

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

FRIENDS OF TOM STILSON

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2012 To: M M / D D / Y Y Y Y 07 / 18 / 2012

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	808.53	9610.65
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	808.53	9610.65
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	464.59	9284.78
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	464.59	9284.78
8. Cash on Hand at Close of Reporting Period (from Line 27).....	791.98	
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).....	466.11	

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 3 (Revised 12/2003)

Write or Type Committee Name

FRIENDS OF TOM STILSON

Report Covering the Period: From: / / To: / /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	283.53	5819.50
(ii) Unitemized.....	525.00	3335.05
(iii) TOTAL of contributions from individuals ▶	808.53	9154.55
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	456.10
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	808.53	9610.65
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	466.11
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	466.11
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	808.53	10076.76

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	464.59	9284.78
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. 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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	464.59	9284.78

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	448.04
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	808.53
25. SUBTOTAL (add Line 23 and Line 24).....	1256.57
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	464.59
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	791.98

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 9
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
FRIENDS OF TOM STILSON

Full Name (Last, First, Middle Initial) A. Wanda Martens		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 02 / 2012	
Mailing Address 502 Cash Spring Road		Transaction ID : SA11AI.4392	
City Ozark	State MO	Zip Code 65721	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 88.67 In-kind - Truck Sign 3' x 6'- M&G Signs	
Name of Employer Self-Employed	Occupation Farmer		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1188.08		

Full Name (Last, First, Middle Initial) B. Wanda Martens		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 06 / 2012	
Mailing Address 502 Cash Spring Road		Transaction ID : SA11AI.4394	
City Ozark	State MO	Zip Code 65721	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 42.99 In-kind - M&G Signs- Magnetic Panels	
Name of Employer Self-Employed	Occupation Farmer		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1231.07		

Full Name (Last, First, Middle Initial) C. Laura Stilson		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 12 / 2012	
Mailing Address 390 Cash Spring Road		Transaction ID : SA11AI.4357	
City Ozark	State MO	Zip Code 65721	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00	
Name of Employer Self-Employed	Occupation Photographer		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1120.85		

SUBTOTAL of Receipts This Page (optional).....	206.66
TOTAL This Period (last page this line number only).....	[]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 9
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
FRIENDS OF TOM STILSON

Full Name (Last, First, Middle Initial) A. Thomas Shane Stilson		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 07 / 2012	
Mailing Address 390 Cash Spring Road		Transaction ID : SA11AI.4387	
City Ozark	State MO	Zip Code 65721	Amount of Each Receipt this Period _____ 26.87 In-kind - M&G Signs Window Decal
FEC ID number of contributing federal political committee.		C H2MO07101	
Name of Employer Bass Pro Shops	Occupation Fine Gun Sales/Gunsmith/Range Officer		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 482.97		

Full Name (Last, First, Middle Initial) B. Thomas Shane Stilson		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 10 / 2012	
Mailing Address 390 Cash Spring Road		Transaction ID : SA11AI.4403	
City Ozark	State MO	Zip Code 65721	Amount of Each Receipt this Period _____ 50.00
FEC ID number of contributing federal political committee.		C H2MO07101	
Name of Employer Bass Pro Shops	Occupation Fine Gun Sales/Gunsmith/Range Officer		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 532.97		

Full Name (Last, First, Middle Initial) C.		Date of Receipt M M / D D / Y Y Y Y Y Y	
Mailing Address			
City	State	Zip Code	Amount of Each Receipt this Period _____
FEC ID number of contributing federal political committee.		C	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____		

SUBTOTAL of Receipts This Page (optional).....	_____ 76.87
TOTAL This Period (last page this line number only).....	_____ 283.53

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 OF 9	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
FRIENDS OF TOM STILSON

Full Name (Last, First, Middle Initial) A. Terry Campbell		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2012
Mailing Address 587 River View Road		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.4404
City Ozark	State MO	
Zip Code 65721	Purpose of Disbursement Consultation Services- May 6 - 13	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Wanda Martens		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address 502 Cash Spring Road		Amount of Each Disbursement this Period 88.67 Transaction ID : SB17.4393
City Ozark	State MO	
Zip Code 65721	Purpose of Disbursement In-kind - Truck Sign 3' x 6'- M&G Signs	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Wanda Martens		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2012
Mailing Address 502 Cash Spring Road		Amount of Each Disbursement this Period 42.99 Transaction ID : SB17.4395
City Ozark	State MO	
Zip Code 65721	Purpose of Disbursement In-kind - M&G Signs- Magnetic Panels	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	381.66
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 9
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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)
FRIENDS OF TOM STILSON

Full Name (Last, First, Middle Initial) A. Thomas Shane Stilson		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2012
Mailing Address 390 Cash Spring Road		Amount of Each Disbursement this Period 26.87
City Ozark	State MO Zip Code 65721	
Purpose of Disbursement In-kind - M&G Signs Window Decal	Category/Type 004	Transaction ID : SB17.4388
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 07	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	26.87
TOTAL This Period (last page this line number only).....	408.53

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **FRIENDS OF TOM STILSON** Transaction ID : **SC/10.4250**

LOAN SOURCE Full Name (Last, First, Middle Initial) Matthew Ennis	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1422 West Sackett	

City	State	ZIP Code
Springfield	MO	65807

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
466.11	0.00	466.11

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
06 / 17 / 2012	Paid July 12	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	466.11
TOTALS This Period (last page in this line only).....	▶	466.11

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.