

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)  
St. Louisians for Better Government

ADDRESS (number and street)  Check if different than previously reported  
40 Bernard Pasternak  
41 Claverach Drive

CITY, STATE and ZIP CODE  
St. Louis, MO 63105

2. FEC IDENTIFICATION NUMBER  
C-00148155

3.  This committee has qualified as a multicandidate committee. (see FEC FORM 1M)  
See Note Below

4. TYPE OF REPORT

- (a)  April 15 Quarterly Report  
 July 15 Quarterly Report  
 October 15 Quarterly Report  
 January 31 Year End Report  
 July 31 Mid Year Report (Non-election Year Only)  
 Termination Report

Note: In accordance with Burroughs-Pondrace from FEC dated 12-9-93 this committee has been first primary of multi-candidates in MO prior to 1-1-94.

Monthly Report Due On:  
 February 20     June 20     October 20  
 March 20     July 20     November 20  
 April 20     August 20     December 20  
 May 20     September 20     January 31

Twelfth day report preceding \_\_\_\_\_ (Type of Election) election on \_\_\_\_\_ in the State of \_\_\_\_\_

Thirtieth day report following the General Election on \_\_\_\_\_ in the State of \_\_\_\_\_

(b) Is this Report an Amendment?     YES     NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	<u>April 1, 1994 through June 30, 1994</u>		
6. (a) Cash on Hand January 1, 19 <u>94</u>			\$ 34718.58
(b) Cash on Hand at Beginning of Reporting Period		\$ 54464.52	
(c) Total Receipts (from Line 19)		\$ 17257.78	\$ 48707.41
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 71722.30	\$ 83425.99
7. Total Disbursements: (from Line 30)		\$ 33849.92	\$ 45559.61
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 37872.38	\$ 37872.38
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		\$	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		\$ 100.21	

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  
Bernard Pasternak

Signature of Treasurer  
Bernard Pasternak

Date  
7-11-94

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

94039073398

**DETAILED SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS  
PAGE 2, FEC FORM 3X**

(revised 1/1/91)

NAME OF COMMITTEE  
**ST. LOUISIANS FOR BETTER GOVERNMENT**

REPORT COVERING PERIOD  
FROM **APRIL 1, 1994** TO **JUNE 30, 1994**

	COLUMN A Total This Period	COLUMN B Calendar Year
<b>I. Receipts</b>		
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (use Schedule A) .....	17000.00	48250.00
ii. Unitemized .....		
iii. Total ..... (add i and ii) >	17000.00	48250.00
b. Political Party Committees .....		
c. Other Political Committees (such as PACs) .....		
d. Total Contributions ..... (add a ii, b and c) >	17000.00	48250.00
12. Transfers From Affiliated/Other Party Committees .....		
13. All Loans Received .....		
14. Loan Repayments Received .....		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) .....		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees .....		
17. Other Federal Receipts (Dividends, Interest, etc.) .....	257.78	457.41
18. Transfers from Nonfederal Account for Joint Activity .....		
19. Total Receipts ..... (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	17257.78	48707.41
20. Total Federal Receipts ..... (subtract line 18 from line 19) >	17257.78	48707.41
<b>II. Disbursements</b>		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share .....		
ii. Non-Federal Share .....		
b. Other Federal Operating Expenditures .....	1849.92	3553.61
c. Total Operating Expenditures ..... (add a i, a ii, and b) >	1849.92	3553.61
22. Transfers to Affiliated/Other Party Committees .....		
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	22000.00	42000.00
24. Independent Expenditures (use Schedule E) .....		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F) .....		
26. Loan Repayments Made .....		
27. Loans Made .....		
28. Refunds of Contributions To:		
a. Individual/Persons Other Than Political Committees .....		
b. Political Party Committees .....		
c. Other Political Committees (such as PACs) .....		
d. Total Contribution Refunds ..... (add a, b and c) >		
29. Other Disbursements .....		
30. Total Disbursements ..... (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	33849.92	45553.61
31. Total Federal Disbursements ..... (subtract line 21 a ii from line 30) >	33849.92	45553.61
<b>III. Net Contributions/Operating Expenditures</b>		
32. Total Contributions (other than loans)(from line 11d) .....	17000.00	48250.00
33. Total Contribution Refunds (from line 28d) .....		
34. Net Contributions (other than loans)(subtract line 33 from 32) .....	17000.00	48250.00
35. Total Federal Operating Expenditures ..... (add 21 a i and 21 b) >	1849.92	3553.61
36. Offsets to Operating Expenditures (from line 15) .....		
37. Net Operating Expenditures ..... (subtract line 36 from 35) >	1849.92	3553.61

940039073399

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 15 OF 15  
FOR LINE NUMBER 11,900

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NAME OF COMMITTEE (in Full)

St. Louisians For Better Government

94039073400

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Preston Bank 635 S. Parkwood St. Louis, MO 63104	Self	6-13-94	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Real Estate	Aggregate Year-to-Date > \$500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bernard Bornstein 601 South Lindbergh St. Louis, MO 63105	Custom Furs	4-26-94	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Furrier	Aggregate Year-to-Date > \$750.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jerrold B. Smith 6330 Alexander St. Louis, MO 63105	St. Louis Freightliner	6-27-94	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney	Aggregate Year-to-Date > \$750.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Denlow 7777 Bonhomme, #1910 St. Louis, MO 63105	Robert Denlow & Associates	5-17-94	1800.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney	Aggregate Year-to-Date > \$1750.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sam Fox 23 Carrswold St. Louis, MO 63105	Harbour Group	4-22-94	1300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Chairman, CEO	Aggregate Year-to-Date > \$1750.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert D. Frew 970 North Spaulds Road, #27 St. Louis, MO 63106	A. Edwards & Sons	4-10-94	1800.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Stockbroker	Aggregate Year-to-Date > \$1000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ira G. Gal 2989 Maydelgan Rd St. Louis, MO 63131	Self	6-1-94	1800.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Physician	Aggregate Year-to-Date > \$1750.00	

SUBTOTAL of Receipts This Page (optional)

6500.00

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 2 OF 3  
FOR LINE NUMBER 11, 12, 13

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NAME OF COMMITTEE (in full)

St. Louisians for Better Government

94059073401

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sam R. Goldstein 14 Twin Springs Lane St. Louis, MO 63124	Aper Oil Co	6-20-91	1820.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>Businessman</u> Aggregate Year-to-Date > \$2000.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Daria J. Grossberg 5 Lake Forest St. Louis, MO 63117		7-4-91	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>Housewife</u> Aggregate Year-to-Date > \$1000.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bruce I. White 5 University Lane St. Louis, MO 63105	St. Louis Osmotic Surgery	5-4-91	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>Physician</u> Aggregate Year-to-Date > \$1000.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Carl Alvas 721 E. Central St. Louis, MO 63105	Internal Medicine Consultants, Inc	11-5-91	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>Physician</u> Aggregate Year-to-Date > \$1000.00		250.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Pollack 296 Princeton St. Louis, MO 63141	Al E. Edwards & Sons	7-2-91	341.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>Smoker</u> Aggregate Year-to-Date > \$1000.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Fred R. Siler 11527 Sarnquist St. Louis, MO 63141	Robinson & Siler	1-17-91	340.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>Insurance Agent</u> Aggregate Year-to-Date > \$1000.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Herman J. Lanson 12020 Garrettsgate Dr. St. Louis, MO 63116		5-2-91	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>Retired</u> Aggregate Year-to-Date > \$1000.00		

SUBTOTAL of Receipts This Page (optional)

6500.00

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 3 OF 3  
FOR LINE NUMBER 11, 12, 13

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**NAME OF COMMITTEE (in Full)**

St. Louisian for Better Government

94039073402

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Phillip J. Pastor 19 W. Greenwood Park St. Louis, MO 63105	Pastor, Baptist Church	6-6-94	900.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Artist	Aggregate Year-to-Date: \$ 2,400.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Milton L. Zorbas 801 S. Skinker, Apt. 113 St. Louis, MO 63105	retired	6-11-94	1500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Investor	Aggregate Year-to-Date: \$ 1,500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Viggo Halverson 52 Lake Park St. Louis, MO 63117	Impex Corp.	5-2-94	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Construction	Aggregate Year-to-Date: \$ 500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jean Schreier 200 S. Greenwood St. Louis, MO 63105		5-2-94	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: PRESENTLY UNEMPLOYED	Aggregate Year-to-Date: \$ 200.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Miriam Schreier 7384 Westmoreland Dr. St. Louis, MO 63130	Self	6-22-94	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Artist	Aggregate Year-to-Date: \$ 500.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:	Aggregate Year-to-Date: \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:	Aggregate Year-to-Date: \$	

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

4000.00

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

17000.00

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 17

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**NAME OF COMMITTEE (In Full)**

*St. Louisians for Better Government*

94039076403

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<i>Magna Bank 1401 S. Brentwood St. Louis, MO 63144</i>		<i>4-8-94</i>	<i>86.38</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): <i>Interest earned</i>	Occupation	<i>5-17-94</i>	<i>25.43</i>
		<i>6-16-94</i>	<i>88.97</i>
		Aggregate Year-to-Date > \$	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
		Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
		Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
		Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
		Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
		Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
		Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional) ..... *257.78*

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

SCHEDULE B

ITEMIZED DISBURSEMENTS

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 committees.

NAME OF COMMITTEE (In Full)  
*St. Louisians for Better Government*

94039073404

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
<i>Barbara Bianco 10 Warson Hills Lane St. Louis, MO 63124</i>	<i>Salary-Administrative Assistant</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>4-28-94 6-4-94 6-5-94</i>	<i>428.08 428.08 428.08</i>
<i>Magna Bank 1401 S. Brentwood St. Louis, MO 63144</i>	<i>Federal Withholding &amp; Social Security Taxes</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>4-28-94 6-1-94 6-5-94</i>	<i>108.50 108.50 108.50</i>
<i>Division of Employment Security Missouri Department of Revenue Jefferson City, MO 65103</i>	<i>State Unemployment Tax</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>4-30-94</i>	<i>33.90</i>
<i>Missouri Department of Revenue Jefferson City, MO 65108</i>	<i>State Withholding Tax</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>4-30-94</i>	<i>5.00</i>
<i>Barbara Bianco 10 Warson Hills St. Louis, MO 63124</i>	<i>Office Expenses</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>4-28-94</i>	<i>201.23</i>
<i>MAGNA BANK 1401 S. BRENTWOOD ST. LOUIS, MO 63144</i>	<i>Bank Charges</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		<i>.05</i>

SUBTOTAL of Disbursements This Page (optional)	<i>1849.92</i>
TOTAL This Period (last page this line number only)	<i>1849.92</i>

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1  
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

St. Louisians for Better Government

	A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
VA	Robb for Senate P.O. Box 1994 McLean, VA 22101-1994	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-5-94	5000.00
CA	Hamburg for Congress 2977 Jefferson St. Napa, CA 94558	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-1-94	1000.00
PA	Citizens for Wolford 501 Capitol Court, #200 Washington, DC 20002	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-1-94	5000.00
NJ	Lautenberg for Senate One Gateway Center, 17th Floor Newark, NJ 07102	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-5-94	5000.00
MO	Talent for Congress 1031 Executive Parkway, Ste 100 St. Louis, MO 63141	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-7-94	1000.00
WA	People for Jeff Bingaman 501 Capitol Ct. NE, #200 Washington, DC 20002	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-20-94	5000.00
DC	Kerry for Senate Committee 245 2nd St. NE #200 Washington DC 20002	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-29-94	5000.00
VA	Robb for Senate P.O. Box 1994 McLean, VA 22101-1994	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-29-94	5000.00
	I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
		Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)

32000.00

TOTAL This Period (last page this line number only)

32000.00



**SCHEDULE D**  
(Revised 3/80)

**DEBTS AND OBLIGATIONS**  
Excluding Loans

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<b>ST. LOUISIANS FOR BETTER GOVERNMENT</b>				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor MISSOURI DEPARTMENT OF REVENUE JEFFERSON CITY, MO 65108	3.00	5.00	5.00	5.00
Nature of Debt (Purpose): STATE WITHHOLDING TAX				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor MISSOURI DEPARTMENT OF REVENUE JEFFERSON CITY, MO 65108	33.90	25.36	33.90	35.36
Nature of Debt (Purpose): STATE UNEMPLOYMENT TAX				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor INTERNAL REVENUE SERVICE KANSAS CITY, MO 64999	12.00	12.00		24.00
Nature of Debt (Purpose): FEDERAL UNEMPLOYMENT TAX				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor BARBARA BIANCO 10 WARSON HILLS LANE ST LOUIS, MO 63124	201.12	.11	201.23	-0-
Nature of Debt (Purpose): VARIOUS OUT OF POCKET EXPENSES				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor PASTERNAK, SCHWEIZER & CO., P.C. 12400 OLIVE BLVD., SUITE 500 ST LOUIS, MO 63141	32.58	3.27		35.85
Nature of Debt (Purpose): POSTAGE				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				100.21
2) TOTALS This Period (last page in this line only)				100.21
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				100.21

9.4039073406

**Federal Election Commission  
ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	DATE OF RECEIPT
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED <i>7/11/94</i>
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House Office of Records and Registration	DATE OF RECEIPT
<input type="checkbox"/> Received from the Senate Office of Public Records	DATE OF RECEIPT
<input type="checkbox"/> Other (Specify):	POSTMARKED  and/or DATE OF RECEIPT
<i>Eric Smith</i>	<i>7/14/94</i>
PREPARER	DATE PREPARED