RECEIVED
FEC MAIL
OPERATIONS CENTER

2005 OCT 26 A 9:28

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

1. NAME OF COMMITTEE (in full) Missouri Democratic State Committee	
ADDRESS __ Check if different than previously reported P.O. Box 719	2. FEC Identification Number C0013558
CITY, STATE and ZIP Jefferson City, MO 55109	3. ___ This committee has qualified as a multicandidate committee. (See FEC FORM 1M)

4. TYPE OF REPORT

(a) ___ April 15th Quarterly Report

___ July 15th Quarterly Report

___ October 15th Quarterly Report

___ January 31st Year End Report

___ July 31 Mid Year Report (Non-election Year Only)

___ Termination Report

Monthly Report Due On:

__ February 20	__ June 20	__ Oct. 20
__ March 20	__ July 20	__ Nov. 20
__ April 20	__ August 20	__ Dec. 20
__ May 20	__ Sept. 20	__ Jan. 31

_X_ Twelfth day report preceding __Primary__ (Type of Election) election on __08/08/00__ in the State of __Missour

___ Thirtieth day report following the _____ Election on _____ in the State of _____

(b) Is This Report an Amendment? _X_ Yes ___ No

SUMMARY 5. Covering Period 07/01/00 through 07/19/00	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2000		48,418.59
(b) Cash on Hand at Beginning of Reporting Period	392,030.68	
(c) Total Receipts (from Line 19)	852,747.00	2,817,213.52
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1,244,777.68	2,865,632.11
7. Total Disbursements (from Line 30)	1,038,538.85	2,659,393.28
8. Cash on Hand at Close of Reporting Period (Subtract Line 7 from Line 6(d))	206,238.83	206,238.83
9. Debts and Obligations Owed **TO** the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	For Further Information Contact:
10. Debts and Obligations Owed **BY** the Committee (Itemize all on Schedule C and/or Schedule D)	7,887.93	**Federal Election Commission**
I certify that I have examined this Report and to the best of my knowledge it is true, correct and complete.		999 E Street, NW Washington, DC 20463
Type or Print Name of Treasurer		Toll Free 800-424-9530 Local 202-694-1100
Signature of Treasurer		Date

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

FEC FORM 3X

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

Name of Committee (in full): Missouri Democratic State Committee

Report Covering the Period: From: 07/01/00 To: 07/19/00

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year	
11. Contributions (other than loans) From:			
a. Individuals/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	24,000.00	472,318.00	11a(i)
ii. Unitemized	4,175.00	48,449.61	11(a)(ii)
iii. Total (add i and ii)>	28,175.00	520,767.61	11(a)(iii)
b. Political Party Committees	1,325.00	14,545.00	11(b)
c. Other Political Committee (such as PACs)	5,000.00	58,275.00	11(c)
d. Total Contributions (add a iii, b and c)>	34,500.00	593,587.61	11(d)
12. Transfers from Affiliated/Other Party Committees	305,783.00	692,290.56	12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets to Operating Expenditures (Refunds, Rebates, etc.)	4,000.00	4,684.87	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	20,800.00	17
18. Transfers from Nonfederal Account for Joint Activity	508,464.00	1,505,850.48	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18)>	852,747.00	2,817,213.52	19
20. Total Federal Receipts (subtract line 18 from line 19)>	344,283.00	1,311,363.04	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	309,761.66	770,678.48	21(a)(i)
ii. Non-Federal Share	722,777.20	1,798,249.80	21(a)(ii)
b. Other Federal Operating Expenditures	0.00	0.00	21(b)
c. Total Operating Expenditures (add a i, a ii, and b)>	1,032,538.85	2,568,928.28	21(c)
22. Transfers to Affiliated/Other Party Committees	6,000.00	66,500.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	0.00	10,000.00	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (Use Schedule F)	0.00	0.00	25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individuals/Persons Other than Political Committees	0.00	1,965.00	28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c)>	0.00	1,965.00	28(d)
29. Other Disbursements	0.00	12,000.00	29
30. Total Disbursements (add 21c, 22,23,24,25,26,27,28d, and 29)>	1,038,538.85	2,659,393.28	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30)>	315,761.66	861,143.48	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)	34,500.00	593,587.61	32
33. Total Contribution Refunds (from line 28d)	0.00	1,965.00	33
34. Net Contributions (other than loans) (subtract line 33 from 32)	34,500.00	591,622.61	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b)>	309,761.66	770,678.48	35
36. Offsets to Operating Expenditures (from line 15)	4,000.00	4,684.87	36
37. Net Operating Expenditures (subtract line 36 from 35)>	305,761.66	765,993.61	37

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

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)

Missouri Democratic State Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
HBC Properties, LLC P.O. Box 275 Macon, MO 63552		07/11/00	10,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $ 10,000.00		

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Glover 1621 Baltimore Kansas City, MO 64108	Self-employed	07/07/00	1,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Attorney		
	Aggregate Year-to-Date > $ 6,000.00		

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $		

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

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

FE9AN103PDF

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 2

FOR LINE NUMBER 22

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)

Missouri Democratic State Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Missouri Democratic State Committee-Nonfederal Acct P.O. Box 719 Jefferson City, MO 55109	Transfer Nonfederal Ctb-Doug Morgan Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/05/00	2,000.00
B. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Missouri Democratic State Committee-Nonfederal Acct P.O. Box 719 Jefferson City, MO 55109	Transfer Nonfederal Ctb-Laurence Harris Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/05/00	5,000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Missouri Democratic State Committee-Nonfederal Acct P.O. Box 719 Jefferson City, MO 55109	Transfer Nonfederal Ctb-Harold Snyder Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/05/00	50,000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Missouri Democratic State Committee-Nonfederal Acct P.O. Box 719 Jefferson City, MO 55109	Transfer Nonfederal Ctb-Arthur Buskin Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/05/00	15,000.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Missouri Democratic State Committee-Nonfederal Acct P.O. Box 719 Jefferson City, MO 55109	Transfer Nonfederal Ctb-Thomas Eagleton Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/05/00	2,000.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Missouri Democratic State Committee-Nonfederal Acct P.O. Box 719 Jefferson City, MO 55109	Transfer Nonfederal Ctb-Max Salas Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/05/00	10,000.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Missouri Democratic State Committee-Nonfederal Acct P.O. Box 719 Jefferson City, MO 55109	Transfer Nonfederal Ctb-Stephen Bradford Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/05/00	6,000.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Missouri Democratic State Committee-Nonfederal Acct P.O. Box 719 Jefferson City, MO 55109	Transfer Nonfederal Ctb-Gerald Jones Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/05/00	1,000.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Missouri Democratic State Committee-Nonfederal Acct P.O. Box 719 Jefferson City, MO 55109	Transfer Nonfederal Ctb-Kenneth McClain Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/05/00	2,000.00

SUBTOTAL of DisbursementsThis Page (optional) .....

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

FE9AN103PDF

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 2 OF 2

FOR LINE NUMBER 22

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)

Missouri Democratic State Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Missouri Democratic State Committee-Nonfederal Acct P.O. Box 719 Jefferson City, MO 55109	Transfer Nonfederal Ctb-IBEW-COPE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/05/00	5,000.00
B. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Missouri Democratic State Committee-Nonfederal Acct P.O. Box 719 Jefferson City, MO 55109	Transfer Nonfederal Ctb-James Glover Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/05/00	1,000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement** Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of DisbursementsThis Page (optional) .....

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

FE9AN103PDF

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

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

☑ Hand Delivered	Date of Receipt 10/26/05
☐ USPS First Class Mail	Postmarked
☐ USPS Registered/Certified	Postmarked (R/C)
☐ USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label	☐
☐ USPS Express Mail	Postmarked
☐ Postmark Illegible	
☐ No Postmark	
☐ Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery	☐
☐ Received from House Records & Registration Office	Date of Receipt
☐ Received from Senate Public Records Office	Date of Receipt
☐ Received from Electronic Filing Office	Date of Receipt
☐ Other (Specify):	Date of Receipt or Postmarked
JAH PREPARER	Received from OGC on 10/28/05 — 10/28/05 DATE PREPARED

(3/2005)

10050295679