

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2000 OCT 17 A 2:35

USE FEC MAILING LABEL
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) St. Louisians For Better Government		2. FEC IDENTIFICATION NUMBER C-00148155
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 40 Bernard Pasternak 90 S. Skinker #100		
CITY, STATE and ZIP CODE St. Louis, MO 63105		
3. <input type="checkbox"/> 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 12/93, this committee has satisfied criteria of multi-candidate status prior to 11/94*

(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 This Period	COLUMN B Calendar Year-to-Date
5. Covering Period July 1, 2000 through Sept. 30, 2000		
6. (a) Cash on Hand January 1, 19 2000		\$74,007.71
(b) Cash on Hand at Beginning of Reporting Period	\$ 37,398.12	
(c) Total Receipts (from Line 19)	\$ 3,721,044	\$ 140,992.08
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 4,119,167	\$ 141,999.79
7. Total Disbursements (from Line 30)	\$ 442,022	\$ 14,322.65
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 40,677.14	\$ 127,677.14
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule G and/or Schedule D)	\$	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 205.43	

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
10-14-00

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 3X**

(revised 1/1/91)

NAME OF COMMITTEE		REPORT COVERING PERIOD		
St. Louisians for Better Government		FROM 7/1/00	TO 9/30/00	
		COLUMN A	COLUMN B	
		Total This Period	Calendar Year	
I. Receipts				
11.	Contributions (other than loans) From:			
a.	Individuals/Persons Other Than Political Committees			
i.	Itemized (use Schedule A)	3,250.00	35,000.00	11(a)(1)
ii.	Unitemized			11(a)(2)
iii.	Total (add i and ii) >	3,250.00	35,000.00	11(a)(3)
b.	Political Party Committees			11(b)
c.	Other Political Committees (such as PADs)			11(c)
d.	Total Contributions (add a ii, b and c) >	3,250.00	35,000.00	11(d)
12.	Transfers From Affiliated/Other Party Committees			12
13.	All Loans Received			13
14.	Loan Repayments Received			14
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees		5,000.00	16
17.	Other Federal Receipts (Dividends, Interest, etc.)	3,771.04	992.08	17
18.	Transfers from Nonfederal Account for Joint Activity			18
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	3,771.04	40,992.08	19
20.	Total Federal Receipts (subtract line 16 from line 19) >	3,771.04	40,992.08	20
II. Disbursements				
21.	Operating Expenditures:			
a.	Shared Federal/Non-Federal Activity (from Schedule H4)			
i.	Federal Share			21(a)(1)
ii.	Non-Federal Share	442.02	11,822.65	21(a)(2)
b.	Other Federal Operating Expenditures			21(b)
c.	Total Operating Expenditures (add a i, ii, and b) >	442.02	11,822.65	21(c)
22.	Transfers to Affiliated/Other Party Committees			22
23.	Contributions to Federal Candidates/Committees and Other Political Committees		12,500.00	23
24.	Independent Expenditures (use Schedule E)			24
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26.	Loan Repayments Made			26
27.	Loans Made			27
28.	Refunds of Contributions To:			
a.	Individuals/Persons Other Than Political Committees			28(a)
b.	Political Party Committees			28(b)
c.	Other Political Committees (such as PADs)			28(c)
d.	Total Contribution Refunds (add a, b and c) >			28(d)
29.	Other Disbursements			29
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	442.02	14,322.65	30
31.	Total Federal Disbursements (subtract line 21 a i from line 30) >	442.02	14,322.65	31
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans) (from line 11d)	3,250.00	35,000.00	32
33.	Total Contribution Refunds (from line 28d)			33
34.	Net Contributions (other than loans) (subtract line 33 from 32)			34
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	442.02	11,822.65	35
36.	Offsets to Operating Expenditures (from line 15)			36
37.	Net Operating Expenditures (subtract line 36 from 35) >	442.02	11,822.65	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1

FOR LINE NUMBER 12

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. Louisans for Better Government

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Morris Lazaro 72 Meadowbrook Country Club Ballwin, MO 63011	Clean Overall Occupation: Owner	7/21/00	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 750.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bruce White 5 University Lane St. Louis, MO 63105	Self Occupation: Physician	8/14/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		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
Joseph Rothberg 750 S. Hanley Rd. St. Louis, MO 63105	Metropolitan Distributing Co. Occupation: Businessman	9/25/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		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
David Roberts 721 Middle Polo St. Louis, MO 63105	SELF Occupation: Social Worker/Teacher	9/23/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		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
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <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
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <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
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)	3,250.00
TOTAL This Period (last page this line number only)	3,250.00

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. Louisans for Better Government

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Union Planters Bank 1401 S. Brentwood St. Louis, MO 63144		7/19/00 8/18/00 9/19/00	9.32 8.14 8.66
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 107.98	
B. Full Name, Mailing Address and ZIP Code Southwest Bank 2301 S. Kingshighway Blvd St. Louis, MO 63110		7/31/00 8/21/00 9/29/00	134.85 147.88 142.19
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 324.20	
C. Full Name, Mailing Address and ZIP Code			
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			
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			
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			
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			
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)

32471.04

TOTAL This Period (last page this line number only)

32471.04

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 committee.

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
<i>Ruth Reiman 973 N. Hanley Rd. St. Louis, MO 63105</i>	<i>Salary</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>7/10/00</i>	<i>138.52</i>
<i>Ruth Reiman 973 N. Hanley Rd. St. Louis, MO 63105</i>	<i>Supplies & Postage</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>7/10/00</i>	<i>169.20</i>
<i>U.S. Treasury Kansas City, MO 64999</i>	<i>Federal Withholding and FICA</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>7/23/00</i>	<i>133.85</i>
<i>Union Planters 1401 S. Brentwood St. Louis, MO 63144</i>	<i>Bank Charges</i> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>7/19/00 8/18/00</i>	<i>.30 .15</i>
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	<i>442.02</i>
TOTAL This Period (last page this line number only)	<i>442.02</i>

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
<i>St. Louisans For Better Government</i>				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor <i>Internal Revenue Service Kansas City, MO 64999</i>	<i>4.74</i>	<i>1.20</i>		<i>5.94</i>
Nature of Debt (Purpose): <i>Fed. Unemployment Tax</i>				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor <i>Pastunak & Co. 7710 Carondelet St. Louis, MO 63105</i>	<i>113.12</i>	<i>3.42</i>		<i>116.54</i>
Nature of Debt (Purpose): <i>Postage</i>				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor <i>Internal Revenue Service Kansas City, MO 64999</i>	<i>68.85</i>	<i>22.95</i>	<i>68.85</i>	<i>22.95</i>
Nature of Debt (Purpose): <i>Social Security & Medicare</i>				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor <i>Missouri Dept. of Revenue Jefferson City, MO 65108</i>	<i>60.00</i>			<i>60.00</i>
Nature of Debt (Purpose): <i>State Withholding</i>				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor <i>RUTH REIMAN 975 N HANLEY ROAD ST. LOUIS, MO 63130</i>	<i>138.52</i>		<i>138.52</i>	
Nature of Debt (Purpose): <i>SALARY</i>				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor <i>RUTH REIMAN 975 N HANLEY ROAD ST. LOUIS, MO 63130</i>	<i>169.20</i>		<i>169.20</i>	
Nature of Debt (Purpose): <i>REIMBURSE EXPENSES</i>				
1) SUBTOTALS This Period This Page (optional)				<i>205.43</i>
2) TOTALS This Period (last page in this line only)				<i>205.43</i>
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)				<i>205.43</i>

**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 (R/C) 10/14/00
<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
<input type="checkbox"/> Electronic Filing	
CR	10/17/00
PREPARER	DATE PREPARED