

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. 12FE4M5
FRIENDS OF TOM STILSON

ADDRESS (number and street) 390 CASH SPRING ROAD
 Check if different than previously reported. (ACC) OZARK MO 65721

2. **FEC IDENTIFICATION NUMBER** C C00521229 CITY STATE ZIP CODE STATE DISTRICT
3. IS THIS REPORT NEW (N) OR AMENDED (A) MO 07

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 Year-End Report (YE)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M / D D / Y Y Y Y in the State of
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y
02 / 27 / 2012 through 06 / 30 / 2012

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 Wanda Martens
Signature of Treasurer Wanda Martens *[Electronically Filed]* Date M M / D D / Y Y Y Y
07 / 26 / 2012

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

FRIENDS OF TOM STILSON

Report Covering the Period: From: M M / D D / Y Y Y Y 02 / 27 / 2012 To: M M / D D / Y Y Y Y 06 / 30 / 2012

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	8802.12	8449.77
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	8802.12	8449.77
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	8820.19	8467.84
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	8820.19	8467.84
8. Cash on Hand at Close of Reporting Period (from Line 27).....	448.04	
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).....	466.11	

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

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

FRIENDS OF TOM STILSON

Report Covering the Period: From: / / To: / /

I. RECEIPTS	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).....	5535.97	5283.62
(ii) Unitemized.....	2810.05	2810.05
(iii) TOTAL of contributions from individuals ▶	8346.02	8093.67
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	456.10	356.10
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	8802.12	8449.77
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	466.11	466.11
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	466.11	466.11
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)..... ▶	9268.23	8915.88

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	8820.19	8467.84
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. 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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	8820.19	8467.84

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	9268.23
25. SUBTOTAL (add Line 23 and Line 24).....	9268.23
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	8820.19
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	448.04

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 33
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
FRIENDS OF TOM STILSON

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

Mailing Address 2453 East Raynell Street

City Springfield State MO Zip Code 65804

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

Name of Employer Walgreens Occupation Manager

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2012

Transaction ID : SA11AI.4117

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Lucas Harrell

Mailing Address 2453 East Raynell Street

City Springfield State MO Zip Code 65804

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

Name of Employer Houston Astros Occupation Pitcher

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2012

Transaction ID : SA11AI.4119

Amount of Each Receipt this Period
 1250.00

C. Full Name (Last, First, Middle Initial)
Wanda Martens

Mailing Address 502 Cash Spring Road

City Ozark State MO Zip Code 65721

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

Name of Employer Self-Employed Occupation Farmer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 07 / 2012

Transaction ID : SA11AI.4189

Amount of Each Receipt this Period
 350.00
 In-kind - Advertising- Ozark MERCHANTS Baseball

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

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

1850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 33
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF TOM STILSON

Full Name (Last, First, Middle Initial) A. Wanda Martens		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 26 / 2012	
Mailing Address 502 Cash Spring Road		Transaction ID : SA11AI.4190	
City Ozark	State MO	Zip Code 65721	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 81.00 In-kind - Banner- Sign Us of the Ozarks LLC	
Name of Employer Self-Employed	Occupation Farmer		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 431.00		

Full Name (Last, First, Middle Initial) B. Wanda Martens		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 17 / 2012	
Mailing Address 502 Cash Spring Road		Transaction ID : SA11AI.4191	
City Ozark	State MO	Zip Code 65721	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.47 In-kind - Campaign Banners- M&G Signs	
Name of Employer Self-Employed	Occupation Farmer		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 581.47		

Full Name (Last, First, Middle Initial) C. Wanda Martens		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 24 / 2012	
Mailing Address 502 Cash Spring Road		Transaction ID : SA11AI.4138	
City Ozark	State MO	Zip Code 65721	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer Self-Employed	Occupation Farmer		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 631.47		

SUBTOTAL of Receipts This Page (optional).....	281.47
TOTAL This Period (last page this line number only).....	281.47

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 33
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF TOM STILSON

Full Name (Last, First, Middle Initial) A. Wanda Martens		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 09 / 2012
Mailing Address 502 Cash Spring Road		Transaction ID : SA11AI.4241
City Ozark	State MO	
Zip Code 65721		Amount of Each Receipt this Period 40.00 25 for 25 Birthday Fundraiser
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed	Occupation Farmer	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 671.47	

Full Name (Last, First, Middle Initial) B. Wanda Martens		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 13 / 2012
Mailing Address 502 Cash Spring Road		Transaction ID : SA11AI.4192
City Ozark	State MO	
Zip Code 65721		Amount of Each Receipt this Period 257.94 In-kind - Campaign Banners- M&G Signs
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed	Occupation Farmer	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 929.41	

Full Name (Last, First, Middle Initial) C. Wanda Martens		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 23 / 2012
Mailing Address 502 Cash Spring Road		Transaction ID : SA11AI.4134
City Ozark	State MO	
Zip Code 65721		Amount of Each Receipt this Period 100.00 Sharron Angle Fundraiser Tickets
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed	Occupation Farmer	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1029.41	

SUBTOTAL of Receipts This Page (optional).....	397.94
TOTAL This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 33
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF TOM STILSON

Full Name (Last, First, Middle Initial) A. Wanda Martens		Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2012	
Mailing Address 502 Cash Spring Road		Transaction ID : SA11AI.4242	
City Ozark	State MO	Zip Code 65721	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 70.00	
Name of Employer Self-Employed	Occupation Farmer		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1099.41		

Full Name (Last, First, Middle Initial) B. Hal Owen		Date of Receipt M M / D D / Y Y Y Y 04 / 13 / 2012	
Mailing Address 721 N 10th Street		Transaction ID : SA11AI.4148	
City Ozark	State MO	Zip Code 65721	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 250.00	
Name of Employer Self-Employed	Occupation Property Management		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) C. Hal Owen		Date of Receipt M M / D D / Y Y Y Y 06 / 22 / 2012	
Mailing Address 721 N 10th Street		Transaction ID : SA11AI.4150	
City Ozark	State MO	Zip Code 65721	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 100.00 Sharron Angle Fundraiser Tickets	
Name of Employer Self-Employed	Occupation Property Management		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00		

SUBTOTAL of Receipts This Page (optional).....	420.00
TOTAL This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 33
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF TOM STILSON

Full Name (Last, First, Middle Initial) A. Laura Stilson		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 28 / 2012
Mailing Address 390 Cash Spring Road		Transaction ID : SA11AI.4203
City Ozark State MO Zip Code 65721	Amount of Each Receipt this Period 40.30 In-kind - Campaign Literature- UPS Store #2223	
FEC ID number of contributing federal political committee. C	Name of Employer Self-Employed Occupation Photographer	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 325.35	

Full Name (Last, First, Middle Initial) B. Laura Stilson		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 28 / 2012
Mailing Address 390 Cash Spring Road		Transaction ID : SA11AI.4204
City Ozark State MO Zip Code 65721	Amount of Each Receipt this Period 100.00 In-kind - Advertising- Christ. County GOP	
FEC ID number of contributing federal political committee. C	Name of Employer Self-Employed Occupation Photographer	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 285.05	

Full Name (Last, First, Middle Initial) C. Laura Stilson		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 16 / 2012
Mailing Address 390 Cash Spring Road		Transaction ID : SA11AI.4205
City Ozark State MO Zip Code 65721	Amount of Each Receipt this Period 6.60 In-kind - USPS Postage	
FEC ID number of contributing federal political committee. C	Name of Employer Self-Employed Occupation Photographer	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 331.95	

SUBTOTAL of Receipts This Page (optional).....	146.90
TOTAL This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 33
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF TOM STILSON

A. Full Name (Last, First, Middle Initial)
Laura Stilson

Mailing Address 390 Cash Spring Road

City Ozark State MO Zip Code 65721

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

Name of Employer Self-Employed Occupation Photographer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **399.74**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 18 / 2012

Transaction ID : SA11AI.4206

Amount of Each Receipt this Period
42.00

In-kind - Candy - Nixa Sucker Day Parade- Wal-Mart #379

B. Full Name (Last, First, Middle Initial)
Laura Stilson

Mailing Address 390 Cash Spring Road

City Ozark State MO Zip Code 65721

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

Name of Employer Self-Employed Occupation Photographer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **357.74**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 18 / 2012

Transaction ID : SA11AI.4207

Amount of Each Receipt this Period
25.79

In-kind - Campaign Literature- UPS Store #2223

C. Full Name (Last, First, Middle Initial)
Laura Stilson

Mailing Address 390 Cash Spring Road

City Ozark State MO Zip Code 65721

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

Name of Employer Self-Employed Occupation Photographer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **449.74**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 23 / 2012

Transaction ID : SA11AI.4158

Amount of Each Receipt this Period
50.00

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

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

117.79

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 33
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF TOM STILSON

A. Full Name (Last, First, Middle Initial)
Laura Stilson

Mailing Address 390 Cash Spring Road

City Ozark State MO Zip Code 65721

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

Name of Employer Self-Employed Occupation Photographer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **655.15**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 31 / 2012

Transaction ID : SA11AI.4208

Amount of Each Receipt this Period
63.06
 In-kind - Hospitality Suite Food- Sam's Club

B. Full Name (Last, First, Middle Initial)
Laura Stilson

Mailing Address 390 Cash Spring Road

City Ozark State MO Zip Code 65721

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

Name of Employer Self-Employed Occupation Photographer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **592.09**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 31 / 2012

Transaction ID : SA11AI.4209

Amount of Each Receipt this Period
94.35
 In-kind - State Hospitality Suite Food- Wal-Mart #379

C. Full Name (Last, First, Middle Initial)
Laura Stilson

Mailing Address 390 Cash Spring Road

City Ozark State MO Zip Code 65721

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

Name of Employer Self-Employed Occupation Photographer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **497.74**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 31 / 2012

Transaction ID : SA11AI.4210

Amount of Each Receipt this Period
48.00
 In-kind - Campaign Literature- UPS Store #2223

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

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

205.41

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 33
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF TOM STILSON

A. Full Name (Last, First, Middle Initial)
Laura Stilson

Mailing Address 390 Cash Spring Road

City Ozark State MO Zip Code 65721

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

Name of Employer Self-Employed Occupation Photographer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **665.86**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 01 / 2012

Transaction ID : SA11AI.4211

Amount of Each Receipt this Period
 10.71

In-kind - State Hospitality Suite Supplies- National Art Shop

B. Full Name (Last, First, Middle Initial)
Laura Stilson

Mailing Address 390 Cash Spring Road

City Ozark State MO Zip Code 65721

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

Name of Employer Self-Employed Occupation Photographer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **695.85**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 18 / 2012

Transaction ID : SA11AI.4212

Amount of Each Receipt this Period
 29.99

In-kind - Extra Phone Line- CenturyTel

C. Full Name (Last, First, Middle Initial)
Laura Stilson

Mailing Address 390 Cash Spring Road

City Ozark State MO Zip Code 65721

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

Name of Employer Self-Employed Occupation Photographer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **945.85**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 22 / 2012

Transaction ID : SA11AI.4160

Amount of Each Receipt this Period
 250.00

Sharron Angle Fundraiser Tickets

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

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

290.70

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 33
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF TOM STILSON

A. Full Name (Last, First, Middle Initial)
Laura Stilson

Mailing Address 390 Cash Spring Road

City Ozark State MO Zip Code 65721

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

Name of Employer Self-Employed Occupation Photographer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1045.85

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 27 / 2012

Transaction ID : SA11AI.4213

Amount of Each Receipt this Period
100.00

In-kind - Table and Booth - Sertoma Duck Race

B. Full Name (Last, First, Middle Initial)
Robert Stilson

Mailing Address 390 Cash Spring Road

City Ozark State MO Zip Code 65721

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
252.35

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 08 / 2012

Transaction ID : SA11AI.4193

Amount of Each Receipt this Period
252.35

In-kind - Website Hosting- BlueHost Inc.

C. Full Name (Last, First, Middle Initial)
Robert Stilson

Mailing Address 390 Cash Spring Road

City Ozark State MO Zip Code 65721

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
476.45

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 01 / 2012

Transaction ID : SA11AI.4195

Amount of Each Receipt this Period
224.10

In-kind - Campaign Literature- Marketplace Printing

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

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

576.45

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 33
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF TOM STILSON

Full Name (Last, First, Middle Initial) Robert Stilson		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 16 / 2012
Mailing Address 390 Cash Spring Road		Transaction ID : SA11AI.4196
City Ozark	State MO	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 254.90 In-kind - t-shirts
Name of Employer Retired	Occupation Retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 731.35	

Full Name (Last, First, Middle Initial) Robert Stilson		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 23 / 2012
Mailing Address 390 Cash Spring Road		Transaction ID : SA11AI.4197
City Ozark	State MO	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 124.17 In-kind - Stickers- Marketplace Printing
Name of Employer Retired	Occupation Retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 855.52	

Full Name (Last, First, Middle Initial) Robert Stilson		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 02 / 2012
Mailing Address 390 Cash Spring Road		Transaction ID : SA11AI.4198
City Ozark	State MO	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 185.17 In-kind - State Convention Hospitality Suite- University Plaza Hotel
Name of Employer Retired	Occupation Retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1060.76	

SUBTOTAL of Receipts This Page (optional).....	564.24
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 33
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF TOM STILSON

A. Full Name (Last, First, Middle Initial)
Robert Stilson

Mailing Address 390 Cash Spring Road

City Ozark State MO Zip Code 65721

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **875.59**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 02 / 2012

Transaction ID : SA11AI.4199

Amount of Each Receipt this Period
 20.07

In-kind - Supplies for Hospitality Suite- University Plaza Hotel

B. Full Name (Last, First, Middle Initial)
Robert Stilson

Mailing Address 390 Cash Spring Road

City Ozark State MO Zip Code 65721

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1125.76**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 09 / 2012

Transaction ID : SA11AI.4238

Amount of Each Receipt this Period
 65.00

25 for 25 Birthday Fundraiser

C. Full Name (Last, First, Middle Initial)
Kurt Wouk

Mailing Address 2551 S Campbell Avenue

City Springfield State MO Zip Code 65807

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

Name of Employer Self-Employed Occupation Coin and Bullion

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 22 / 2012

Transaction ID : SA11AI.4170

Amount of Each Receipt this Period
 600.00

Sharron Angle Fundraiser Tickets

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

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

685.07

5535.97

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 33
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF TOM STILSON

Full Name (Last, First, Middle Initial) A. Thomas Shane Stilson		Date of Receipt M M / D D / Y Y Y Y 02 / 28 / 2012
Mailing Address 390 Cash Spring Road		Transaction ID : SA11D.4178
City Ozark State MO Zip Code 65721	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C H2MO07101	Name of Employer Occupation Bass Pro Shops Fine Gun Sales/Gunsmith/Range Officer	In-kind - Republican Party Filing Fee- MO GOP
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 100.00	

Full Name (Last, First, Middle Initial) B. Thomas Shane Stilson		Date of Receipt M M / D D / Y Y Y Y 03 / 21 / 2012
Mailing Address 390 Cash Spring Road		Transaction ID : SA11D.4177
City Ozark State MO Zip Code 65721	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C H2MO07101	Name of Employer Occupation Bass Pro Shops Fine Gun Sales/Gunsmith/Range Officer	In-kind - Business Cards- FedEx Kinkos #193
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 130.00	

Full Name (Last, First, Middle Initial) C. Thomas Shane Stilson		Date of Receipt M M / D D / Y Y Y Y 03 / 25 / 2012
Mailing Address 390 Cash Spring Road		Transaction ID : SA11D.4179
City Ozark State MO Zip Code 65721	Amount of Each Receipt this Period 107.58	
FEC ID number of contributing federal political committee. C H2MO07101	Name of Employer Occupation Bass Pro Shops Fine Gun Sales/Gunsmith/Range Officer	In-kind - Business Cards- FedEx Kinkos #193
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 237.58	

SUBTOTAL of Receipts This Page (optional).....	237.58
TOTAL This Period (last page this line number only).....	237.58

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 33
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF TOM STILSON

A. Full Name (Last, First, Middle Initial)
Thomas Shane Stilson

Mailing Address 390 Cash Spring Road

City Ozark State MO Zip Code 65721

FEC ID number of contributing federal political committee. **C H2MO07101**

Name of Employer Bass Pro Shops Occupation Fine Gun Sales/Gunsmith/Range Officer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 288.43

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 16 / 2012

Transaction ID : SA11D.4180

Amount of Each Receipt this Period
 _____ 50.85

In-kind - Gas for Travel- Murphy USA 7060

B. Full Name (Last, First, Middle Initial)
Thomas Shane Stilson

Mailing Address 390 Cash Spring Road

City Ozark State MO Zip Code 65721

FEC ID number of contributing federal political committee. **C H2MO07101**

Name of Employer Bass Pro Shops Occupation Fine Gun Sales/Gunsmith/Range Officer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 308.43

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2012

Transaction ID : SA11D.4248

Amount of Each Receipt this Period
 _____ 20.00

C. Full Name (Last, First, Middle Initial)
Thomas Shane Stilson

Mailing Address 390 Cash Spring Road

City Ozark State MO Zip Code 65721

FEC ID number of contributing federal political committee. **C H2MO07101**

Name of Employer Bass Pro Shops Occupation Fine Gun Sales/Gunsmith/Range Officer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 327.50

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2012

Transaction ID : SA11D.4181

Amount of Each Receipt this Period
 _____ 19.07

In-kind - Gas for Travel- Casey's General Store- Ozark

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

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

_____ 89.92

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 33
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF TOM STILSON

A. Full Name (Last, First, Middle Initial)
Thomas Shane Stilson

Mailing Address 390 Cash Spring Road

City Ozark State MO Zip Code 65721

FEC ID number of contributing federal political committee. **C H2MO07101**

Name of Employer Bass Pro Shops Occupation Fine Gun Sales/Gunsmith/Range Officer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 406.10

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 04 / 2012

Transaction ID : SA11D.4292

Amount of Each Receipt this Period
 _____ 75.00

In-kind - Travel Expenses- Fuel- Wal-Mart #379

B. Full Name (Last, First, Middle Initial)
Thomas Shane Stilson

Mailing Address 390 Cash Spring Road

City Ozark State MO Zip Code 65721

FEC ID number of contributing federal political committee. **C H2MO07101**

Name of Employer Bass Pro Shops Occupation Fine Gun Sales/Gunsmith/Range Officer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 456.10

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 29 / 2012

Transaction ID : SA11D.4175

Amount of Each Receipt this Period
 _____ 50.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

_____ 125.00

_____ 452.50

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 33
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF TOM STILSON

A. Full Name (Last, First, Middle Initial)
Matthew Ennis

Mailing Address 1422 West Sackett

City Springfield State MO Zip Code 65807

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

Name of Employer Missouri State University Occupation Program Specialist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
466.11

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 17 / 2012

Transaction ID : SA13B.4250

Amount of Each Receipt this Period
466.11

Advance for mailing

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

466.11

466.11

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 33		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
FRIENDS OF TOM STILSON

Full Name (Last, First, Middle Initial) A. Sharron Angle		Date of Disbursement MM / DD / YYYY 06 / 30 / 2012
Mailing Address PO Box 8363		Amount of Each Disbursement this Period 783.20 Transaction ID : SB17.4290
City Reno	State NV	
Zip Code 89507	Purpose of Disbursement Reimbursement of Flight Cost	Category/ Type 003
Candidate Name FRIENDS OF TOM STILSON	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	State: MO District: 07	
	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Terry Campbell		Date of Disbursement MM / DD / YYYY 04 / 24 / 2012
Mailing Address 587 River View Road		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.4254
City Ozark	State MO	
Zip Code 65721	Purpose of Disbursement Consultation fee for April 9-16	Category/ Type 001
Candidate Name FRIENDS OF TOM STILSON	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	State: MO District: 07	
	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Terry Campbell		Date of Disbursement MM / DD / YYYY 04 / 30 / 2012
Mailing Address 587 River View Road		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.4258
City Ozark	State MO	
Zip Code 65721	Purpose of Disbursement Consultation fee for April 16-22	Category/ Type 001
Candidate Name FRIENDS OF TOM STILSON	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	State: MO District: 07	
	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1783.20
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 33		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
FRIENDS OF TOM STILSON

Full Name (Last, First, Middle Initial) A. Terry Campbell		Date of Disbursement MM / DD / YYYY 05 / 09 / 2012
Mailing Address 587 River View Road		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.4263
City Ozark	State MO	
Zip Code 65721	Purpose of Disbursement Consultation Fee for April 23-29	Category/ Type 001
Candidate Name FRIENDS OF TOM STILSON		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO	District: 07	

Full Name (Last, First, Middle Initial) B. Terry Campbell		Date of Disbursement MM / DD / YYYY 05 / 25 / 2012
Mailing Address 587 River View Road		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.4270
City Ozark	State MO	
Zip Code 65721	Purpose of Disbursement Consultation Fee for April 30- May 6	Category/ Type 001
Candidate Name FRIENDS OF TOM STILSON		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO	District: 07	

Full Name (Last, First, Middle Initial) c. Terry Campbell		Date of Disbursement MM / DD / YYYY 05 / 30 / 2012
Mailing Address 587 River View Road		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.4271
City Ozark	State MO	
Zip Code 65721	Purpose of Disbursement Consultation fee for April 30- May 6	Category/ Type 001
Candidate Name FRIENDS OF TOM STILSON		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO	District: 07	

SUBTOTAL of Disbursements This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 33	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF TOM STILSON

Full Name (Last, First, Middle Initial) A. Terry Campbell		Date of Disbursement MM / DD / YYYY 06 / 15 / 2012
Mailing Address 587 River View Road		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.4276
City Ozark	State MO	
Purpose of Disbursement Consultation Fee for May 7-13		Category/ Type 001
Candidate Name FRIENDS OF TOM STILSON		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 07		

Full Name (Last, First, Middle Initial) B. Terry Campbell		Date of Disbursement MM / DD / YYYY 06 / 30 / 2012
Mailing Address 587 River View Road		Amount of Each Disbursement this Period 163.66 Transaction ID : SB17.4291
City Ozark	State MO	
Purpose of Disbursement Reimbursement for Hotel Cost		Category/ Type 003
Candidate Name FRIENDS OF TOM STILSON		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 07		

Full Name (Last, First, Middle Initial) c. Marketplace Printing		Date of Disbursement MM / DD / YYYY 05 / 10 / 2012
Mailing Address 1417 W State Hwy J		Amount of Each Disbursement this Period 224.10 Transaction ID : SB17.4264
City Ozark	State MO	
Purpose of Disbursement Campaign Literature		Category/ Type 006
Candidate Name FRIENDS OF TOM STILSON		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 07		

SUBTOTAL of Disbursements This Page (optional).....	637.76
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 33	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF TOM STILSON

Full Name (Last, First, Middle Initial) A. Wanda Martens		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2012
Mailing Address 502 Cash Spring Road		Amount of Each Disbursement this Period 350.00 Transaction ID : SB17.4237
City Ozark	State MO	
Purpose of Disbursement In-kind - Advertising- Ozark MEchants Baseball		Category/ Type 004
Candidate Name FRIENDS OF TOM STILSON		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO	District: 07	

Full Name (Last, First, Middle Initial) B. Wanda Martens		Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2012
Mailing Address 502 Cash Spring Road		Amount of Each Disbursement this Period 81.00 Transaction ID : SB17.4236
City Ozark	State MO	
Purpose of Disbursement In-kind - Banner- Sign Us of the Ozarks LLC		Category/ Type 004
Candidate Name FRIENDS OF TOM STILSON		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO	District: 07	

Full Name (Last, First, Middle Initial) c. Wanda Martens		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address 502 Cash Spring Road		Amount of Each Disbursement this Period 150.47 Transaction ID : SB17.4235
City Ozark	State MO	
Purpose of Disbursement In-kind - Campaign Banners- M&G Signs		Category/ Type 004
Candidate Name FRIENDS OF TOM STILSON		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO	District: 07	

SUBTOTAL of Disbursements This Page (optional).....	581.47
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 33		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF TOM STILSON

Full Name (Last, First, Middle Initial) A. Wanda Martens		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2012
Mailing Address 502 Cash Spring Road		Amount of Each Disbursement this Period 257.94 Transaction ID : SB17.4234
City Ozark	State MO	
Purpose of Disbursement In-kind - Campaign Banners- M&G Signs		Category/ Type 004
Candidate Name FRIENDS OF TOM STILSON		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO	District: 07	

Full Name (Last, First, Middle Initial) B. Office Depot #106		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2012
Mailing Address 3111 S Glenstone Avenue		Amount of Each Disbursement this Period 225.00 Transaction ID : SB17.4296
City Springfield	State MO	
Purpose of Disbursement Fundraising Materials Postage		Category/ Type 003
Candidate Name FRIENDS OF TOM STILSON		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO	District: 07	

Full Name (Last, First, Middle Initial) c. Laura Stilson		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2012
Mailing Address 390 Cash Spring Road		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.4223
City Ozark	State MO	
Purpose of Disbursement In-kind - Advertising- Christ. County GOP		Category/ Type 004
Candidate Name FRIENDS OF TOM STILSON		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO	District: 07	

SUBTOTAL of Disbursements This Page (optional).....	582.94
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 33		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
FRIENDS OF TOM STILSON

Full Name (Last, First, Middle Initial) A. Laura Stilson		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2012
Mailing Address 390 Cash Spring Road		Amount of Each Disbursement this Period 40.30 Transaction ID : SB17.4224
City Ozark State MO Zip Code 65721	Purpose of Disbursement In-kind - Campaign Literature- UPS Store #2223 Category/Type 006	
Candidate Name FRIENDS OF TOM STILSON	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 07		

Full Name (Last, First, Middle Initial) B. Laura Stilson		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2012
Mailing Address 390 Cash Spring Road		Amount of Each Disbursement this Period 6.60 Transaction ID : SB17.4222
City Ozark State MO Zip Code 65721	Purpose of Disbursement In-kind - USPS Postage Category/Type 001	
Candidate Name FRIENDS OF TOM STILSON	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 07		

Full Name (Last, First, Middle Initial) c. Laura Stilson		Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2012
Mailing Address 390 Cash Spring Road		Amount of Each Disbursement this Period 25.79 Transaction ID : SB17.4220
City Ozark State MO Zip Code 65721	Purpose of Disbursement In-kind - Campaign Literature- UPS Store #2223 Category/Type 006	
Candidate Name FRIENDS OF TOM STILSON	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 07		

SUBTOTAL of Disbursements This Page (optional).....	72.69
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 33	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF TOM STILSON

Full Name (Last, First, Middle Initial) A. Laura Stilson		Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2012
Mailing Address 390 Cash Spring Road		Amount of Each Disbursement this Period 42.00 Transaction ID : SB17.4221
City Ozark State MO Zip Code 65721	Purpose of Disbursement In-kind - Candy - Nixa Sucker Day Parade- Wal-Mart #379 007 Category/Type	
Candidate Name FRIENDS OF TOM STILSON	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 07		

Full Name (Last, First, Middle Initial) B. Laura Stilson		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address 390 Cash Spring Road		Amount of Each Disbursement this Period 48.00 Transaction ID : SB17.4217
City Ozark State MO Zip Code 65721	Purpose of Disbursement In-kind - Campaign Literature- UPS Store #2223 006 Category/Type	
Candidate Name FRIENDS OF TOM STILSON	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 07		

Full Name (Last, First, Middle Initial) c. Laura Stilson		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address 390 Cash Spring Road		Amount of Each Disbursement this Period 94.35 Transaction ID : SB17.4218
City Ozark State MO Zip Code 65721	Purpose of Disbursement In-kind - State Hospitality Suite Food- Wal-Mart #379 007 Category/Type	
Candidate Name FRIENDS OF TOM STILSON	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 07		

SUBTOTAL of Disbursements This Page (optional).....	184.35
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 33	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF TOM STILSON

Full Name (Last, First, Middle Initial) A. Laura Stilson		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address 390 Cash Spring Road		Amount of Each Disbursement this Period 63.06 Transaction ID : SB17.4219
City Ozark	State MO	
Zip Code 65721	Purpose of Disbursement In-kind - Hospitality Suite Food- Sam's Club	Category/ Type 007
Candidate Name FRIENDS OF TOM STILSON	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MO District: 07	

Full Name (Last, First, Middle Initial) B. Laura Stilson		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2012
Mailing Address 390 Cash Spring Road		Amount of Each Disbursement this Period 10.71 Transaction ID : SB17.4216
City Ozark	State MO	
Zip Code 65721	Purpose of Disbursement In-kind - State Hospitality Suite Supplies- National Art Shop	Category/ Type 006
Candidate Name FRIENDS OF TOM STILSON	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MO District: 07	

Full Name (Last, First, Middle Initial) c. Laura Stilson		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2012
Mailing Address 390 Cash Spring Road		Amount of Each Disbursement this Period 29.99 Transaction ID : SB17.4215
City Ozark	State MO	
Zip Code 65721	Purpose of Disbursement In-kind - Extra Phone Line- CenturyTel	Category/ Type 001
Candidate Name FRIENDS OF TOM STILSON	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MO District: 07	

SUBTOTAL of Disbursements This Page (optional).....	103.76
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 33		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
FRIENDS OF TOM STILSON

Full Name (Last, First, Middle Initial) A. Laura Stilson		Date of Disbursement MM / DD / YYYY 06 / 27 / 2012
Mailing Address 390 Cash Spring Road		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.4214
City Ozark	State MO	
Purpose of Disbursement In-kind - Table and Booth - Sertoma Duck Race		Category/ Type 007
Candidate Name FRIENDS OF TOM STILSON		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO	District: 07	

Full Name (Last, First, Middle Initial) B. Robert Stilson		Date of Disbursement MM / DD / YYYY 03 / 08 / 2012
Mailing Address 390 Cash Spring Road		Amount of Each Disbursement this Period 252.35 Transaction ID : SB17.4233
City Ozark	State MO	
Purpose of Disbursement In-kind - Website Hosting- BlueHost Inc.		Category/ Type 004
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) c. Robert Stilson		Date of Disbursement MM / DD / YYYY 05 / 01 / 2012
Mailing Address 390 Cash Spring Road		Amount of Each Disbursement this Period 224.10 Transaction ID : SB17.4232
City Ozark	State MO	
Purpose of Disbursement In-kind - Campaign Literature- Marketplace Printing		Category/ Type 006
Candidate Name FRIENDS OF TOM STILSON		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO	District: 07	

SUBTOTAL of Disbursements This Page (optional).....	576.45
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 33	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF TOM STILSON

Full Name (Last, First, Middle Initial) A. Robert Stilson		Date of Disbursement MM / DD / YYYY 05 / 16 / 2012
Mailing Address 390 Cash Spring Road		Amount of Each Disbursement this Period 254.90 Transaction ID : SB17.4231
City Ozark State MO Zip Code 65721	Purpose of Disbursement In-kind - t-shirts Category/Type 006	
Candidate Name FRIENDS OF TOM STILSON	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 07		

Full Name (Last, First, Middle Initial) B. Robert Stilson		Date of Disbursement MM / DD / YYYY 05 / 23 / 2012
Mailing Address 390 Cash Spring Road		Amount of Each Disbursement this Period 124.17 Transaction ID : SB17.4230
City Ozark State MO Zip Code 65721	Purpose of Disbursement In-kind - Stickers- Marketplace Printing Category/Type 006	
Candidate Name FRIENDS OF TOM STILSON	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 07		

Full Name (Last, First, Middle Initial) c. Robert Stilson		Date of Disbursement MM / DD / YYYY 06 / 02 / 2012
Mailing Address 390 Cash Spring Road		Amount of Each Disbursement this Period 20.07 Transaction ID : SB17.4228
City Ozark State MO Zip Code 65721	Purpose of Disbursement In-kind - Supplies for Hospitality Suite- University Plaza Hotel Category/Type 007	
Candidate Name FRIENDS OF TOM STILSON	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 07		

SUBTOTAL of Disbursements This Page (optional).....	399.14
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 30 OF 33	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF TOM STILSON

Full Name (Last, First, Middle Initial) A. Robert Stilson		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2012
Mailing Address 390 Cash Spring Road		Amount of Each Disbursement this Period 343.60 Transaction ID : SB17.4229
City Ozark State MO Zip Code 65721	Purpose of Disbursement In-kind - State Convention Hospitality Suite- University Plaza Hotel 007 Category/Type	
Candidate Name FRIENDS OF TOM STILSON	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 07		

Full Name (Last, First, Middle Initial) B. Thomas Shane Stilson		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2012
Mailing Address 390 Cash Spring Road		Amount of Each Disbursement this Period 107.58 Transaction ID : SB17.4187
City Ozark State MO Zip Code 65721	Purpose of Disbursement In-kind - Business Cards- FedEx Kinkos #193 006 Category/Type	
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 07		

Full Name (Last, First, Middle Initial) c. Thomas Shane Stilson		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2012
Mailing Address 390 Cash Spring Road		Amount of Each Disbursement this Period 50.85 Transaction ID : SB17.4186
City Ozark State MO Zip Code 65721	Purpose of Disbursement In-kind - Gas for Travel- Murphy USA 7060 002 Category/Type	
Candidate Name FRIENDS OF TOM STILSON	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 07		

SUBTOTAL of Disbursements This Page (optional).....	343.60
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 33		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
FRIENDS OF TOM STILSON

Full Name (Last, First, Middle Initial) A. Thomas Shane Stilson		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2012
Mailing Address 390 Cash Spring Road		Amount of Each Disbursement this Period 97.67 Transaction ID : SB17.4185
City Ozark State MO Zip Code 65721	Purpose of Disbursement In-kind - Gas for Travel- Casey's General Store- Ozark 002 Category/ Type	
Candidate Name FRIENDS OF TOM STILSON	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 07		

Full Name (Last, First, Middle Initial) B. Thomas Shane Stilson		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2012
Mailing Address 390 Cash Spring Road		Amount of Each Disbursement this Period 3.60 Transaction ID : SB17.4184
City Ozark State MO Zip Code 65721	Purpose of Disbursement In-kind - USPS Postage 001 Category/ Type	
Candidate Name FRIENDS OF TOM STILSON	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 07		

Full Name (Last, First, Middle Initial) c. Thomas Shane Stilson		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 390 Cash Spring Road		Amount of Each Disbursement this Period 75.00 Transaction ID : SB17.4293
City Ozark State MO Zip Code 65721	Purpose of Disbursement In-kind - Travel Expenses- Fuel- Wal-Mart #379 002 Category/ Type	
Candidate Name FRIENDS OF TOM STILSON	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 07		

SUBTOTAL of Disbursements This Page (optional).....	97.67
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 33	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF TOM STILSON

Full Name (Last, First, Middle Initial) A. The Tower Club		Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2012
Mailing Address 901 East St. Louis #21		Amount of Each Disbursement this Period 1252.78
City Springfield	State MO Zip Code 65806	
Purpose of Disbursement Dinner Expenses for Sharron Angle Fundraiser	Category/Type 003	Transaction ID : SB17.4288
Candidate Name FRIENDS OF TOM STILSON		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: MO District: 07		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1252.78
TOTAL This Period (last page this line number only).....	7615.81

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4250

FRIENDS OF TOM STILSON

LOAN SOURCE Full Name (Last, First, Middle Initial)

Matthew Ennis

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
1422 West Sackett

City State ZIP Code
Springfield MO 65807

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
466.11 0.00 466.11

TERMS

Date Incurred Date Due Interest Rate Secured:
06 / 17 / 2012 M M / D D / Paid July 12 0.00 % (apr) Yes No

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)..... ▶ 466.11
TOTALS This Period (last page in this line only)..... ▶ 466.11

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