

48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

1. NAME OF COMMITTEE IN FULL Russ Carnahan for Congress			
ADDRESS (number and street) PO Box 190033			
CITY, STATE, and ZIP CODE St Louis MO 63119			
2. NAME OF CANDIDATE Russ Carnahan	3. OFFICE SOUGHT (State and District) House MO 03		4. FEC IDENTIFICATION NUMBER C00493684
5. IS THIS AN AMENDMENT? <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON ____ / ____ / ____			
A. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Matthew Barzun Barzun Family Office, 333 E Main S Ste 402 Louisville KY 40202		Name of Employer none Transaction ID : C9054893A Occupation not employed	Date (month, day, year) 07/31/2012 Amount 2500.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE			
David V. Capes 624 S Meramec Ave Clayton MO 63105-2535		Name of Employer Capes Sokol Goodman & Sarachan PC Transaction ID : C9054907A Occupation Attorney	Date (month, day, year) 07/31/2012 Amount 1500.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Mr. Amos B. Harris 906 Olive Street Suite 1212 Saint Louis MO 63101		Name of Employer Brady Capitol Transaction ID : C9054898A Occupation President	Date (month, day, year) 07/31/2012 Amount 1000.00
D. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Jennifer Laszlo-Mizrahi 9800 Aenel Farm Dr. Potomac MD 20854		Name of Employer Self Transaction ID : C9056258A Occupation Self	Date (month, day, year) 07/31/2012 Amount 1000.00
E. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Brian McCallister 4522 N Mulberry Ct. Kansas City MO 64116		Name of Employer The McCallister Law Firm Transaction ID : C9054896A Occupation Attorney	Date (month, day, year) 07/31/2012 Amount 1000.00
SIGNATURE (optional) John Truman		DATE 08/01/2012	For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100
<i>[Electronically Filed]</i>			

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Any information copied from reports and statements filed under the Federal Election Campaign Act 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.

FEC FORM 6
(Revised 07/2011)

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE Mark McCloskey 1 Portland Pl. Saint Louis MO 63108	Name of Employer McCloskey, P.C. Transaction ID : C9056850 Occupation Attorney	Date (month, day, year) 07/31/2012	Amount 1000.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE Mr. C. H. H. Parsons Jr. PO Box 428 7 N. Elm Dexter MO 63841-0428	Name of Employer Parsons & Wilson, P.C. Transaction ID : C9056863 Occupation Attorney	Date (month, day, year) 07/31/2012	Amount 1500.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE Mr. John S. Sandberg 4554 Pershing Place Saint Louis MO 63108	Name of Employer retired Transaction ID : C9056892 Occupation Retired	Date (month, day, year) 07/31/2012	Amount 1595.64
D. FULL NAME, MAILING ADDRESS AND ZIP CODE The Koman Group LLC #6 CityPlace Dr Suite 430 Saint Louis MO 63141	Name of Employer The Koman Group Transaction ID : C9057102 Occupation VP	Date (month, day, year) 07/31/2012	Amount 2500.00
E. FULL NAME, MAILING ADDRESS AND ZIP CODE Mr. Jan C. Vest 281 Fountain Dr Glen Carbon IL 62034-1389	Name of Employer Signature Health Services Transaction ID : C9054909A Occupation CEO	Date (month, day, year) 07/31/2012	Amount 2000.00

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
Ms. Celeste Vossmeier 4554 Pershing Pl Saint Louis MO 63108-1906	Thompson Coburn LLP Transaction ID : C9056893 Occupation Attorney	07/31/2012	1500.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE WINDPAC 1501 M Street, NW, 10th Floor Washington DC 20005	Name of Employer Transaction ID : C9054832 Occupation	07/31/2012	1000.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount