

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (In full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines

HEALTH CARE LEADERSHIP COMMITTEE

ADDRESS (number and street)

Z21 EAST CAPITOL AVENUE

Check if different than previously reported. (ACC)

JEFFERSON CITY

MO

65101

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00323576

3. IS THIS REPORT

X

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

X October 15 Quarterly Report (Q3)

January 31 Quarterly Report (YE)

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

Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2)

May 20 (M5)

Aug 20 (M8)

Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3)

Jun 20 (M6)

Sep 20 (M9)

Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4)

Jul 20 (M7)

Oct 20 (M10)

Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

in the State of

(d) 30-Day Post-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

07

01

2005

through

09

30

2005

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

Shanon M. Hawk

Signature of Treasurer

Electronically Filed by Shanon M. Hawk

Date

10

06

2005

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

Office Use Only

FEC FORM 3X
(Rev. 02/2003)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
HEALTH CARE LEADERSHIP COMMITTEE

Report Covering the Period: From: ^M07 ^D01 ^Y2005 To: ^M09 ^D30 ^Y2005

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 ^Y 2005		700.28
(b) Cash on Hand at Beginning of Reporting Period	2324.11	
(c) Total Receipts (from Line 19)	24350.00	26275.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	26674.11	26975.28
<hr/>		
7. Total Disbursements (from Line 31)	4320.19	4621.36
<hr/>		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	22353.92	22353.92
<hr/>		
9. Debts and Obligations owed TO the committee (itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

HEALTH CARE LEADERSHIP COMMITTEE

Report Covering the Period: From: ^M07 ⁻01 ⁻2005 To: ^M09 ⁻30 ⁻2005

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	24350.00	24350.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))	24350.00	24350.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	24350.00	24350.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	1925.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b))	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	24350.00	26275.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	24350.00	26275.00

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	250.00	551.17
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	250.00	551.17
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1250.00	1250.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ▶	0.00	0.00
29. Other Disbursements.....	2820.19	2820.19
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share.....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds.....	0.00	0.00
(c) Total Federal Election ActMty (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	4320.19	4621.36
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 31).....	4320.19	4621.36

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	24350.00	24350.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	24350.00	24350.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	250.00	551.17
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	1925.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	250.00	-1373.83

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 6 / 32

(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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)
HEALTH CARE LEADERSHIP COMMITTEE

Full Name (Last, First, Middle Initial) A. John D. Antes		Date of Receipt M / D / Y 09 / 26 / 2005
Mailing Address 181 D8 Applerock Drive		Transaction ID: SA11A1.4574
City O'Fallon	State MO	Zip Code 63366
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. David Apington		Date of Receipt M / D / Y 09 / 30 / 2005
Mailing Address 7441 York Drive		Transaction ID: SA11A1.4598
City Clayton	State MO	Zip Code 63105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer BJC HealthCare	Occupation Associate General Counsel	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Ricky L. Batchelor		Date of Receipt M / D / Y 09 / 30 / 2005
Mailing Address 115 East 4th Street		Transaction ID: SA11A1.4603
City Flora	State IL	Zip Code 62839
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	1250.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 32

(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HEALTH CARE LEADERSHIP COMMITTEE

Full Name (Last, First, Middle Initial) A. Kevin Bayless		Date of Receipt M / D / Y 09 / 30 / 2005
Mailing Address 4083 Magnolia Avenue		Transaction ID: SA11A1.4597
City Saint Louis	State MO	Zip Code 63110
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

Full Name (Last, First, Middle Initial) B. Lee Alan Bernstein		Date of Receipt M / D / Y 09 / 08 / 2005
Mailing Address 395 Country Glen		Transaction ID: SA11A1.4495
City St. Louis	State MO	Zip Code 63141-6636
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Velinda J. Block		Date of Receipt M / D / Y 09 / 22 / 2005
Mailing Address 849 Castle Pines Drive		Transaction ID: SA11A1.4558
City Ballwin	State MO	Zip Code 63021-4458
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 350.00
Name of Employer St. Louis Children's Hospital	Occupation Vice President	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional)	▶	700.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 8 / 32

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
HEALTH CARE LEADERSHIP COMMITTEE

Full Name (Last, First, Middle Initial) A. David A. Brasch		Date of Receipt M / D / Y 09 / 30 / 2005
Mailing Address 9164 North State Route 159		Transaction ID: SA11A1.4598
City Dorsey	State IL	Zip Code 62021
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 50.00	

Full Name (Last, First, Middle Initial) B. Gregory K. Bratler		Date of Receipt M / D / Y 09 / 30 / 2005
Mailing Address 211 Selma		Transaction ID: SA11A1.4608
City Webster Groves	State MO	Zip Code 63113
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

Full Name (Last, First, Middle Initial) C. Ann Hunter Bruns		Date of Receipt M / D / Y 09 / 30 / 2005
Mailing Address 237 Greenburn Drive		Transaction ID: SA11A1.4609
City St. Charles	State MO	Zip Code 63304
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	indiv. contributions
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 9 / 32

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
HEALTH CARE LEADERSHIP COMMITTEE

Full Name (Last, First, Middle Initial) A. Robert Buer		Date of Receipt M / D / Y 09 / 14 / 2005
Mailing Address 17 Oak Tree Drive		Transaction ID: SA11A1.4512
City St. Louis	State MO	Zip Code 63119
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

Full Name (Last, First, Middle Initial) B. Robert Cannon		Date of Receipt M / D / Y 09 / 08 / 2005
Mailing Address 4 Broadview Farm RD		Transaction ID: SA11A1.4491
City St. Louis	State MO	Zip Code 63141
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer BJC HealthCare	Occupation VP, Capital Asset Management	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Charles E. Garston		Date of Receipt M / D / Y 09 / 14 / 2005
Mailing Address 282 Maple Ridge Drive		Transaction ID: SA11A1.4528
City Farmington	State MO	Zip Code 63640
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 25.00	

SUBTOTAL of Receipts This Page (optional)	1125.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 32

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
HEALTH CARE LEADERSHIP COMMITTEE

Full Name (Last, First, Middle Initial) A. Ruth N. Castellano		Date of Receipt MM / DD / YYYY 09 / 30 / 2005
Mailing Address 15040 Claymont Estates Drive		Transaction ID: SA11A1.4610
City Chesterfield	State MO	Zip Code 63017-7732
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

Full Name (Last, First, Middle Initial) B. Philip E. Cavallaro		Date of Receipt MM / DD / YYYY 09 / 08 / 2005
Mailing Address 115 Fritz Lane		Transaction ID: SA11A1.4503
City Staunton	State IL	Zip Code 62088
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 50.00	

Full Name (Last, First, Middle Initial) C. Richard Conklin		Date of Receipt MM / DD / YYYY 09 / 14 / 2005
Mailing Address 4753 Quail Run Road		Transaction ID: SA11A1.4524
City Farmington	State MO	Zip Code 63640
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	650.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HEALTH CARE LEADERSHIP COMMITTEE

Full Name (Last, First, Middle Initial) A. Carol L. Coulter		Date of Receipt M / D / Y 09 / 14 / 2005
Mailing Address 527 South Spruce Street		Transaction ID: SA11A1.4535
City	State	Zip Code
Bonne Terre	MO	63628
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 25.00	

Full Name (Last, First, Middle Initial) B. Kimberly A. Crosby		Date of Receipt M / D / Y 09 / 08 / 2005
Mailing Address 4922 Ferris Court		Transaction ID: SA11A1.4516
City	State	Zip Code
Imperial	MO	63052
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

Full Name (Last, First, Middle Initial) C. Frank V. Danzo		Date of Receipt M / D / Y 09 / 14 / 2005
Mailing Address 2 Wilson Ridge Court		Transaction ID: SA11A1.4515
City	State	Zip Code
Chesterfield	MO	63005
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

SUBTOTAL of Receipts This Page (optional)	▶	225.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 32

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
HEALTH CARE LEADERSHIP COMMITTEE

Full Name (Last, First, Middle Initial) A. Crystal N. Dryden		Date of Receipt M / D / Y 09 / 22 / 2005
Mailing Address 19 Statesmen		Transaction ID: SA11A1.4549
City	State	Zip Code
O'Fallon	MO	63366
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

Full Name (Last, First, Middle Initial) B. John Paul Dubinsky		Date of Receipt M / D / Y 09 / 14 / 2005
Mailing Address 737D Westmoreland Drive		Transaction ID: SA11A1.4523
City	State	Zip Code
St. Louis	MO	63130-4240
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Patrick Dupuis		Date of Receipt M / D / Y 09 / 14 / 2005
Mailing Address 1400 Greenway		Transaction ID: SA11A1.4506
City	State	Zip Code
Elm Grove	WI	53122
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional)	3100.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HEALTH CARE LEADERSHIP COMMITTEE

Full Name (Last, First, Middle Initial) A. Ronald G. Evers		Date of Receipt M / D / Y 09 / 30 / 2005
Mailing Address 808 North Taylor Avenue		Transaction ID: SA11A1.4611
City Kirkwood	State MO	Zip Code 63122
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. June Foster		Date of Receipt M / D / Y 09 / 30 / 2005
Mailing Address 8225 Pershing		Transaction ID: SA11A1.4612
City St. Louis	State MO	Zip Code 63120
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. James G. Gleih		Date of Receipt M / D / Y 09 / 14 / 2005
Mailing Address 4988 Chapel Hill Drive		Transaction ID: SA11A1.4518
City St. Louis	State MO	Zip Code 63128-2472
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

SUBTOTAL of Receipts This Page (optional)	▶	1400.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
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FOR LINE NUMBER: PAGE 14 / 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HEALTH CARE LEADERSHIP COMMITTEE

Full Name (Last, First, Middle Initial) A. James Gorman		Date of Receipt M / D / Y 09 / 30 / 2005
Mailing Address 52 Wingfield		Transaction ID: SA11A1.4583
City	State	Zip Code
St. Louis	MO	63122
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Health & Assoc.	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Sheri S. Graham		Date of Receipt M / D / Y 09 / 14 / 2005
Mailing Address 7956 Coffman Road		Transaction ID: SA11A1.4588
City	State	Zip Code
Farmington	MO	63640
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 25.00	

Full Name (Last, First, Middle Initial) C. James L. Gray, III		Date of Receipt M / D / Y 09 / 22 / 2005
Mailing Address 2819 Briar Valley Court		Transaction ID: SA11A1.4566
City	State	Zip Code
St. Louis	MO	63122-5341
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

SUBTOTAL of Receipts This Page (optional)	625.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 15 / 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HEALTH CARE LEADERSHIP COMMITTEE

Full Name (Last, First, Middle Initial) A. Stephen Hadzima		Date of Receipt MM / DD / YYYY 09 / 08 / 2005
Mailing Address 1115 Highland Point Drive		Transaction ID: SA11A1.4489
City	State	Zip Code
St. Louis	MO	63131
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Thomas G. Hal		Date of Receipt MM / DD / YYYY 09 / 22 / 2005
Mailing Address 1839 Lone Trail Lane		Transaction ID: SA11A1.4563
City	State	Zip Code
Chesterfield	MO	63017
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

Full Name (Last, First, Middle Initial) C. Bruce E. Hight		Date of Receipt MM / DD / YYYY 09 / 14 / 2005
Mailing Address 4452 Hwy EE		Transaction ID: SA11A1.4531
City	State	Zip Code
Farmington	MO	63640
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 25.00	

SUBTOTAL of Receipts This Page (optional)	625.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 16 / 32

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
HEALTH CARE LEADERSHIP COMMITTEE

Full Name (Last, First, Middle Initial) A. Judith A. Johnston		Date of Receipt M / D / Y 09 / 14 / 2005	
Mailing Address 215 Whitehurst Manor Court		Transaction ID: SA11A1.4510	
City St. Charles	State MO	Zip Code 63304	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		indiv. contribution	
Name of Employer	Occupation		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 25.00		

Full Name (Last, First, Middle Initial) B. Thomas Karl		Date of Receipt M / D / Y 09 / 14 / 2005	
Mailing Address 501 Smith Street		Transaction ID: SA11A1.4532	
City Farmington	State MO	Zip Code 63640	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		indiv. contribution	
Name of Employer	Occupation		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 25.00		

Full Name (Last, First, Middle Initial) C. Kimberly A. Klean		Date of Receipt M / D / Y 09 / 30 / 2005	
Mailing Address 6411 Winona Avenue		Transaction ID: SA11A1.4602	
City St. Louis	State MO	Zip Code 63109-2128	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		indiv. contribution	
Name of Employer	Occupation		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 50.00		

SUBTOTAL of Receipts This Page (optional)	▶	100.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

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(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
HEALTH CARE LEADERSHIP COMMITTEE

Full Name (Last, First, Middle Initial) A. Nancy A. Konicany		Date of Receipt M / D / Y 09 / 14 / 2005
Mailing Address 5771 Hoffman Ford Court		Transaction ID: SA11A1.4511
City St. Charles	State MO	Zip Code 63304
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

Full Name (Last, First, Middle Initial) B. Diane M. Kovac		Date of Receipt M / D / Y 09 / 22 / 2005
Mailing Address 855D Delor Street		Transaction ID: SA11A1.4557
City St. Louis	State MO	Zip Code 63109
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

Full Name (Last, First, Middle Initial) C. Gary R. LeBlance		Date of Receipt M / D / Y 09 / 22 / 2005
Mailing Address 1129 Greystoke Place		Transaction ID: SA11A1.4559
City Belleville	State IL	Zip Code 62228
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	450.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HEALTH CARE LEADERSHIP COMMITTEE

Full Name (Last, First, Middle Initial) A. Bruce Lane		Date of Receipt M / D / Y Y Y Y 09 / 26 / 2005
Mailing Address 834D Clayton Road #106-E		Transaction ID: SA11A1.4575
City St. Louis	State MO	Zip Code 63117
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

Full Name (Last, First, Middle Initial) B. Melania S. Lapidus		Date of Receipt M / D / Y Y Y Y 09 / 22 / 2005
Mailing Address 11 High Acres Drive		Transaction ID: SA11A1.4548
City St. Louis	State MO	Zip Code 63132
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Doris M. Lehmann		Date of Receipt M / D / Y Y Y Y 09 / 08 / 2005
Mailing Address 1812 Fahrpark Court		Transaction ID: SA11A1.4497
City St. Louis	State MO	Zip Code 63148
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

SUBTOTAL of Receipts This Page (optional)	▶	700.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HEALTH CARE LEADERSHIP COMMITTEE

Full Name (Last, First, Middle Initial) A. Nancy Lemaster		Date of Receipt 09 / 14 / 2005
Mailing Address 127 Pointer Lane		Transaction ID: SA11A1.4504
City St. Louis	State MO	Zip Code 63124
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

Full Name (Last, First, Middle Initial) B. Paul Masek		Date of Receipt 09 / 30 / 2005
Mailing Address 13 Dunbridge		Transaction ID: SA11A1.4614
City Glen Carbon	State IL	Zip Code 62034
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Rick Majum		Date of Receipt 09 / 08 / 2005
Mailing Address 400 North Barton Avenue		Transaction ID: SA11A1.4492
City St. Charles	State MO	Zip Code 63301
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

SUBTOTAL of Receipts This Page (optional)	▶	1300.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HEALTH CARE LEADERSHIP COMMITTEE

Full Name (Last, First, Middle Initial) A. Thomas D. McCarthy		Date of Receipt M / D / Y Y Y Y 09 / 23 / 2005
Mailing Address 13522 Weston Park Drive		Transaction ID: SA11A1.4571
City St. Louis	State MO	Zip Code 63131-1044
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Emmy McClelland		Date of Receipt M / D / Y Y Y Y 09 / 14 / 2005
Mailing Address 455 Pasadena Avenue		Transaction ID: SA11A1.4525
City St. Louis	State MO	Zip Code 63113
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer BJC Hospital	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

Full Name (Last, First, Middle Initial) C. David McGuns		Date of Receipt M / D / Y Y Y Y 09 / 22 / 2005
Mailing Address 519 Indian Hills Drive		Transaction ID: SA11A1.4550
City St. Charles	State MO	Zip Code 63301
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

SUBTOTAL of Receipts This Page (optional)	1200.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HEALTH CARE LEADERSHIP COMMITTEE

Full Name (Last, First, Middle Initial) A. John F. McDonnell		Date of Receipt M / D / Y 09 / 23 / 2005
Mailing Address 1034 South Brentwood Blvd. Suite 1840		Transaction ID: SA11A1.4572
City St. Louis	State MO	Zip Code 63117-1218
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Ronald B. McMillen		Date of Receipt M / D / Y 09 / 23 / 2005
Mailing Address 5204 Dover Drive		Transaction ID: SA11A1.4570
City Godfrey	State IL	Zip Code 62035
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 750.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) C. Carmelo Mocer		Date of Receipt M / D / Y 09 / 22 / 2005
Mailing Address 18201 Wyncrest Ridge Court		Transaction ID: SA11A1.4562
City Wildwood	State MO	Zip Code 63005
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	2750.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

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(check only one)

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NAME OF COMMITTEE (In Full)
HEALTH CARE LEADERSHIP COMMITTEE

Full Name (Last, First, Middle Initial) A. Dan P. Mohrman		Date of Receipt M / D / Y 09 / 30 / 2005
Mailing Address 215D Schoettler Drive		Transaction ID: SA11A1.4580
City Chesterfield	State MO	Zip Code 63017-7823
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	indiv. contributions
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

Full Name (Last, First, Middle Initial) B. Mary Patricia Mohrman		Date of Receipt M / D / Y 09 / 30 / 2005
Mailing Address 215D Schoettler		Transaction ID: SA11A1.4594
City Chesterfield	State MO	Zip Code 63017-7823
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Andrew C. Montgomery, III		Date of Receipt M / D / Y 09 / 30 / 2005
Mailing Address 118 Saybridge Maor Parkway		Transaction ID: SA11A1.4593
City Lake St. Louis	State MO	Zip Code 63367
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

SUBTOTAL of Receipts This Page (optional)	700.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HEALTH CARE LEADERSHIP COMMITTEE

Full Name (Last, First, Middle Initial) A. Emily T. Niehaus		Date of Receipt M / D / Y 09 / 14 / 2005
Mailing Address 82 Frederick Lane		Transaction ID: SA11A1.4520
City	State	Zip Code
St. Louis	MO	63122
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

Full Name (Last, First, Middle Initial) B. Sharon O'Keefe		Date of Receipt M / D / Y 09 / 22 / 2005
Mailing Address 12856 Topping Acres		Transaction ID: SA11A1.4564
City	State	Zip Code
St. Louis	MO	63131-1436
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Rick J. Ottoline		Date of Receipt M / D / Y 09 / 30 / 2005
Mailing Address 2286 Mill Hill Road		Transaction ID: SA11A1.4813
City	State	Zip Code
St. Clair	MO	63077
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

SUBTOTAL of Receipts This Page (optional)	700.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 24 / 32

(check only one)

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NAME OF COMMITTEE (In Full)
HEALTH CARE LEADERSHIP COMMITTEE

Full Name (Last, First, Middle Initial) A. Park Corporation		Date of Receipt M / D / Y 09 / 22 / 2005
Mailing Address 1001 Boardwalk Springs Place		Transaction ID: SA11A1.4540
City O'Fallon	State MO	Zip Code 63366
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Judy C. Paul		Date of Receipt M / D / Y 09 / 08 / 2005
Mailing Address 7399 Norwood Avenue		Transaction ID: SA11A1.4484
City University City	State MO	Zip Code 63130-4130
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

Full Name (Last, First, Middle Initial) C. Gary Payne		Date of Receipt M / D / Y 09 / 08 / 2005
Mailing Address 5864 Forest Drive		Transaction ID: SA11A1.4496
City Hillsboro	State MO	Zip Code 63050
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

SUBTOTAL of Receipts This Page (optional)	▶	1200.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)
HEALTH CARE LEADERSHIP COMMITTEE

Full Name (Last, First, Middle Initial) A. Christine M. Rametowski		Date of Receipt M / D / Y 09 / 22 / 2005
Mailing Address 31 Hardith Hill Court		Transaction ID: SA11A1.4585
City St. Louis	State MO	Zip Code 63119-1350
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

Full Name (Last, First, Middle Initial) B. David Ross		Date of Receipt M / D / Y 09 / 08 / 2005
Mailing Address 1207 Applerock Dr		Transaction ID: SA11A1.4500
City O' Fallon	State MO	Zip Code 63366
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Barnes Jewish St. Peters Hos- pital	Occupation President	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Lori Schreier		Date of Receipt M / D / Y 09 / 08 / 2005
Mailing Address 848 Summit Glen Court		Transaction ID: SA11A1.4490
City Fenton	State MO	Zip Code 63028
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer BJC HealthCare	Occupation Phys Servs, VP, Chief Financial Officer	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

SUBTOTAL of Receipts This Page (optional)	▶	700.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)
 11a 11b 11c 12
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NAME OF COMMITTEE (In Full)
HEALTH CARE LEADERSHIP COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) <u>Keith D. Segraves</u></p> <p>Mailing Address <u>839 Timberidge</u></p> <p>City <u>St. Charles</u> State <u>MO</u> Zip Code <u>63303</u></p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer _____ Occupation _____</p> <p>Receipt For: Primary _____ General _____ Other (specify) ▼ _____</p> <p>Aggregate Year-to-Date ▼ 100.00</p>	<p>Date of Receipt M / D / Y Y Y Y <u>09</u> / <u>14</u> / <u>2005</u></p> <p>Transaction ID: <u>SA11A1.4505</u></p> <p>Amount of Each Receipt this Period 100.00</p> <p>indiv. contribution</p>
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<p>B. Full Name (Last, First, Middle Initial) <u>Sylvia D. Sharokman</u></p> <p>Mailing Address <u>1 Nantucket Harbor Court</u></p> <p>City <u>Wildwood</u> State <u>MO</u> Zip Code <u>63040</u></p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer _____ Occupation _____</p> <p>Receipt For: Primary _____ General _____ Other (specify) ▼ _____</p> <p>Aggregate Year-to-Date ▼ 100.00</p>	<p>Date of Receipt M / D / Y Y Y Y <u>09</u> / <u>08</u> / <u>2005</u></p> <p>Transaction ID: <u>SA11A1.4488</u></p> <p>Amount of Each Receipt this Period 100.00</p> <p>indiv. contribution</p>
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<p>C. Full Name (Last, First, Middle Initial) <u>Joann Shaw</u></p> <p>Mailing Address <u>136 Ladue Oaks Drive</u></p> <p>City <u>Creve Coeur</u> State <u>MO</u> Zip Code <u>63141</u></p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer <u>BJC Healthcare</u> Occupation <u>Vice President</u></p> <p>Receipt For: Primary _____ General _____ Other (specify) ▼ _____</p> <p>Aggregate Year-to-Date ▼ 500.00</p>	<p>Date of Receipt M / D / Y Y Y Y <u>09</u> / <u>30</u> / <u>2005</u></p> <p>Transaction ID: <u>SA11A1.4578</u></p> <p>Amount of Each Receipt this Period 500.00</p> <p>indiv. contribution</p>
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<p>SUBTOTAL of Receipts This Page (optional) ▶</p>	<p>700.00</p>
<p>TOTAL This Period (last page this line number only) ▶</p>	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 27 / 32

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
HEALTH CARE LEADERSHIP COMMITTEE

Full Name (Last, First, Middle Initial) A. Todd P. Sklemberg		Date of Receipt M / D / Y 09 / 14 / 2005
Mailing Address 1804 Wildhorse Parkway Drive		Transaction ID: SA11A1.4509
City Chesterfield	State MO	Zip Code 63005
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

Full Name (Last, First, Middle Initial) B. Jill Shyles		Date of Receipt M / D / Y 09 / 22 / 2005
Mailing Address 860 Saratoga Heights		Transaction ID: SA11A1.4551
City St. Charles	State MO	Zip Code 63304
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

Full Name (Last, First, Middle Initial) C. Mark E. Stansberry		Date of Receipt M / D / Y 09 / 30 / 2005
Mailing Address 5324 Lode Avenue		Transaction ID: SA11A1.4581
City Affton	State MO	Zip Code 63123-3840
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

SUBTOTAL of Receipts This Page (optional)	▶	300.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 28 / 32

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
HEALTH CARE LEADERSHIP COMMITTEE

Full Name (Last, First, Middle Initial) A. Charles E. Valier		Date of Receipt 09 / 30 / 2005
Mailing Address 714 Locust		Transaction ID: SA11A1.4587
City St. Louis	State MO	Zip Code 63101
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Sandra A. Vantress		Date of Receipt 09 / 30 / 2005
Mailing Address 1721 Kenmont Road		Transaction ID: SA11A1.4582
City St. Louis	State MO	Zip Code 63124-1021
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. Debra H. Victor		Date of Receipt 09 / 08 / 2005
Mailing Address 13036 Walnutway Manor		Transaction ID: SA11A1.4485
City St. Louis	State MO	Zip Code 63148
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

SUBTOTAL of Receipts This Page (optional)	▶	2800.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 28 / 32

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
HEALTH CARE LEADERSHIP COMMITTEE

Full Name (Last, First, Middle Initial) A. Andrew A. Ziskind		Date of Receipt M / D / Y 09 / 30 / 2005
Mailing Address 24 Countryside Lane		Transaction ID: SA11A1.4595
City Frontenac	State MO	Zip Code 63131
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Jeanne M. Zychinski		Date of Receipt M / D / Y 09 / 30 / 2005
Mailing Address 11 Holiday Lane		Transaction ID: SA11A1.4586
City Frontenac	State MO	Zip Code 63131-3238
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	indiv. contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	24350.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
	27		28a		28b		28c		29		30b

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NAME OF COMMITTEE (In Full)
HEALTH CARE LEADERSHIP COMMITTEE

Full Name (Last, First, Middle Initial)
A. Lewis, Rice and Fingersh, LC

Mailing Address 500 North Broadway
Suite 2000

City St. Louis State MO Zip Code 63102

Purpose of Disbursement
Professional Services

Candidate Name

Office Sought: House
Senate
President
State: District

Disbursement For:
Primary General
Other (specify) ▼

001
Category/
Type

Transaction ID: SB21B.4548

Date of Disbursement

09 / 22 / 2005

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional) ▶

250.00

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

250.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 31 / 32

<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)
HEALTH CARE LEADERSHIP COMMITTEE

Full Name (Last, First, Middle Initial)
A. HULSHOF FOR CONGRESS

Mailing Address PO BOX 1021

City COLUMBIA State MO Zip Code 65205

Purpose of Disbursement
contribution

Candidate Name

Office Sought: House
Senate
President
State: District

Disbursement For:
Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.4545

Date of Disbursement

07 / 20 / 2005

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. Team Emerson

Mailing Address P.O. Box 822
P.O. Box 822

City Cape Girardeau State MO Zip Code 63702

Purpose of Disbursement
contribution

Candidate Name

Office Sought: x House
Senate
President
State: MO District 08

Disbursement For:
Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.4544

Date of Disbursement

08 / 17 / 2005

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

1250.00

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

1250.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 32 / 32

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HEALTH CARE LEADERSHIP COMMITTEE

Full Name (Last, First, Middle Initial)

A. Leann Chilton

Mailing Address 6805 Kimmswick Court

City State Zip Code
Oak Village MO 63129

Purpose of Disbursement
Reimbursement for fundraiser expenses

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District

003
Category/
Type

Transaction ID: SB29.4615

Date of Disbursement

09 / 30 / 2005

Amount of Each Disbursement this Period

1820.19

Full Name (Last, First, Middle Initial)

B. Health Care Leadership Committee - Missouri PAC

Mailing Address 221 E. Capitol Avenue

City State Zip Code
Jefferson City MO 65101

Purpose of Disbursement
Transfer Pac contribution to HCLC-MO

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District

008
Category/
Type

Transaction ID: SB29.4543

Date of Disbursement

09 / 22 / 2005

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

2820.19

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

2820.19