

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION COMMISSION MAIL ROOM

AUG 2 12 41 PM '99

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  
**CD. Bernard Pasternak  
801 S. Skinker #10C**

CITY, STATE and ZIP CODE  
**St. LOUIS, MO 63105**

2. FEC IDENTIFICATION NUMBER  
**C-0019855**

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

4. TYPE OF REPORT

NOTE: In accordance with correspondence from the FEC dated 12/98, this committee has satisfied criteria of multi-candidate status effective 1-1-99.

(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

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

12-Day Pre-Election Report for the \_\_\_\_\_ (Type of Election) election on \_\_\_\_\_ in the State of \_\_\_\_\_

30-Day Post-Election Report following the General Election on \_\_\_\_\_ in the State of \_\_\_\_\_

(b) Is this Report an Amendment?  YES  NO

| SUMMARY            |   | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|--------------------|---|-------------------------|-----------------------------------|
| 5. Covering Period | Jan 1, 1999 through June 30, 1999   |                         |                                   |
| 6. (a)             | Cash on Hand January 1, 1999  |                         | \$ 1,461.95                       |
| 6. (b)             | Cash on Hand at Beginning of Reporting Period   | \$ 1,461.95             |                                   |
| 6. (c)             | Total Receipts (from Line 19)   | \$ 32,298.88            | \$ 32,298.88                      |
| 6. (d)             | Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(d) for Column B)      | \$ 33,760.83            | \$ 33,760.83                      |
| 7.                 | Total Disbursements (from Line 20)  | \$ 1,172.99             | \$ 1,172.99                       |
| 8.                 | Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))                | \$ 32,587.84            | \$ 32,587.84                      |
| 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) | \$ 167.59               |                                   |

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  
**JULY 29, 1999**

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS  
PAGE 2, FEC FORM 8X**

(revised 1/1/91)

| NAME OF COMMITTEE<br><i>St. Louisians for Better Government</i>                                 | REPORT COVERING PERIOD<br>FROM <i>Jan 1, 1999</i> TO <i>June 30, 1999</i> |                           |
|---|---|---------------------------|
|   | COLUMN A<br>Total This Period   | COLUMN B<br>Calendar Year |
| <b>I. Receipts</b>  |   |                           |
| 11. Contributions (other than loans) From:  |   |                           |
| a. Individual/Persons Other Than Political Committees:  |   |                           |
| i. Itemized (use Schedule A) .....  | <i>32,250.00</i>  | <i>32,250.00</i>          |
| ii. Unitemized .....  |   |                           |
| iii. Total ..... (add i and ii) >   | <i>32,250.00</i>  | <i>32,250.00</i>          |
| b. Political Party Committees .....   |   |                           |
| c. Other Political Committees (such as PACs) .....  |   |                           |
| d. Total Contributions ..... (add a ii, b and c) >  | <i>32,250.00</i>  | <i>32,250.00</i>          |
| 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.) .....                                    | <i>11,498.88</i>  | <i>48.88</i>              |
| 18. Transfers from Nonfederal Account for Joint Activity .....                                  |   |                           |
| 19. Total Receipts ..... (add 11d, 12, 13, 14, 15, 16, 17, and 18) >                            | <i>32,298.88</i>  | <i>32,298.88</i>          |
| 20. Total Federal Receipts ..... (subtract line 18 from line 19) >                              | <i>32,298.88</i>  | <i>32,298.88</i>          |
| <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 .....   | <i>1,172.99</i>   | <i>1,172.99</i>           |
| c. Total Operating Expenditures ..... (add a i, ii, and b) >                                    | <i>1,172.99</i>   | <i>1,172.99</i>           |
| 22. Transfers to Affiliated/Other Party Committees .....  |   |                           |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees .....         |   |                           |
| 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) >                  | <i>1,172.99</i>   | <i>1,172.99</i>           |
| 31. Total Federal Disbursements ..... (subtract line 21 a i from line 30) >                     | <i>1,172.99</i>   | <i>1,172.99</i>           |
| <b>III. Net Contributions/Operating Expenditures</b>  |   |                           |
| 32. Total Contributions (other than loans) (from line 11d) .....                                | <i>32,250.00</i>  | <i>32,250.00</i>          |
| 33. Total Contribution Refunds (from line 28d) .....  |   |                           |
| 34. Net Contributions (other than loans) (subtract line 33 from 32) .....                       |   |                           |
| 35. Total Federal Operating Expenditures ..... (add 21 a i and 21 b) >                          | <i>1,172.99</i>   | <i>1,172.99</i>           |
| 36. Offsets to Operating Expenditures (from line 15) .....                                      |   |                           |
| 37. Net Operating Expenditures ..... (subtract line 36 from 35) >                               | <i>1,172.99</i>   | <i>1,172.99</i>           |

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 6

FOR LINE NUMBER 11a

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)  
**ST. LOUISIANS FOR BETTER GOVERNMENT**

| A. Full Name, Mailing Address and ZIP Code   | Name of Employer  | Date (month, day, year)                         | Amount of Each Receipt This Period |
|--|---|---|------------------------------------|
| <b>Paul Brown</b><br>700 OFFICE PARKWAY #209<br>ST. LOUIS, MO 63141  | <b>SELF</b>   | <b>1/5/99</b>                                   | <b>1,000.00</b>                    |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: <b>COMPUTERS</b>                                      | Aggregate Year-to-Date: <b>&gt; \$ 1,000.00</b> |                                    |
| <b>Harvey A. Friedman</b><br>3901 GULF SHORE BLVD. N, PH-101<br>NAPLES, FL 34103   | <b>MCLP, LLC</b>  | <b>1/4/99</b>                                   | <b>1,000.00</b>                    |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: <b>EXECUTIVE</b>                                      | Aggregate Year-to-Date: <b>&gt; \$ 1,000.00</b> |                                    |
| <b>Belinda Jenks</b><br>710 BERICK DR<br>ST. LOUIS, MO 63132   | <b>Protein Technologies International - DUPONT</b>                | <b>1/5/99</b>                                   | <b>250.00</b>                      |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: <b>Senior Scientist</b>                               | Aggregate Year-to-Date: <b>&gt; \$ 1,000.00</b> |                                    |
| <b>Sander Korein</b><br>701 Market Suite 300<br>St. Louis MO 63101   | <b>Carri Korein, Tillery, Korein, Montross, Cates &amp; Glass</b> | <b>2/9/99</b>                                   | <b>1,000.00</b>                    |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: <b>Attorney</b>                                       | Aggregate Year-to-Date: <b>&gt; \$ 1,000.00</b> |                                    |
| <b>Jerome Osherow</b><br>17 Upper Price<br>ST. LOUIS MO 63132  | <b>Retired</b>  | <b>2/6/99</b>                                   | <b>1,000.00</b>                    |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: <b>Retired</b>  | Aggregate Year-to-Date: <b>&gt; \$ 1,000.00</b> |                                    |
| <b>Phillip Paster</b><br>19 W. Brentmoor<br>St. Louis MO 63105   | <b>Paster, West &amp; Kramer</b>                                  | <b>2/6/99</b>                                   | <b>1,000.00</b>                    |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: <b>Attorney</b>                                       | Aggregate Year-to-Date: <b>&gt; \$ 1,000.00</b> |                                    |
| <b>Ronald Rubin</b><br>750 S. Hanley #40<br>St. Louis MO 63105   | <b>Republic of Tea</b>  | <b>2/6/99</b>                                   | <b>1,000.00</b>                    |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: <b>Dietician</b>                                      | Aggregate Year-to-Date: <b>&gt; \$ 1,000.00</b> |                                    |

SUBTOTAL of Receipts This Page (optional) **6,250.00**

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 6  
FOR LINE NUMBER 11a

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NAME OF COMMITTEE (in Full)

St. Louisians for Peter Government

| A. Full Name, Mailing Address and ZIP Code   | Name of Employer                     | Date (month, day, year)              | Amount of Each Receipt this Period |
|--|--------------------------------------|--------------------------------------|------------------------------------|
| Eugene Weissman<br>62 Branchiff<br>St. Louis MO 63124  | Retired                              | 2-10-99                              | 1,000.00                           |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation                           | Aggregate Year-to-Date > \$ 1,000.00 |                                    |
| B. Full Name, Mailing Address and ZIP Code   | Name of Employer                     | Date (month, day, year)              | Amount of Each Receipt this Period |
| Preston Bank<br>635 SARAWOOD LN<br>ST. LOUIS MO 63141  | Self                                 | 2-16-99                              | 1,000.00                           |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation<br>Real Estate Consultant | Aggregate Year-to-Date > \$ 1,000.00 |                                    |
| C. Full Name, Mailing Address and ZIP Code   | Name of Employer                     | Date (month, day, year)              | Amount of Each Receipt this Period |
| Mildred Berland<br>800 S. Hanley Apt 5F<br>St. Louis MO 63105  | Homemaker                            | 2-13-99                              | 1,000.00                           |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation                           | Aggregate Year-to-Date > \$ 1,000.00 |                                    |
| D. Full Name, Mailing Address and ZIP Code   | Name of Employer                     | Date (month, day, year)              | Amount of Each Receipt this Period |
| Michael Bernstein<br>1419 Rankin<br>St. Louis MO 63117   | Washington University                | 2-25-99                              | 250.00                             |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation<br>PhD student            | Aggregate Year-to-Date > \$ 250.00   |                                    |
| E. Full Name, Mailing Address and ZIP Code   | Name of Employer                     | Date (month, day, year)              | Amount of Each Receipt this Period |
| Morris Lazaroff<br>72 Meadowbrook Country Club<br>Ballwin MO 63011   | Clean Coverall                       | 2-10-99<br>6-25-99                   | 250.00<br>250.00                   |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation<br>Owner                  | 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 |
| Paul Cahn<br>449 W. Polo Dr<br>St. Louis MO 63105  | Elan-Polo Inc.                       | 2/22/99                              | 1,000.00                           |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation<br>Owner                  | Aggregate Year-to-Date > \$ 1,000.00 |                                    |
| G. Full Name, Mailing Address and ZIP Code   | Name of Employer                     | Date (month, day, year)              | Amount of Each Receipt this Period |
| Ira Gail<br>14 Woodbridge Manor<br>St. Louis MO 63141  | Obstetrics & Gynecology              | 2/10/99                              | 1,000.00                           |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation<br>Physician              | Aggregate Year-to-Date > \$ 1,000.00 |                                    |

SUBTOTAL of Receipts This Page (optional)

5,750.00

TOTAL This Period (last page this line number only)

11,250.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 6  
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NAME OF COMMITTEE (In Full)  
St. Louisians for Better Government

| A. Full Name, Mailing Address and ZIP Code   | Name of Employer                      | Date (month, day, year)              | Amount of Each Receipt This Period |
|--|---------------------------------------|--------------------------------------|------------------------------------|
| Kenneth Krantzberg<br>50 Picardy La<br>St. Louis MO 63124  | Kranson Industries                    | 2-20-99                              | 1,000.00                           |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: Management                | Aggregate Year-to-Date > \$ 1,000.00 |                                    |
| B. Full Name, Mailing Address and ZIP Code   | Name of Employer                      | Date (month, day, year)              | Amount of Each Receipt This Period |
| Louis Zakenisky<br>800 S. Hanley # 8A<br>St. Louis MO 63124  | Self                                  | 2-19-99                              | 1,000.00                           |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: Attorney                  | Aggregate Year-to-Date > \$ 1,000.00 |                                    |
| C. Full Name, Mailing Address and ZIP Code   | Name of Employer                      | Date (month, day, year)              | Amount of Each Receipt This Period |
| Milford Bohm<br>11502 New London Dr<br>St. Louis MO 63141  | Self                                  | 2-25-99                              | 1,000.00                           |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: Consultant                | Aggregate Year-to-Date > \$ 1,000.00 |                                    |
| D. Full Name, Mailing Address and ZIP Code   | Name of Employer                      | Date (month, day, year)              | Amount of Each Receipt This Period |
| Bette Gershman<br>6 Fordyce Lane<br>St. Louis MO 63124   | Self                                  | 3-1-99                               | 1,000.00                           |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: Realtor - Mortgage Banker | Aggregate Year-to-Date > \$ 1,000.00 |                                    |
| E. Full Name, Mailing Address and ZIP Code   | Name of Employer                      | Date (month, day, year)              | Amount of Each Receipt This Period |
| Bertha Feist<br>550 S. Brentwood<br>St. Louis MO 63105   | Homemaker                             | 2-27-99                              | 1,000.00                           |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation:                           | Aggregate Year-to-Date > \$ 1,000.00 |                                    |
| F. Full Name, Mailing Address and ZIP Code   | Name of Employer                      | Date (month, day, year)              | Amount of Each Receipt This Period |
| Marilyn Fox<br>7701 Forsyth<br>St. Louis MO 63105  | HomeMaker                             | 2-19-99                              | 1,000.00                           |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation:                           | Aggregate Year-to-Date > \$ 1,000.00 |                                    |
| G. Full Name, Mailing Address and ZIP Code   | Name of Employer                      | Date (month, day, year)              | Amount of Each Receipt This Period |
| IE Millstone<br>8510 Eager Rd<br>St. Louis MO 63144  | K&M Investors                         | 3-1-99                               | 1,000.00                           |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: Executive                 | Aggregate Year-to-Date > \$ 1,000.00 |                                    |

SUBTOTAL of Receipts This Page (optional) ..... 7,000.00

TOTAL This Period (last page this line number only) ..... 1

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 6

FOR LINE NUMBER 11a

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NAME OF COMMITTEE (In Full)

ST. LOUISIAN FOR BETTER GOVERNMENT

| A. Full Name, Mailing Address and ZIP Code   | Name of Employer                    | Date (month, day, year)              | Amount of Each Receipt This Period |
|--|-------------------------------------|--------------------------------------|------------------------------------|
| Jean Silber<br>10919 Prosterac Woods Lane<br>St. Louis MO 63131  | Homemaker                           | 2-19-99                              | 1,000.00                           |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation                          | Aggregate Year-to-Date > \$ 1,000.00 |                                    |
| B. Full Name, Mailing Address and ZIP Code   | Name of Employer                    | Date (month, day, year)              | Amount of Each Receipt This Period |
| Irene Karl<br>14 Thorndell Dr<br>St. Louis MO 63117  | Washington University               | 3-24-99                              | 1,000.00                           |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation<br>Bio Chemist           | Aggregate Year-to-Date > \$ 1,000.00 |                                    |
| C. Full Name, Mailing Address and ZIP Code   | Name of Employer                    | Date (month, day, year)              | Amount of Each Receipt This Period |
| Michael Litwack<br>404 Tregaron Pl<br>St. Louis MO 63131   | Retired                             | 3-15-99                              | 1,000.00                           |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation                          | Aggregate Year-to-Date > \$ 1,000.00 |                                    |
| D. Full Name, Mailing Address and ZIP Code   | Name of Employer                    | Date (month, day, year)              | Amount of Each Receipt This Period |
| Carl Lyss<br>721 S. Central<br>St. Louis MO 63105  | Internal Medicine Consultants       | 3-8-99                               | 250.00                             |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation<br>Physician             | Aggregate Year-to-Date > \$ 250.00   |                                    |
| E. Full Name, Mailing Address and ZIP Code   | Name of Employer                    | Date (month, day, year)              | Amount of Each Receipt This Period |
| Wilma Messinger<br>30 Westwood Country Club Grounds<br>St. Louis MO 63131  | Housewife                           | 4-2-99                               | 1,000.00                           |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation                          | Aggregate Year-to-Date > \$ 1,000.00 |                                    |
| F. Full Name, Mailing Address and ZIP Code   | Name of Employer                    | Date (month, day, year)              | Amount of Each Receipt This Period |
| Saul Mironitz<br>#4 Cedar Estates<br>St. Louis MO 63141  | Delmar Financial                    | 3-12-99                              | 1,000.00                           |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation<br>Chairman of the Board | Aggregate Year-to-Date > \$ 1,000.00 |                                    |
| G. Full Name, Mailing Address and ZIP Code   | Name of Employer                    | Date (month, day, year)              | Amount of Each Receipt This Period |
| Miriam Schonfeld<br>7384 Westmoreland<br>St. Louis MO 63130  | Homemaker                           | 3-15-99                              | 1,000.00                           |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation                          | Aggregate Year-to-Date > \$ 1,000.00 |                                    |

SUBTOTAL of Receipts This Page (optional)

6250.00

TOTAL This Period (last page this line number only)

10

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 5 OF 6

FOR LINE NUMBER 11a

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NAME OF COMMITTEE (In Full)

St. Louisian for Better Government

| A. Full Name, Mailing Address and ZIP Code<br>Robert Dentlow<br>1405 Rankin<br>St. Louis MO 63117                           | Name of Employer<br>Dentlow & Henry<br>Occupation<br>Attorney                               | Date (month, day, year)<br>4-19-99 | Amount of Each Receipt This Period<br>1,000.00 |
|---|---|------------------------------------|--|
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 1,000.00  |                                    |  |
| B. Full Name, Mailing Address and ZIP Code<br>Donald Meissner<br>535 East Dr<br>St. Louis MO 63137                          | Name of Employer<br>West End Nursery<br>Occupation<br>Self                                  | Date (month, day, year)<br>4-21-99 | Amount of Each Receipt This Period<br>250.00   |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 250.00  |                                    |  |
| C. Full Name, Mailing Address and ZIP Code<br>Miriam Meltzer<br>3007 W. Kent<br>Carbondale IL 62901                         | Name of Employer<br>Southern Illinois University<br>Occupation<br>Social Worker             | Date (month, day, year)<br>4-2-99  | Amount of Each Receipt This Period<br>500.00   |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 500.00  |                                    |  |
| D. Full Name, Mailing Address and ZIP Code<br>JoAnn Raskas<br>750 S Hanley<br>St. Louis MO 63105                            | Name of Employer<br>Home Water<br>Occupation  | Date (month, day, year)<br>4-15-99 | Amount of Each Receipt This Period<br>250.00   |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 250.00  |                                    |  |
| E. Full Name, Mailing Address and ZIP Code<br>Rosaling Newman<br>899 S. Meramec<br>St. Louis MO 63105                       | Name of Employer<br>Washington University<br>Medicine<br>Occupation<br>Statistical Genetics | Date (month, day, year)<br>5-4-99  | Amount of Each Receipt This Period<br>1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 1,000.00  |                                    |  |
| F. Full Name, Mailing Address and ZIP Code<br>David Roberts<br>721 Middle Pkwy<br>Clayton MO 63105                          | Name of Employer<br>Self<br>Occupation<br>Social Worker/Teacher                             | Date (month, day, year)<br>4-25-99 | Amount of Each Receipt This Period<br>1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 1,000.00  |                                    |  |
| G. Full Name, Mailing Address and ZIP Code<br>Morton Gordon<br>8124 University<br>St. Louis MO 63105                        | Name of Employer<br>Retired<br>Occupation<br>Lawyer   | Date (month, day, year)<br>6-1-99  | Amount of Each Receipt This Period<br>1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 1,000.00  |                                    |  |

SUBTOTAL of Receipts This Page (optional)

\$5,000.00

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 **6** OF **6**  
FOR LINE NUMBER **11a**

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NAME OF COMMITTEE (In Full)

**ST. LOUISIAN FOR BETTER GOVERNMENT**

| A. Full Name, Mailing Address and ZIP Code  | Name of Employer             | Date (month, day, year)              | Amount of Each Receipt This Period |
|---|------------------------------|--------------------------------------|------------------------------------|
| Robert Dolgin<br>28 Portland Pl<br>St. Louis MO 63108   | DSW Consultants              | 5-26-99                              | 1,000.00                           |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation<br>TAX CONSULTANT | Aggregate Year-to-Date > \$ 1,000.00 |                                    |
| B. Full Name, Mailing Address and ZIP Code  | Name of Employer             | Date (month, day, year)              | Amount of Each Receipt This Period |
| Ruth Siteman<br>11 Ferryhill Lane<br>St. Louis MO 63131   | Volunteer                    | 5-22-99                              | 1,000.00                           |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation                   | Aggregate Year-to-Date > \$ 1,000.00 |                                    |
| 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<br><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<br><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<br><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<br><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<br><input type="checkbox"/> Other (specify): | Occupation                   | Aggregate Year-to-Date > \$          |                                    |

SUBTOTAL of Receipts This Page (optional)

2,000.00

TOTAL This Period (last page this line number only)

32,250.00



**SCHEDULE A**

**ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (in Full)  
**ST. LOUISIANS FOR BETTER GOVERNMENT**

| A. Full Name, Mailing Address and ZIP Code   | Name of Employer                  | Date (month, day, year)     | Amount of Each Receipt This Period |
|--|-----------------------------------|-----------------------------|------------------------------------|
| Magna Bank<br>1401 S. Brentwood<br>St. Louis Mo 63144  |                                   | 1-15-99                     | 1.58                               |
|  |                                   | 2-15-99                     | 1.34                               |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify): Interest Received | Occupation                        | 3-17-99                     | 10.69                              |
|  | Aggregate Year-to-Date > \$ 48.88 | 4-17-99                     | 11.19                              |
|  |                                   | 5-17-99                     | 11.58                              |
|  |                                   | 6-17-99                     | 17.50                              |
| B. Full Name, Mailing Address and ZIP Code   |                                   |                             |                                    |
| Name of Employer   |                                   | Date (month, day, year)     | Amount of Each Receipt This Period |
| Occupation   |                                   |                             |                                    |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                              |                                   | 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 |
| Occupation   |                                   |                             |                                    |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                              |                                   | 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 |
| Occupation   |                                   |                             |                                    |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                              |                                   | 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 |
| Occupation   |                                   |                             |                                    |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                              |                                   | 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 |
| Occupation   |                                   |                             |                                    |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                              |                                   | 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 |
| Occupation   |                                   |                             |                                    |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                              |                                   | Aggregate Year-to-Date > \$ |                                    |

|   |       |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)           | 48.88 |
| TOTAL This Period (last page this line number only) | 48.88 |

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1  
FOR LINE NUMBER 30

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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 |
|---|---|---------------------------------------|---|
| Ruth Reiman<br>1432 Woodland<br>St. Louis MO 63117        | Salary<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify)        | 1-11-99<br>3-8-99<br>4-5-99<br>6-2-99 | 263.19<br>249.34<br>197.00<br>161.23    |
| Ruth Reiman<br>1432 Woodland<br>St. Louis MO 63117        | Supplies<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify)      | 1-11-99<br>3-8-99<br>3-1-99<br>6-2-99 | 76.25<br>18.73<br>24.91<br>33.67        |
| Missouri Dept of Revenue<br>Jefferson City MO 65108       | State Tax<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                | 1-28-99                               | 18.00                                   |
| Internal Revenue Service<br>Kansas City MO 64999          | Fed Unemployment<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)         | 1-28-99                               | 43.18                                   |
| Union Plankers<br>1401 S. Brentwood<br>St. Louis MO 63144 | FICA Federal Withholding<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | 1-28-99<br>4-25-99                    | 43.61<br>41.31                          |
| Ruth Reiman<br>1432 Woodland<br>St. Louis MO 63117        | Postage<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                  | 3-8-99                                | 7.50                                    |
|   |   |                                       |   |
|   |   |                                       |   |
|   |   |                                       |   |

SUBTOTAL of Disbursements This Page (optional) ..... 472.99

TOTAL This Period (last page this line number only) ..... 1,172.99

**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<br><b>MISSOURI DEPARTMENT OF REVENUE<br/>JEFFERSON CITY, MO 65108</b>               | 17.00                                     | 1.00                        | 48.00               | -0-   |
| Nature of Debt (Purpose):<br><b>STATE WITHHOLDING</b>  |   |                             |                     |   |
| B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor<br><b>INTERNAL REVENUE SERVICE<br/>KANSAS CITY, MO 64999</b>                        | 43.10                                     | .08<br>7.50                 | 43.18               | 7.50  |
| Nature of Debt (Purpose):<br><b>FEDERAL UNEMPLOYMENT TAX</b>   |   |                             |                     |   |
| C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor<br><b>PASTERNAK &amp; CO.<br/>7710 CARONDELET SUITE 216<br/>ST. LOUIS, MO 63105</b> | 98.37                                     | 3.20                        |                     | 101.57                                      |
| Nature of Debt (Purpose):<br><b>POSTAGE</b>  |   |                             |                     |   |
| D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor<br><b>INTERNAL REVENUE SERVICE<br/>KANSAS CITY, MO 64999</b>                        |   | 58.52                       |                     | 58.52                                       |
| Nature of Debt (Purpose):<br><b>SOCIAL SECURITY &amp; MEDICARE</b>   |   |                             |                     |   |
| E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor   |   |                             |                     |   |
| Nature of Debt (Purpose):  |   |                             |                     |   |
| F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor   |   |                             |                     |   |
| Nature of Debt (Purpose):  |   |                             |                     |   |
| 1) SUBTOTALS This Period This Page (optional)  |   |                             |                     |   |
| 2) TOTALS This Period (last page in this line only)  |   |                             |                     | 167.59                                      |
| 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)  |   |                             |                     | 167.59                                      |

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<br>7/29/99                         |
| <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<br>_____<br>and/or Date of Receipt |
| <input type="checkbox"/> Electronic Filing  |   |

50  
PREPARER

8/2/99  
DATE PREPARED