

# 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  
Missourians for Accountability and Change (MACPAC)

ADDRESS (number and street) 607 14th Street, NW, Suite 800  
 Check if different than previously reported. (ACC)  
Washington DC 20005

2. **FEC IDENTIFICATION NUMBER** C00431122  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 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 (12G)  
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 01 01 2009 through 06 30 2009

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 Brian H. May  
Signature of Treasurer Electronically Filed by Brian H. May Date 07 31 2009

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. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Missourians for Accountability and Change (MACPAC)

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		3279.29
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	3279.29									
(c) Total Receipts (from Line 19) .....	59003.00	59003.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	62282.29	62282.29								
7. Total Disbursements (from Line 31) .....	56294.07	56294.07								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	5988.22	5988.22								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> 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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Missourians for Accountability and Change (MACPAC)

Report Covering the Period: From:    To:

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) .....	19500.00	19500.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	19500.00	19500.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	39500.00	39500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	59000.00	59000.00
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) .....	3.00	3.00
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)) .....	59003.00	59003.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	59003.00	59003.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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.....	49294.07	49294.07
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	49294.07	49294.07
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7000.00	7000.00
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.....	0.00	0.00
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 Activity (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))..	56294.07	56294.07
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	56294.07	56294.07

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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 .....	59000.00	59000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	59000.00	59000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	49294.07	49294.07
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	3.00	3.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	49291.07	49291.07

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 30
	<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	

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)  
Missourians for Accountability and Change (MACPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Robert D. Blitz		Date of Receipt	
	Mailing Address 120 S Central Ave Ste 1650		M M / D D / Y Y Y Y Y 06 / 12 / 2009	
	City	State	Zip Code	<b>Transaction ID:</b> C5294619
	Clayton	MO	63105-1742	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		2500.00	
Name of Employer Blitz, Bardgett & Deutsch		Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Lisa R. Carnahan		Date of Receipt	
	Mailing Address 5777 Lindell Boulevard		M M / D D / Y Y Y Y Y 03 / 16 / 2009	
	City	State	Zip Code	<b>Transaction ID:</b> C5112157
	Saint Louis	MO	63112-1003	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		1500.00	
Name of Employer N/A		Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1500.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Jane E. Dueker		Date of Receipt	
	Mailing Address 14665 Chesterfield Trails Drive		M M / D D / Y Y Y Y Y 01 / 09 / 2009	
	City	State	Zip Code	<b>Transaction ID:</b> C4926031
	Chesterfield	MO	63017-5660	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		2500.00	
Name of Employer Stinson Morrison & Hecker LLP		Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	6500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 30  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Missourians for Accountability and Change (MACPAC)

**A.** Full Name (Last, First, Middle Initial)  
Thomas R. Green

Mailing Address 1830 Craig Park Ct

City State Zip Code  
Saint Louis MO 63146-4148

FEC ID number of contributing federal political committee. C

Name of Employer Self Employed      Occupation Attorney

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 3 / 1 6 / 2 0 0 9

**Transaction ID:** C5112153

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Timothy F. Hannegan

Mailing Address 6601 Lybrook Court

City State Zip Code  
Bethesda MD 20817-3029

FEC ID number of contributing federal political committee. C

Name of Employer Wexler & Walker Public Policy Associat      Occupation President

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 3 / 1 3 / 2 0 0 9

**Transaction ID:** C5105373

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Broderick D. Johnson

Mailing Address 5901 NW Nebraska Avenue

City State Zip Code  
Washington DC 20015

FEC ID number of contributing federal political committee. C

Name of Employer Bryan Cave Strategies, LLC      Occupation Chairman

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 3 / 3 0 / 2 0 0 9

**Transaction ID:** C5141182

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... 7000.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 30
	<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)  
Missourians for Accountability and Change (MACPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Gregory W. Wendt	Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address 1 Muir Loop	<b>Transaction ID:</b> C5147246
	City State Zip Code San Francisco CA 94129-1123	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Capital Research Company Occupation Chief Executive Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 5000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) SC Partners, LLC	Date of Receipt MM / DD / YYYY 03 / 12 / 2009
	Mailing Address 226 7th Street, NE Suite 2	<b>Transaction ID:</b> C5105764
	City State Zip Code Washington DC 20002	Amount of Each Receipt this Period 1000.00
	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) Aggregate Year-to-Date 1000.00	PARTNERSHIP--partners below if itemized

<b>C.</b>	Full Name (Last, First, Middle Initial) Katherine M. Cullen	Date of Receipt MM / DD / YYYY 03 / 12 / 2009
	Mailing Address 226 7th Street, NE Suite 2	<b>Transaction ID:</b> C5105765
	City State Zip Code Washington DC 20002	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer SC Partners, LLC Occupation Member Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 500.00	[MEMO ITEM] *

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	6000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 9 / 30	
	(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"/> 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)  
Missourians for Accountability and Change (MACPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Charlie Shipp		Date of Receipt																					
	Mailing Address 226 7th Street, NE Suite 2		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	2		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		1	2		2	0	0	9														
	City State Zip Code Washington DC 20002		<b>Transaction ID:</b> C5105875																					
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00																					
Name of Employer Occupation SC Partners, LLC Member		<b>[MEMO ITEM]</b> *																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																								
Aggregate Year-to-Date ▼ 500.00																								

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	19500.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 30

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
Missourians for Accountability and Change (MACPAC)

**A.**

Full Name (Last, First, Middle Initial)  
American Association For Justice PAC

Mailing Address 777 6th Street, NW  
Suite 200

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00024521

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 11 / 2009

Transaction ID: C5235111

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)  
American Society of Anesthesiologists PAC

Mailing Address 520 N. Northwest Highway

City State Zip Code  
Park Ridge IL 60068

FEC ID number of contributing federal political committee. **C** C00255752

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 16 / 2009

Transaction ID: C5112146

Amount of Each Receipt this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)  
Anheuser-Busch Companies Inc. PAC

Mailing Address One Busch Place 202-5

City State Zip Code  
Saint Louis MO 63118

FEC ID number of contributing federal political committee. **C** C00034488

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt

M M / D D / Y Y Y Y  
04 / 20 / 2009

Transaction ID: C5198808

Amount of Each Receipt this Period

5000.00

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

12500.00

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

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

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

FOR LINE NUMBER: PAGE 11 / 30  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Missourians for Accountability and Change (MACPAC)

**A.** Full Name (Last, First, Middle Initial)  
Bryan Cave LLP Political Fund

Mailing Address 700 13th Street N.W., Suite 500

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00332643

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 3 / 3 0 / 2 0 0 9

**Transaction ID:** C5141185

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Centene Corporation PAC

Mailing Address 7711 Carondelet Avenue Suite 800

City Saint Louis State MO Zip Code 63105

FEC ID number of contributing federal political committee. **C** C00397851

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 0 6 / 2 0 0 9

**Transaction ID:** C5149608

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Comcast Corporation Political Action Committee

Mailing Address 1701 JFK Boulevard, 49th Floor

City Philadelphia State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 3 / 3 0 / 2 0 0 9

**Transaction ID:** C5141258

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **11000.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 30
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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)  
Missourians for Accountability and Change (MACPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Enterprise Rent A Car Company PAC	Date of Receipt MM / DD / YYYY 03 / 06 / 2009
	Mailing Address 600 Corporate Park Drive	<b>Transaction ID:</b> C5105143
	City State Zip Code Saint Louis MO 63105	Amount of Each Receipt this Period 1500.00
	FEC ID number of contributing federal political committee. <b>C</b> C00219642	
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Hogan & Hartson PAC	Date of Receipt MM / DD / YYYY 03 / 12 / 2009
	Mailing Address 555 13th Street, NW 8th Floor	<b>Transaction ID:</b> C5105374
	City State Zip Code Washington DC 20004	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b> C00261339	
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Missouri Democratic State Committee - Federal Acct	Date of Receipt MM / DD / YYYY 03 / 11 / 2009
	Mailing Address PO Box 719	<b>Transaction ID:</b> C5105377
	City State Zip Code Jefferson City MO 65102-0719	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. <b>C</b> C00135558	
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>7500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 13 / 30  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Missourians for Accountability and Change (MACPAC)

**A.** Full Name (Last, First, Middle Initial)  
Pipefitters Local #533 Volunteer Political Fund  
Mailing Address 8600 Hillcrest Road  
City State Zip Code  
Kansas City MO 64138  
FEC ID number of contributing federal political committee. **C** C00206177  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00  
Date of Receipt: 03 / 16 / 2009  
Transaction ID: C5112133  
Amount of Each Receipt this Period: 5000.00

**B.** Full Name (Last, First, Middle Initial)  
Rehabcare Group, Inc. PAC  
Mailing Address 7733 Forsyth Boulevard Suite 2300  
City State Zip Code  
Saint Louis MO 63105  
FEC ID number of contributing federal political committee. **C** C00407130  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00  
Date of Receipt: 03 / 23 / 2009  
Transaction ID: C5136650  
Amount of Each Receipt this Period: 2500.00

**C.** Full Name (Last, First, Middle Initial)  
United States Cellular Corporation PAC  
Mailing Address 8410 W. Bryn Mawr Avenue Suite 700  
City State Zip Code  
Chicago IL 60631  
FEC ID number of contributing federal political committee. **C** C00336057  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt: 03 / 16 / 2009  
Transaction ID: C5112137  
Amount of Each Receipt this Period: 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 8500.00  
**TOTAL** This Period (last page this line number only) ..... ► 39500.00

# 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)

<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
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Missourians for Accountability and Change (MACPAC)

A.

Full Name (Last, First, Middle Initial)  
Anthem Blue Cross Blue Shield

Transaction ID: D236320

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	5		2	0	9	

Mailing Address PO Box 105183

Amount of Each Disbursement this Period

117.46
--------

City Atlanta State GA Zip Code 30348-5183

Purpose of Disbursement  
Insurance

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Anthem Blue Cross Blue Shield

Transaction ID: D259593

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	9		2	0	9	

Mailing Address PO Box 105183

Amount of Each Disbursement this Period

117.46
--------

City Atlanta State GA Zip Code 30348-5183

Purpose of Disbursement  
Insurance

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Anthem Blue Cross Blue Shield

Transaction ID: D278214

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	7		2	0	9	

Mailing Address PO Box 105183

Amount of Each Disbursement this Period

117.46
--------

City Atlanta State GA Zip Code 30348-5183

Purpose of Disbursement  
Insurance

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

352.38
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**TOTAL** This Period (last page this line number only) ..... ►

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# 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)

<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
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Missourians for Accountability and Change (MACPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Anthem Blue Cross Blue Shield  Mailing Address PO Box 105183  City Atlanta State GA Zip Code 30348-5183  Purpose of Disbursement Insurance 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) ▼	<b>Transaction ID:</b> D278990 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 3 / 2 0 0 9	Amount of Each Disbursement this Period  45.43
<b>B.</b>	Full Name (Last, First, Middle Initial) Anthem Blue Cross Blue Shield  Mailing Address PO Box 105183  City Atlanta State GA Zip Code 30348-5183  Purpose of Disbursement Insurance 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) ▼	<b>Transaction ID:</b> D281036 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 2 / 2 0 0 9	Amount of Each Disbursement this Period  74.15
<b>C.</b>	Full Name (Last, First, Middle Initial) Anthem Blue Cross Blue Shield  Mailing Address PO Box 105183  City Atlanta State GA Zip Code 30348-5183  Purpose of Disbursement Insurance 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) ▼	<b>Transaction ID:</b> D283222 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 8 / 2 0 0 9	Amount of Each Disbursement this Period  155.98

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<b>275.56</b>	
<b>TOTAL</b> This Period (last page this line number only) .....			

# 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)

<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
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Missourians for Accountability and Change (MACPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) AT&T Mailing Address PO Box 930170 City Dallas State TX Zip Code 75393-0170 Purpose of Disbursement Telephone 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) ▼	Transaction ID: D284598 Date of Disbursement 06 / 29 / 2009
	Amount of Each Disbursement this Period 133.53
<b>B.</b> Full Name (Last, First, Middle Initial) AT&T Mailing Address PO Box 930170 City Dallas State TX Zip Code 75393-0170 Purpose of Disbursement Telephone 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) ▼	Transaction ID: D281862 Date of Disbursement 05 / 22 / 2009
	Amount of Each Disbursement this Period 132.53
<b>C.</b> Full Name (Last, First, Middle Initial) AT&T Mailing Address PO Box 930170 City Dallas State TX Zip Code 75393-0170 Purpose of Disbursement Telephone 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) ▼	Transaction ID: D278431 Date of Disbursement 03 / 26 / 2009
	Amount of Each Disbursement this Period 136.62

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

402.68

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

# 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)

<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
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Missourians for Accountability and Change (MACPAC)

<p><b>A.</b> Full Name (Last, First, Middle Initial) AT&amp;T</p> <p>Mailing Address PO Box 930170</p> <p>City Dallas State TX Zip Code 75393-0170</p> <p>Purpose of Disbursement Telephone Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D272378</p> <p>Date of Disbursement MM / DD / YYYY 03 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 137.10</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) AT&amp;T</p> <p>Mailing Address PO Box 930170</p> <p>City Dallas State TX Zip Code 75393-0170</p> <p>Purpose of Disbursement Telephone Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D238606</p> <p>Date of Disbursement MM / DD / YYYY 01 / 28 / 2009</p> <p>Amount of Each Disbursement this Period 140.85</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Citibank</p> <p>Mailing Address 1400 G Street, NW</p> <p>City Washington State DC Zip Code 20005-2001</p> <p>Purpose of Disbursement Bank Fee Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D281998</p> <p>Date of Disbursement MM / DD / YYYY 01 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 25.39</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>303.34</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# 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)

<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
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Missourians for Accountability and Change (MACPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Citibank Mailing Address 1400 G Street, NW City Washington State DC Zip Code 20005-2001 Purpose of Disbursement Bank Fee 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) ▼	<b>Transaction ID:</b> D281999 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 9	Amount of Each Disbursement this Period 25.37
<b>B.</b>	Full Name (Last, First, Middle Initial) Citibank Mailing Address 1400 G Street, NW City Washington State DC Zip Code 20005-2001 Purpose of Disbursement Bank Fee 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) ▼	<b>Transaction ID:</b> D282001 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 1 0 / 2 0 0 9	Amount of Each Disbursement this Period 25.07
<b>C.</b>	Full Name (Last, First, Middle Initial) Citibank Mailing Address 1400 G Street, NW City Washington State DC Zip Code 20005-2001 Purpose of Disbursement Bank Fee 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) ▼	<b>Transaction ID:</b> D287135 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 8 / 2 0 0 9	Amount of Each Disbursement this Period 89.33

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	139.77
<b>TOTAL</b> This Period (last page this line number only) .....	

# 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)

<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
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Missourians for Accountability and Change (MACPAC)

A.	Full Name (Last, First, Middle Initial) Citibank	Transaction ID: D287136 Date of Disbursement 05 / 08 / 2009
	Mailing Address 1400 G Street, NW	Amount of Each Disbursement this Period 21.63
	City Washington State DC Zip Code 20005-2001	
	Purpose of Disbursement Bank Fee Candidate Name	Category/Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Citibank	Transaction ID: D287137 Date of Disbursement 06 / 08 / 2009
	Mailing Address 1400 G Street, NW	Amount of Each Disbursement this Period 21.66
	City Washington State DC Zip Code 20005-2001	
	Purpose of Disbursement Bank Fee Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) David G. Kirby	Transaction ID: D284590 Date of Disbursement 06 / 30 / 2009
	Mailing Address 3705 Juniata Street	Amount of Each Disbursement this Period 2803.18
	City Saint Louis State MO Zip Code 63116-4811	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2846.47
<b>TOTAL</b> This Period (last page this line number only) .....	

# 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)

<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
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Missourians for Accountability and Change (MACPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) David G. Kirby <hr/> Mailing Address 3705 Juniata Street <hr/> City Saint Louis State MO Zip Code 63116-4811 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> 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) ▼	Transaction ID: D282423 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 2803.18
<b>B.</b>	Full Name (Last, First, Middle Initial) David G. Kirby <hr/> Mailing Address 3705 Juniata Street <hr/> City Saint Louis State MO Zip Code 63116-4811 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> 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) ▼	Transaction ID: D281350 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 5606.39
<b>C.</b>	Full Name (Last, First, Middle Initial) David G. Kirby <hr/> Mailing Address 3705 Juniata Street <hr/> City Saint Louis State MO Zip Code 63116-4811 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> 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) ▼	Transaction ID: D279596 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 5606.36

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	14015.93
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# 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)

<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
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Missourians for Accountability and Change (MACPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) David G. Kirby  Mailing Address 3705 Juniata Street  City Saint Louis State MO Zip Code 63116-4811  Purpose of Disbursement Salary 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) ▼	<b>Transaction ID:</b> D278467 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 2 5 / 2 0 0 9	Amount of Each Disbursement this Period 2740.52
<b>B.</b>	Full Name (Last, First, Middle Initial) Lovely Properties, LLC  Mailing Address 6504 Delmar Blvd  City Saint Louis State MO Zip Code 63130-4501  Purpose of Disbursement Rent 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) ▼	<b>Transaction ID:</b> D278430 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 2 5 / 2 0 0 9	Amount of Each Disbursement this Period 805.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Lovely Properties, LLC  Mailing Address 6504 Delmar Blvd  City Saint Louis State MO Zip Code 63130-4501  Purpose of Disbursement Rent 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) ▼	<b>Transaction ID:</b> D236358 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 2 3 / 2 0 0 9	Amount of Each Disbursement this Period 805.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	4350.52
<b>TOTAL</b> This Period (last page this line number only) .....	

# 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)

<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
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Missourians for Accountability and Change (MACPAC)

A.	Full Name (Last, First, Middle Initial) Lovely Properties, LLC	Transaction ID: D261668 Date of Disbursement 02 / 25 / 2009
	Mailing Address 6504 Delmar Blvd	Amount of Each Disbursement this Period 805.00
	City Saint Louis State MO Zip Code 63130-4501	
	Purpose of Disbursement Rent	
	Candidate Name	Category/Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Lovely Properties, LLC	Transaction ID: D281038 Date of Disbursement 04 / 21 / 2009
	Mailing Address 6504 Delmar Blvd	Amount of Each Disbursement this Period 805.00
	City Saint Louis State MO Zip Code 63130-4501	
	Purpose of Disbursement Rent	
	Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Lovely Properties, LLC	Transaction ID: D283030 Date of Disbursement 05 / 26 / 2009
	Mailing Address 6504 Delmar Blvd	Amount of Each Disbursement this Period 805.00
	City Saint Louis State MO Zip Code 63130-4501	
	Purpose of Disbursement Rent	
	Candidate Name	Category/Type
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2415.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**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 23 / 30

<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
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Missourians for Accountability and Change (MACPAC)

A.	Full Name (Last, First, Middle Initial) Lovely Properties, LLC	Transaction ID: D284296 Date of Disbursement
	Mailing Address 6504 Delmar Blvd	<input type="text" value="06"/> / <input type="text" value="25"/> / <input type="text" value="2009"/>
	City Saint Louis State MO Zip Code 63130-4501	Amount of Each Disbursement this Period
	Purpose of Disbursement Rent	<input type="text" value="805.00"/>
	Candidate Name	Category/Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) NGP Software, Inc.	Transaction ID: D235826 Date of Disbursement
	Mailing Address 1225 I Street, NW Suite 1225	<input type="text" value="01"/> / <input type="text" value="09"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20005-5918	Amount of Each Disbursement this Period
	Purpose of Disbursement Database Services	<input type="text" value="1200.00"/>
	Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: D261821 Date of Disbursement
	Mailing Address 16305 Swingley Ridge Road Suite 500	<input type="text" value="03"/> / <input type="text" value="10"/> / <input type="text" value="2009"/>
	City Chesterfield State MO Zip Code 63017-1777	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Services	<input type="text" value="41.24"/>
	Candidate Name	Category/Type
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2046.24"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# 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)

<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
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Missourians for Accountability and Change (MACPAC)

A.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: D238783 Date of Disbursement 02 / 10 / 2009
	Mailing Address 16305 Swingley Ridge Road Suite 500	Amount of Each Disbursement this Period 115.53
	City Chesterfield State MO Zip Code 63017-1777	
	Purpose of Disbursement Payroll Services Candidate Name	Category/Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: D282424 Date of Disbursement 05 / 29 / 2009
	Mailing Address 16305 Swingley Ridge Road Suite 500	Amount of Each Disbursement this Period 1026.16
	City Chesterfield State MO Zip Code 63017-1777	
	Purpose of Disbursement Payroll Taxes Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: D282002 Date of Disbursement 03 / 03 / 2009
	Mailing Address 16305 Swingley Ridge Road Suite 500	Amount of Each Disbursement this Period 1245.26
	City Chesterfield State MO Zip Code 63017-1777	
	Purpose of Disbursement Payroll Taxes Candidate Name	Category/Type
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2386.95</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**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)

<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
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Missourians for Accountability and Change (MACPAC)

A.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: D281679 Date of Disbursement 05 / 11 / 2009
	Mailing Address 16305 Swingley Ridge Road Suite 500	Amount of Each Disbursement this Period 136.04
	City Chesterfield State MO Zip Code 63017-1777	
	Purpose of Disbursement Payroll Services Candidate Name	Category/Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: D279597 Date of Disbursement 04 / 07 / 2009
	Mailing Address 16305 Swingley Ridge Road Suite 500	Amount of Each Disbursement this Period 2335.75
	City Chesterfield State MO Zip Code 63017-1777	
	Purpose of Disbursement Payroll Taxes Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: D284589 Date of Disbursement 06 / 30 / 2009
	Mailing Address 16305 Swingley Ridge Road Suite 500	Amount of Each Disbursement this Period 1026.16
	City Chesterfield State MO Zip Code 63017-1777	
	Purpose of Disbursement Payroll Taxes Candidate Name	Category/Type
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3497.95</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# 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)

<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
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Missourians for Accountability and Change (MACPAC)

A.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: D283198 Date of Disbursement 06 / 10 / 2009
	Mailing Address 16305 Swingley Ridge Road Suite 500	Amount of Each Disbursement this Period 97.38
	City Chesterfield State MO Zip Code 63017-1777	
	Purpose of Disbursement Payroll Services Candidate Name	Category/Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: D287138 Date of Disbursement 04 / 10 / 2009
	Mailing Address 16305 Swingley Ridge Road Suite 500	Amount of Each Disbursement this Period 95.41
	City Chesterfield State MO Zip Code 63017-1777	
	Purpose of Disbursement Payroll Services Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: D281349 Date of Disbursement 04 / 30 / 2009
	Mailing Address 16305 Swingley Ridge Road Suite 500	Amount of Each Disbursement this Period 2110.17
	City Chesterfield State MO Zip Code 63017-1777	
	Purpose of Disbursement Payroll Taxes Candidate Name	Category/Type
	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) ..... ▶

2302.96

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

**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)

<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
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Missourians for Accountability and Change (MACPAC)

A.	Full Name (Last, First, Middle Initial) Perkins Coie LLP	Transaction ID: D281040 Date of Disbursement 04 / 27 / 2009
	Mailing Address 1201 3rd Ave FI 40	Amount of Each Disbursement this Period 4519.41
	City Seattle State WA Zip Code 98101-3029	
	Purpose of Disbursement Legal & Accounting Services	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) ▼

B.	Full Name (Last, First, Middle Initial) Perkins Coie LLP	Transaction ID: D283084 Date of Disbursement 06 / 16 / 2009
	Mailing Address 1201 3rd Ave FI 40	Amount of Each Disbursement this Period 3015.34
	City Seattle State WA Zip Code 98101-3029	
	Purpose of Disbursement Legal & Accounting Services	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) ▼

C.	Full Name (Last, First, Middle Initial) Perkins Coie LLP	Transaction ID: D278207 Date of Disbursement 03 / 19 / 2009
	Mailing Address 1201 3rd Ave FI 40	Amount of Each Disbursement this Period 4525.41
	City Seattle State WA Zip Code 98101-3029	
	Purpose of Disbursement Legal & Accounting Services	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	12060.16
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**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)

<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
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Missourians for Accountability and Change (MACPAC)

A.	Full Name (Last, First, Middle Initial) The Business Bank Cardmember Services	Transaction ID: D279348 Date of Disbursement
	Mailing Address PO Box 790408	<input type="text" value="04"/> / <input type="text" value="07"/> / <input type="text" value="2009"/>
	City Saint Louis State MO Zip Code 63179-0408	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Payment, See Below	<input type="text" value="1231.85"/>
	Candidate Name	Category/Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Monocle Restaurant on Capitol Hill	Transaction ID: D279351 Date of Disbursement
	Mailing Address 107 D Street NE	<input type="text" value="04"/> / <input type="text" value="07"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement Catering	<input type="text" value="1190.00"/>
	Candidate Name	Category/Type
	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) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) The Business Bank Cardmember Services	Transaction ID: D283219 Date of Disbursement
	Mailing Address PO Box 790408	<input type="text" value="06"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
	City Saint Louis State MO Zip Code 63179-0408	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Payment, See Below	<input type="text" value="315.95"/>
	Candidate Name	Category/Type
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1547.80"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

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NAME OF COMMITTEE (In Full)  
Missourians for Accountability and Change (MACPAC)

A.

Full Name (Last, First, Middle Initial)  
American Airlines

Mailing Address 9200 NW 112th St

City State Zip Code  
Kansas City MO 64153-2003

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D283220

Date of Disbursement

/   /

Amount of Each Disbursement this Period

[MEMO ITEM]

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

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

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Missourians for Accountability and Change (MACPAC)

A.	Full Name (Last, First, Middle Initial) Friends For Harry Reid	Transaction ID: D278788 Date of Disbursement
	Mailing Address P.O. Box 19163	<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2009"/>
	City Las Vegas State NV Zip Code 89132	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name Harry Reid	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Friends of Blanche Lincoln	Transaction ID: D278789 Date of Disbursement
	Mailing Address P.O. Box 3197	<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2009"/>
	City Little Rock State AR Zip Code 72203	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name Blanche Lincoln	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Robin Carnahan for Senate	Transaction ID: D278217 Date of Disbursement
	Mailing Address P.O. Box 50378	<input type="text" value="03"/> / <input type="text" value="18"/> / <input type="text" value="2009"/>
	City Clayton State MO Zip Code 63105	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="5000.00"/>
	Candidate Name Robin Carnahan	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MO District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="7000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="7000.00"/>