2006 through 09 30 2006

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 EGAN
Signature of Treasurer Electronically Filed by ROBERT J EGAN Date 10 12 2006

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	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>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		153768.57
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	153508.47									
(c) Total Receipts (from Line 19)	32220.84	99119.17								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	185729.31	252887.74								
7. Total Disbursements (from Line 31)	53376.59	120535.02								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	132352.72	132352.72								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	32118.00	98817.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	32118.00	98817.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	32118.00	98817.00
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.)	102.84	302.17
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))	32220.84	99119.17
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	32220.84	99119.17

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	1506.59	3405.02
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	1506.59	3405.02
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
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	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	51870.00	117130.00
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))..	53376.59	120535.02
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	53376.59	120535.02

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)	32118.00	98817.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	32118.00	98817.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1506.59	3405.02
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1506.59	3405.02

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

Full Name (Last, First, Middle Initial) A. ROLLING HILLS FARM		Transaction ID: SB21B.6977 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 8 / 2 0 0 6
Mailing Address 386 TAIGALN		Amount of Each Disbursement this Period 300.00
City CAPE GIRARDEAU State MO Zip Code 63701	Category/ Type	
Purpose of Disbursement PONY RIDES - CAPE PAVILION OPENING		
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) ▼

Full Name (Last, First, Middle Initial) B. WILLILAM WALZ		Transaction ID: SB21B.7048 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 6
Mailing Address 2611 GERHARDT		Amount of Each Disbursement this Period 460.97
City CAPE GIRARDEAU State MO Zip Code 63703	Category/ Type	
Purpose of Disbursement REIMBURSED MEETING EXPENSE		
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) ▼

Full Name (Last, First, Middle Initial) C. WHITHERS BROADCASTING		Transaction ID: SB21B.7025 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address PO BOX 558		Amount of Each Disbursement this Period 700.00
City CAPE GIRARDEAU State MO Zip Code 63702	Category/ Type	
Purpose of Disbursement MEDIA COMMUNICATION		
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) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	1460.97
TOTAL This Period (last page this line number only) ▶	1460.97

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

A. Full Name (Last, First, Middle Initial) 11TH WARD REGULAR DEMOCRATIC ORGANIZATION		Transaction ID: SB29.6916 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 7 / 2 0 0 6
Mailing Address 6145 COLORADO AVE		Amount of Each Disbursement this Period 100.00
City ST LOUIS State MO Zip Code 63111	Purpose of Disbursement DONATION	
Candidate Name		Category/ Type
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) 13TH DEMOCRATIC SENATORIAL COMMITTEE		Transaction ID: SB29.7030 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 6
Mailing Address 906 OLIVE ST STE 900		Amount of Each Disbursement this Period 5000.00
City ST LOUIS State MO Zip Code 63101	Purpose of Disbursement DONATION	
Candidate Name		Category/ Type
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) 9TH WARD DEMOCRATIC ORGANIZATION		Transaction ID: SB29.6907 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 7 / 2 0 0 6
Mailing Address 2800 MCNAIR		Amount of Each Disbursement this Period 100.00
City ST LOUIS State MO Zip Code 63118	Purpose of Disbursement DONATION	
Candidate Name		Category/ Type
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) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

5200.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

Full Name (Last, First, Middle Initial) A. CHRISMER FOR GOOD GOVERNMENT		Transaction ID: SB29.7002
Mailing Address 25 BARKWOOD TRLS		Date of Disbursement MM / DD / YYYY 09 / 01 / 2006
City ST PETERS	State MO	Zip Code 63376
Purpose of Disbursement DONATION	Amount of Each Disbursement this Period 200.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. CITIZENS FOR BARBARA FRASER		Transaction ID: SB29.6949
Mailing Address PO BOX 50363		Date of Disbursement MM / DD / YYYY 08 / 24 / 2006
City ST LOUIS	State MO	Zip Code 63105
Purpose of Disbursement DONATION	Amount of Each Disbursement this Period 650.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. CITIZENS FOR JENEE LOWE		Transaction ID: SB29.7018
Mailing Address PO BOX 8732		Date of Disbursement MM / DD / YYYY 09 / 01 / 2006
City KANSAS CITY	State MO	Zip Code 64114
Purpose of Disbursement DONATION	Amount of Each Disbursement this Period 325.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	1175.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

Full Name (Last, First, Middle Initial) A. CITIZENS FOR JIM RITTER		Transaction ID: SB29.6966 Date of Disbursement 08 / 24 / 2006
Mailing Address PO BOX 10075		Amount of Each Disbursement this Period 325.00
City COLOMBIA	State MO	
Zip Code 65205		
Purpose of Disbursement DONATION		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. CITIZENS FOR JOHN BURNETT		Transaction ID: SB29.6958 Date of Disbursement 08 / 24 / 2006
Mailing Address 3418 GLADSTONE BLVD		Amount of Each Disbursement this Period 325.00
City KANSAS CITY	State MO	
Zip Code 64123		
Purpose of Disbursement DONATION		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. CITIZENS FOR KATE MEINERS		Transaction ID: SB29.6923 Date of Disbursement 07 / 17 / 2006
Mailing Address 11712 JEFFERSON		Amount of Each Disbursement this Period 325.00
City KANSAS CITY	State MO	
Zip Code 64114		
Purpose of Disbursement DONATION		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

Full Name (Last, First, Middle Initial) A. CITIZENS FOR KATE MEINERS		Transaction ID: SB29.6964 Date of Disbursement
Mailing Address 11712 JEFFERSON		<input type="text" value="08"/> / <input type="text" value="24"/> / <input type="text" value="2006"/>
City KANSAS CITY	State MO	Zip Code 64114
Purpose of Disbursement DONATION	<input type="text" value="325.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. CITIZENS FOR PATRICIA YAEGER		Transaction ID: SB29.7027 Date of Disbursement
Mailing Address 11101 FLORI		<input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2006"/>
City ST LOUIS	State MO	Zip Code 63123
Purpose of Disbursement DONATION	<input type="text" value="325.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. CITIZENS FOR SAM PAGE		Transaction ID: SB29.6975 Date of Disbursement
Mailing Address 17 WINDSOR TERR LN		<input type="text" value="08"/> / <input type="text" value="24"/> / <input type="text" value="2006"/>
City CREVE COEUR	State MO	Zip Code 63141
Purpose of Disbursement DONATION	<input type="text" value="325.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="975.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

<p>A. CITIZENS FOR SARA LAMPE</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 702 EAST STANFORD</p> <p>City SPRINGFIELD State MO Zip Code 65807</p> <p>Purpose of Disbursement DONATION</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>Transaction ID: SB29.7029</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="21"/> / <input type="text" value="20"/> <input type="text" value="06"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="325.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>B. CITIZENS FOR SHIVELY</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 4198 SHELBY 367</p> <p>City SHELBYVILLE State MO Zip Code 63469</p> <p>Purpose of Disbursement DONATION</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>Transaction ID: SB29.6972</p> <p>Date of Disbursement</p> <p><input type="text" value="08"/> <input type="text" value="24"/> / <input type="text" value="20"/> <input type="text" value="06"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="325.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>C. CITIZENS FOR TIM MEADOWS</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 1027 CANTEBURY CIR</p> <p>City IMPERIAL State MO Zip Code 63052</p> <p>Purpose of Disbursement DONATION</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>Transaction ID: SB29.6985</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="06"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="325.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="975.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

Full Name (Last, First, Middle Initial) A. CITIZENS TO ELECT BARNITZ		Transaction ID: SB29.6973 Date of Disbursement 08 / 24 / 2006
Mailing Address PO BOX 104		Amount of Each Disbursement this Period 650.00
City LAKE SPRING	State MO Zip Code 65532	
Purpose of Disbursement DONATION		
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:		

Full Name (Last, First, Middle Initial) B. CITIZENS TO ELECT CURT DOUGHERTY		Transaction ID: SB29.7036 Date of Disbursement 09 / 21 / 2006
Mailing Address 16003 E COGAN LN		Amount of Each Disbursement this Period 325.00
City INDEPENDENCE	State MO Zip Code 64050	
Purpose of Disbursement DONATION		
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:		

Full Name (Last, First, Middle Initial) C. CITIZENS TO ELECT DEVEYDT		Transaction ID: SB29.6969 Date of Disbursement 08 / 24 / 2006
Mailing Address PO BOX 952		Amount of Each Disbursement this Period 325.00
City SULLIVAN	State MO Zip Code 63080	
Purpose of Disbursement DONATION		
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:		

SUBTOTAL of Disbursements This Page (optional) ▶	1300.00
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 type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

Full Name (Last, First, Middle Initial) A. CITIZENS TO ELECT DOUGLAS BROSTE		Transaction ID: SB29.6913 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 7 / 2 0 0 6
Mailing Address #6 BAYWOOD DR		Amount of Each Disbursement this Period 325.00
City ST PETERS State MO Zip Code 63376	Purpose of Disbursement DONATION Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) B. CITIZENS TO ELECT MIKE MORRIS		Transaction ID: SB29.6932 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 6
Mailing Address PO BOX 1191		Amount of Each Disbursement this Period 325.00
City O FALLON State MO Zip Code 63366	Purpose of Disbursement DONATION Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) C. COMMITTEE FOR EL-AMIN		Transaction ID: SB29.7016 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 6
Mailing Address 5058 DURANT AVE		Amount of Each Disbursement this Period 200.00
City ST LOUIS State MO Zip Code 63115	Purpose of Disbursement DONATION Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	850.00
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 type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

Full Name (Last, First, Middle Initial) A. COMMITTEE TO ELECT BILL WATERHOUSE		Transaction ID: SB29.7022
Mailing Address 1221 LOUISVILLE AVE		Date of Disbursement MM / DD / YYYY 09 / 01 / 2006
City ST LOUIS	State MO	Zip Code 63139
Purpose of Disbursement DONATION	Amount of Each Disbursement this Period 325.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. COMMITTEE TO ELECT CHERYL HIBBELER		Transaction ID: SB29.7006
Mailing Address 819 LAURA LEE DR		Date of Disbursement MM / DD / YYYY 09 / 01 / 2006
City O'FALLON	State MO	Zip Code 63366
Purpose of Disbursement DONATION	Amount of Each Disbursement this Period 300.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. COMMITTEE TO ELECT DICKHANER		Transaction ID: SB29.6905
Mailing Address 503 MAIN ST		Date of Disbursement MM / DD / YYYY 07 / 17 / 2006
City HILLSBORO	State MO	Zip Code 63050
Purpose of Disbursement DONATION	Amount of Each Disbursement this Period 300.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	925.00
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 type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

Full Name (Last, First, Middle Initial)

A. COMMITTEE TO ELECT FORREST WEGGE

Mailing Address PO BOX 703

City HILLSBORO State MO Zip Code 63050

Purpose of Disbursement
DONATION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6911

Date of Disbursement

07 / 17 / 2006

Amount of Each Disbursement this Period

650.00

Full Name (Last, First, Middle Initial)

B. COMMITTEE TO ELECT GENE TYLER

Mailing Address 3438 HWY UU

City UNION State MO Zip Code 63084

Purpose of Disbursement
DONATION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6946

Date of Disbursement

08 / 24 / 2006

Amount of Each Disbursement this Period

650.00

Full Name (Last, First, Middle Initial)

C. COMMITTEE TO ELECT HENKE

Mailing Address 514 BRIDGEWAY DR

City TROY State MO Zip Code 63379

Purpose of Disbursement
DONATION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6989

Date of Disbursement

09 / 01 / 2006

Amount of Each Disbursement this Period

650.00

SUBTOTAL of Disbursements This Page (optional) ▶

1950.00

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

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

Full Name (Last, First, Middle Initial) A. COMMITTEE TO ELECT JAMIE SCHOOLCRAFT		Transaction ID: SB29.7014 Date of Disbursement MM / DD / YYYY 09 / 01 / 2006
Mailing Address 949 MEGAN LN		Amount of Each Disbursement this Period 325.00
City WILLARD State MO Zip Code 65781	Category/ Type	
Purpose of Disbursement DONATION		
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) ▼	

Full Name (Last, First, Middle Initial) B. COMMITTEE TO ELECT JARED WELCH		Transaction ID: SB29.6994 Date of Disbursement MM / DD / YYYY 09 / 01 / 2006
Mailing Address 13330 SYCAMORE DR		Amount of Each Disbursement this Period 100.00
City PLATTE CITY State MO Zip Code 64079	Category/ Type	
Purpose of Disbursement DONATION		
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) ▼	

Full Name (Last, First, Middle Initial) C. COMMITTEE TO ELECT JASON GRILL		Transaction ID: SB29.7000 Date of Disbursement MM / DD / YYYY 09 / 01 / 2006
Mailing Address 5555 NW BARRY RD		Amount of Each Disbursement this Period 325.00
City KANSAS CITY State MO Zip Code 64154	Category/ Type	
Purpose of Disbursement DONATION		
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) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	750.00
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 type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

Full Name (Last, First, Middle Initial)

A. COMMITTEE TO ELECT JEFF ROORDA

Mailing Address 6797 HAVEN HILL

City BARNHART State MO Zip Code 63010

Purpose of Disbursement
DONATION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6996

Date of Disbursement

09 / 01 / 2006

Amount of Each Disbursement this Period

325.00

Full Name (Last, First, Middle Initial)

B. COMMITTEE TO ELECT JOHN HEISSERER

Mailing Address 1198 WOLF LN

City CAPE GIRARDEAU State MO Zip Code 63701

Purpose of Disbursement
DONATION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.7008

Date of Disbursement

09 / 01 / 2006

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

C. COMMITTEE TO ELECT MICHAEL FRAME

Mailing Address 416 MAPLE HOLLOW TRAIL

City EUREKA State MO Zip Code 63025

Purpose of Disbursement
DONATION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6950

Date of Disbursement

08 / 24 / 2006

Amount of Each Disbursement this Period

325.00

SUBTOTAL of Disbursements This Page (optional) ▶

950.00

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

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

Full Name (Last, First, Middle Initial)

A. COMMITTEE TO ELECT MICHAEL WINDER

Mailing Address PO BOX 128

City MARQUAND State MO Zip Code 63655

Purpose of Disbursement
DONATION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6959

Date of Disbursement

08 / 24 / 2006

Amount of Each Disbursement this Period

325.00

Full Name (Last, First, Middle Initial)

B. COMMITTEE TO ELECT NANCY HAGAN

Mailing Address 2260 E BRIAR

City SPRINGFIELD State MO Zip Code 65804

Purpose of Disbursement
DONATION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6924

Date of Disbursement

07 / 17 / 2006

Amount of Each Disbursement this Period

325.00

Full Name (Last, First, Middle Initial)

C. COMMITTEE TO ELECT STEPHEN D BOUCHARD

Mailing Address PO BOX 229

City CRYSTAL CITY State MO Zip Code 63019

Purpose of Disbursement
DONATION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6928

Date of Disbursement

07 / 17 / 2006

Amount of Each Disbursement this Period

200.00

SUBTOTAL of Disbursements This Page (optional) ►

850.00

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

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

Full Name (Last, First, Middle Initial)

A. COMMITTEE TO ELECT STEVE LEDNICK

Mailing Address PO BOX 24

City HILLSBORO State MO Zip Code 63050

Purpose of Disbursement
DONATION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6926

Date of Disbursement

07 / 17 / 2006

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

B. COMMITTEE TO ELECT TOM GREEN

Mailing Address 2340 EAGLE FOREST DR

City ST CHARLES State MO Zip Code 63303

Purpose of Disbursement
DONATION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.7011

Date of Disbursement

09 / 01 / 2006

Amount of Each Disbursement this Period

325.00

Full Name (Last, First, Middle Initial)

C. COMMITTEE TO ELECT TRENT SKAGGS

Mailing Address 2401 FAYETTE

City NORTH KANSAS CITY State MO Zip Code 64116

Purpose of Disbursement
DONATION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6930

Date of Disbursement

07 / 31 / 2006

Amount of Each Disbursement this Period

125.00

SUBTOTAL of Disbursements This Page (optional) ►

650.00

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

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

Full Name (Last, First, Middle Initial) A. COMMITTEE TO RE-ELECT SUE SCHOEMEHL		Transaction ID: SB29.6971 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 4 / 2 0 0 6
Mailing Address 2629 BLUFF RIDGE DR		Amount of Each Disbursement this Period 325.00
City ST LOUIS State MO Zip Code 63129	Category/ Type	
Purpose of Disbursement DONATION		
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) ▼	

Full Name (Last, First, Middle Initial) B. CONCORD TOWNSHIP DEMOCRATIC CLUB		Transaction ID: SB29.6961 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 4 / 2 0 0 6
Mailing Address 10919 THREE CT DR		Amount of Each Disbursement this Period 100.00
City ST LOUIS State MO Zip Code 63123	Category/ Type	
Purpose of Disbursement DONATION		
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) ▼	

Full Name (Last, First, Middle Initial) C. CRAWFORD COUNTY DEMOCRATIC CLUB		Transaction ID: SB29.6960 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 4 / 2 0 0 6
Mailing Address 576 COFFEYTON RD		Amount of Each Disbursement this Period 100.00
City BOURBON State MO Zip Code 65441	Category/ Type	
Purpose of Disbursement DONATION		
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) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	525.00
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 type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

Full Name (Last, First, Middle Initial) A. DANIELS FOR A BETTER MISSOURI		Transaction ID: SB29.7004 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 6
Mailing Address 202 TIMBERLANE		Amount of Each Disbursement this Period 325.00
City CARLS JUNCTION State MO Zip Code 64834	Purpose of Disbursement DONATION	
Candidate Name		Category/ Type
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) ▼	

Full Name (Last, First, Middle Initial) B. DOOLEY FOR ST LOUIS COUNTY EXECUTIVE		Transaction ID: SB29.7031 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 6
Mailing Address 324 SHADY MEADOWS		Amount of Each Disbursement this Period 1275.00
City BALLWIN State MO Zip Code 63011	Purpose of Disbursement DONATION	
Candidate Name		Category/ Type
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) ▼	

Full Name (Last, First, Middle Initial) C. ELECT KOESTER FOR FAIRNESS		Transaction ID: SB29.6919 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 7 / 2 0 0 6
Mailing Address 833 WASHINGTON		Amount of Each Disbursement this Period 325.00
City ST CHARLES State MO Zip Code 63301	Purpose of Disbursement DONATION	
Candidate Name		Category/ Type
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) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1925.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

A. Full Name (Last, First, Middle Initial)
FRANKLIN COUNTY DEMOCRATS

Mailing Address PO BOX 274

City UNION State MO Zip Code 63084

Purpose of Disbursement
DONATION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6938

Date of Disbursement

07 / 31 / 2006

Amount of Each Disbursement this Period

200.00

B. Full Name (Last, First, Middle Initial)
FRIENDS FOR FALLERT

Mailing Address 17079 STATE RT B

City STE GENEVIEVE State MO Zip Code 63670

Purpose of Disbursement
DONATION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6957

Date of Disbursement

08 / 24 / 2006

Amount of Each Disbursement this Period

325.00

C. Full Name (Last, First, Middle Initial)
FRIENDS FOR GENEVIEVE FRANK

Mailing Address 418 SUMMER TOP LN

City FENTON State MO Zip Code 63026

Purpose of Disbursement
DONATION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6987

Date of Disbursement

09 / 01 / 2006

Amount of Each Disbursement this Period

325.00

SUBTOTAL of Disbursements This Page (optional) ▶

850.00

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

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

Full Name (Last, First, Middle Initial) A. FRIENDS FOR KOMO		Transaction ID: SB29.6951 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 4 / 2 0 0 6
Mailing Address 6026 CLEARVIEW		Amount of Each Disbursement this Period 325.00
City HOUSE SPRINGS State MO Zip Code 63051	Category/ Type	
Purpose of Disbursement DONATION		
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) ▼	

Full Name (Last, First, Middle Initial) B. FRIENDS FOR TIM SCHULTE		Transaction ID: SB29.7041 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 6
Mailing Address 916 WOLFRUM GLEN CT		Amount of Each Disbursement this Period 325.00
City ST CHARLES State MO Zip Code 63304	Category/ Type	
Purpose of Disbursement DONATION		
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) ▼	

Full Name (Last, First, Middle Initial) C. FRIENDS OF GINA WALSH		Transaction ID: SB29.6968 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 4 / 2 0 0 6
Mailing Address 1246 BAKEWELL		Amount of Each Disbursement this Period 325.00
City ST LOUIS State MO Zip Code 63137	Category/ Type	
Purpose of Disbursement DONATION		
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) ▼	

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 24 / 34

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

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

Full Name (Last, First, Middle Initial) A. FRIENDS OF JANE BOGETTO		Transaction ID: SB29.7040 Date of Disbursement
Mailing Address 417 GILL AVE		<input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2006"/>
City KIRKWOOD	State MO	Zip Code 63122
Purpose of Disbursement DONATION	<input type="text" value="325.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. FRIENDS OF JOE MCCULLOCH		Transaction ID: SB29.7007 Date of Disbursement
Mailing Address 2013 WILLOW TRL		<input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2006"/>
City ST CHARLES	State MO	Zip Code 63303
Purpose of Disbursement DONATION	<input type="text" value="300.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. FRIENDS OF KENNY BURKE		Transaction ID: SB29.6998 Date of Disbursement
Mailing Address PO BOX 705		<input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2006"/>
City VAN BUREN	State MO	Zip Code 63965
Purpose of Disbursement DONATION	<input type="text" value="325.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="950.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

Full Name (Last, First, Middle Initial) A. FRIENDS OF RYAN MCKENNA		Transaction ID: SB29.6948 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 4 / 2 0 0 6
Mailing Address 6969 DIPPEL LN		Amount of Each Disbursement this Period 650.00
City BARNHART State MO Zip Code 63012	Purpose of Disbursement DONATION Candidate Name Category/ Type	
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) ▼		

Full Name (Last, First, Middle Initial) B. FRIENDS OF SHOEMYER		Transaction ID: SB29.6947 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 4 / 2 0 0 6
Mailing Address 16350 MONROE RD 184		Amount of Each Disbursement this Period 650.00
City CLARENCE State MO Zip Code 63437	Purpose of Disbursement DONATION Candidate Name Category/ Type	
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) ▼		

Full Name (Last, First, Middle Initial) C. FRIENDS OF STEVE HODGES		Transaction ID: SB29.6909 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 7 / 2 0 0 6
Mailing Address PO BOX 188		Amount of Each Disbursement this Period 325.00
City EAST PRAIRIE State MO Zip Code 63845	Purpose of Disbursement DONATION Candidate Name Category/ Type	
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) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	1625.00
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 type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

Full Name (Last, First, Middle Initial) A. FRIENDS OF TONY GEORGE		Transaction ID: SB29.7001 Date of Disbursement
Mailing Address 3594 MONSOLS		<input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2006"/>
City FLORISSANT	State MO	Zip Code 63034
Purpose of Disbursement DONATION	<input type="text" value="325.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. FRIENDS TO ELECT JIM MENSE		Transaction ID: SB29.6940 Date of Disbursement
Mailing Address 1026 WEST STATE RD		<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2006"/>
City UNION	State MO	Zip Code 63084
Purpose of Disbursement DONATION	<input type="text" value="325.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. HARPOOL NEW DIRECTION COMMITTEE		Transaction ID: SB29.6921 Date of Disbursement
Mailing Address 432 WEST SILSBY		<input type="text" value="07"/> / <input type="text" value="17"/> / <input type="text" value="2006"/>
City SPRINGFIELD	State MO	Zip Code 65807
Purpose of Disbursement DONATION	<input type="text" value="650.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1300.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

Full Name (Last, First, Middle Initial)

A. HARPOOL NEW DIRECTION COMMITTEE

Mailing Address 432 WEST SILSBY

City SPRINGFIELD State MO Zip Code 65807

Purpose of Disbursement
DONATION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.7032

Date of Disbursement

09 / 21 / 2006

Amount of Each Disbursement this Period

650.00

Full Name (Last, First, Middle Initial)

B. HARRIS FOR HOUSE

Mailing Address PO BOX 7214

City COLUMBIA State MO Zip Code 65205

Purpose of Disbursement
DONATION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6962

Date of Disbursement

08 / 24 / 2006

Amount of Each Disbursement this Period

325.00

Full Name (Last, First, Middle Initial)

C. JEFFERSON COUNTY DEMOCRATIC CLUB

Mailing Address 313 JEFFERSON AVE

City CRYSTAL CITY State MO Zip Code 63019

Purpose of Disbursement
DONATION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6934

Date of Disbursement

07 / 31 / 2006

Amount of Each Disbursement this Period

400.00

SUBTOTAL of Disbursements This Page (optional) ▶

1375.00

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

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

<p>A. JEFF SMITH FOR SENATE</p> <p>Full Name (Last, First, Middle Initial)</p> <p>JEFF SMITH FOR SENATE</p> <p>Mailing Address PO BOX 39001</p> <p>City ST LOUIS State MO Zip Code 63139</p> <p>Purpose of Disbursement DONATION</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>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: SB29.7020</p> <p>Date of Disbursement</p> <p>09 / 01 / 2006</p> <p>Amount of Each Disbursement this Period</p> <p>500.00</p>
<p>B. KRISTI KENNEY FOR STATE REP</p> <p>Full Name (Last, First, Middle Initial)</p> <p>KRISTI KENNEY FOR STATE REP</p> <p>Mailing Address 221 S SECOND ST</p> <p>City CLINTON State MO Zip Code 64735</p> <p>Purpose of Disbursement DONATION</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>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: SB29.6992</p> <p>Date of Disbursement</p> <p>09 / 01 / 2006</p> <p>Amount of Each Disbursement this Period</p> <p>325.00</p>
<p>C. LAVOLTA FOR STATE REP</p> <p>Full Name (Last, First, Middle Initial)</p> <p>LAVOLTA FOR STATE REP</p> <p>Mailing Address 5101 SHRANK AVE</p> <p>City INDEPENDENCE State MO Zip Code 64055</p> <p>Purpose of Disbursement DONATION</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>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: SB29.7012</p> <p>Date of Disbursement</p> <p>09 / 01 / 2006</p> <p>Amount of Each Disbursement this Period</p> <p>325.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1150.00

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

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

Full Name (Last, First, Middle Initial) A. LIESE FOR STATE REP		Transaction ID: SB29.7028 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 6
Mailing Address 1982 SPRINGTREE DR		Amount of Each Disbursement this Period 325.00
City MARYLAND HEIGHTS State MO Zip Code 63043	Purpose of Disbursement DONATION	
Candidate Name		Category/ Type
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) ▼	

Full Name (Last, First, Middle Initial) B. MARGARET DONNELLY FOR STATE REP		Transaction ID: SB29.7010 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 6
Mailing Address 130 S BEMISTON STE 706		Amount of Each Disbursement this Period 325.00
City CLAYTON State MO Zip Code 63105	Purpose of Disbursement DONATION	
Candidate Name		Category/ Type
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) ▼	

Full Name (Last, First, Middle Initial) C. MISSOURIANS FOR HOWARD WAGNER		Transaction ID: SB29.6984 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 6
Mailing Address 3099 OAKVALE		Amount of Each Disbursement this Period 650.00
City DESOTO State MO Zip Code 63020	Purpose of Disbursement DONATION	
Candidate Name		Category/ Type
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) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1300.00
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 type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

A. Full Name (Last, First, Middle Initial)
MISSOURI DEMOCRATIC PARTY

Mailing Address 208 MADISON ST

City State Zip Code
JEFFERSON CITY MO 65109

Purpose of Disbursement
DONATION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.7042

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
MISSOURI SENATE DEMOCRATIC CAMPAIGN COMMITTEE

Mailing Address PO BOX 203

City State Zip Code
JEFFERSON CITY MO 65102

Purpose of Disbursement
DONATION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6955

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
MONTEE FOR AUDITOR

Mailing Address PO BOX 1485

City State Zip Code
ST JOSEPH MO 64502

Purpose of Disbursement
DONATION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6952

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

Full Name (Last, First, Middle Initial)

A. NORTH COUNTY LABOR LEGISLATIVE CLUB

Mailing Address 7808 WINWARD DRIVE

City ST. LOUIS State MO Zip Code 63121

Purpose of Disbursement
DONATION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6954

Date of Disbursement

08 / 24 / 2006

Amount of Each Disbursement this Period

720.00

Full Name (Last, First, Middle Initial)

B. OAKVILLE TOWNSHIP DEMOCRATIC ORGANIZATION

Mailing Address PO BOX 510271

City ST LOUIS State MO Zip Code 63151

Purpose of Disbursement
DONATION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.7023

Date of Disbursement

09 / 01 / 2006

Amount of Each Disbursement this Period

150.00

Full Name (Last, First, Middle Initial)

C. PEOPLE FOR MICHAEL SPRENG

Mailing Address PO BOX 0972

City FLORISSANT State MO Zip Code 63032

Purpose of Disbursement
DONATION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6990

Date of Disbursement

09 / 01 / 2006

Amount of Each Disbursement this Period

325.00

SUBTOTAL of Disbursements This Page (optional) ▶

1195.00

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

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

Full Name (Last, First, Middle Initial)

A. PROGRESSIVE DEMOCRATS OF LEMAY

Mailing Address 1456 TELEGRAPH RD

City LEMAY State MO Zip Code 63125

Purpose of Disbursement
DONATION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6956

Date of Disbursement

08 / 24 / 2006

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. RICE FOR REPRESENTATIVE

Mailing Address PO BOX 756

City CHILICOTHE State MO Zip Code 64601

Purpose of Disbursement
DONATION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6997

Date of Disbursement

09 / 01 / 2006

Amount of Each Disbursement this Period

325.00

Full Name (Last, First, Middle Initial)

C. ROBINSON FOR REPRESENTATIVE

Mailing Address PO BOX 64

City KENNETT State MO Zip Code 63857

Purpose of Disbursement
DONATION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.7015

Date of Disbursement

09 / 01 / 2006

Amount of Each Disbursement this Period

150.00

SUBTOTAL of Disbursements This Page (optional) ▶

575.00

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

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

Full Name (Last, First, Middle Initial) A. SLAY FOR MAYOR		Transaction ID: SB29.6953 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 4 / 2 0 0 6
Mailing Address 4236 LINDELL BLVD		Amount of Each Disbursement this Period 500.00
City ST. LOUIS State MO Zip Code 63108	Category/ Type	
Purpose of Disbursement DONATION		
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) ▼	

Full Name (Last, First, Middle Initial) B. ST LOUIS CITY CENTRAL DEMOCRATIC COMM		Transaction ID: SB29.7033 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 6
Mailing Address PIO BOX 1233		Amount of Each Disbursement this Period 2500.00
City ST LOUIS State MO Zip Code 63188	Category/ Type	
Purpose of Disbursement DONATION		
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) ▼	

Full Name (Last, First, Middle Initial) C. ST LOUIS CITY LABOR LEGISLATIVE CLUB		Transaction ID: SB29.7035 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 6
Mailing Address 5243 CREIGHTON DR		Amount of Each Disbursement this Period 500.00
City ST LOUIS State MO Zip Code 63123	Category/ Type	
Purpose of Disbursement DONATION		
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) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3500.00
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 type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

Full Name (Last, First, Middle Initial) A. THE 21ST FOR SKIP ELKIN		Transaction ID: SB29.7038 Date of Disbursement 09 / 21 / 2006
Mailing Address PO BOX 291		Amount of Each Disbursement this Period 325.00
City MEXICO	State MO	
Zip Code 65265		
Purpose of Disbursement DONATION		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. TRI-COUNTY LABOR/LEGISLATIVE CLUB		Transaction ID: SB29.6982 Date of Disbursement 09 / 01 / 2006
Mailing Address 20 SUNNYVIEW DR		Amount of Each Disbursement this Period 5000.00
City ST PETERS	State MO	
Zip Code 63376		
Purpose of Disbursement DONATION		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. TRI-COUNTY LABOR/LEGISLATIVE CLUB		Transaction ID: SB29.7043 Date of Disbursement 09 / 21 / 2006
Mailing Address 20 SUNNYVIEW DR		Amount of Each Disbursement this Period 5000.00
City ST PETERS	State MO	
Zip Code 63376		
Purpose of Disbursement DONATION		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

SUBTOTAL of Disbursements This Page (optional) ▶	10325.00
TOTAL This Period (last page this line number only) ▶	51870.00