

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Missouri Bankers Association Federal PAC

ADDRESS (number and street)

PO Box 1122

Check if different  
than previously  
reported. (ACC)

Jefferson City

MO

65102

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00172494

3. IS THIS  
REPORTNEW  
(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  
Year-End 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

M M M / D D D / Y Y Y Y Y Y

in the  
State of(d) 30-Day  
POST-Election  
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
01 01 2021

through

M M M / D D D / Y Y Y Y Y Y  
03 31 2021

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

L, Craig, , Mr., Overfelt

Type or Print Name of Treasurer

Signature of Treasurer

L, Craig, , Mr., Overfelt

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
04 12 2021

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Missouri Bankers Association Federal PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
01		01		2021

To:

M M	/	D D	/	Y Y Y Y Y
03		31		2021

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <div><div>Y Y Y Y Y</div><div>2021</div></div>		<div><div></div><div>68666.43</div></div>
(b) Cash on Hand at Beginning of Reporting Period.....	<div><div></div><div>68666.43</div></div>	
(c) Total Receipts (from Line 19) .....	<div><div></div><div>8210.33</div></div>	<div><div></div><div>8210.33</div></div>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<div><div></div><div>76876.76</div></div>	<div><div></div><div>76876.76</div></div>
7. Total Disbursements (from Line 31).....	<div><div></div><div>51000.00</div></div>	<div><div></div><div>51000.00</div></div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<div><div></div><div>25876.76</div></div>	<div><div></div><div>25876.76</div></div>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<div><div></div><div>0.00</div></div>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<div><div></div><div>0.00</div></div>	



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. 05/2016)

Page 3

Write or Type Committee Name

Missouri Bankers Association Federal PAC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	2	1

To:

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

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).....	6500.00	6500.00
(ii) Unitemized .....	1702.00	1702.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	8202.00	8202.00
(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) .....	8202.00	8202.00
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	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	8.33	8.33
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 Transfers (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)) .....	8210.33	8210.33
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	8210.33	8210.33

**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) Allocated 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 .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	51000.00	51000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated 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)) ..	51000.00	51000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	51000.00	51000.00

**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) .....	8202.00	8202.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	8202.00	8202.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

# **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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Missouri Bankers Association Federal PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Buckner, J. R., , Mr., II**

Mailing Address 1251 SW Oldham Pkwy

City

Lees Summit

State

MO

Zip Code

64081-2489

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

First Community Bank

Occupation (for Individual)

Executive Vice President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2021

**Transaction ID : 83860152**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Harlin, John, L, ,**

Mailing Address P O Box 68

City

Gainesville

State

MO

Zip Code

65655-0068

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Century Bank of the Ozarks

Occupation (for Individual)

Chairman

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2021

**Transaction ID : 83860155**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Harlin, Missy, , ,**

Mailing Address 39 Court Square

City

Gainesville

State

MO

Zip Code

65655-8138

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-employed

Occupation (for Individual)

Self-employed

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2021

**Transaction ID : 83860156**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

750.00

# **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)

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NAME OF COMMITTEE (In Full)

**Missouri Bankers Association Federal PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Harlin, Chris, , ,**

Mailing Address 39 Court Square

City  
Gainesville

State  
MO

Zip Code  
65655-8138

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Century Bank of the Ozarks

Occupation (for Individual)  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2021

**Transaction ID : 83860157**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Harlin, Linda, , ,**

Mailing Address 112 Strong Dr

City  
Gainesville

State  
MO

Zip Code  
65655-7437

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Century Bank of the Ozarks

Occupation (for Individual)  
Marketing Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2021

**Transaction ID : 83860158**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Trivitt, Bill, , ,**

Mailing Address HC 4 Box 142

City  
Gainesville

State  
MO

Zip Code  
65655-9717

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Century Bank of the Ozarks

Occupation (for Individual)  
Senior Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2021

**Transaction ID : 83860161**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

750.00

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

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

FOR LINE NUMBER: PAGE 8 OF 14

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Missouri Bankers Association Federal PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Cryslar, Chris, , ,

Mailing Address 107 Mooreland Drive

City  
CaruthersvilleState  
MOZip Code  
63830-2336FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
First State Bank & Trust Company, Inc.Occupation (for Individual)  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2021

Transaction ID : 83860168

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Petersen, Glenn, Owen, ,

Mailing Address 400 Broad

City  
WardellState  
MOZip Code  
63879-9156FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
First State Bank & Trust Company, Inc.Occupation (for Individual)  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2021

Transaction ID : 83860169

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Dunagan, Nick, , ,

Mailing Address 138 Kelly West Dr

City  
MartinState  
TNZip Code  
38237-2300FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
First State Bank & Trust Company, Inc.Occupation (for Individual)  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2021

Transaction ID : 83860170

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

900.00

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 9 OF 14  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Missouri Bankers Association Federal PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VanAusdall, Rogers, , , Jr.**

Mailing Address 14 Mooreland Drive

City  
Caruthersville

State  
MO

Zip Code  
63830-2358

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
First State Bank & Trust Company, Inc.

Occupation (for Individual)  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 25 / 2021

**Transaction ID : 83860171**

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Townsend, William, E., ,**

Mailing Address 1901 Ward Ave

City  
Caruthersville

State  
MO

Zip Code  
63830-2559

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
First State Bank & Trust Company, Inc.

Occupation (for Individual)  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 25 / 2021

**Transaction ID : 83860172**

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Whitener, Glen, , ,**

Mailing Address 173 County Hwy 344

City  
Hayti

State  
MO

Zip Code  
63851-9145

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
First State Bank & Trust Company, Inc.

Occupation (for Individual)  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 25 / 2021

**Transaction ID : 83860182**

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

900.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Missouri Bankers Association Federal PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Strautz, David, P., ,

Mailing Address 662 Bluff Manor Circle

City  
Saint Charles

State  
MO

Zip Code  
63303-1516

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

First State Bank of St. Charles

Occupation (for Individual)

Chairman of the Board

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 25 / 2021

Transaction ID : 83860187

Amount of Each Receipt this Period

350.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Patterson, Sara, , ,

Mailing Address P O Box 281

City  
Risco

State  
MO

Zip Code  
63874-0281

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

First State Bank & Trust Company, Inc.

Occupation (for Individual)

CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2021

Transaction ID : 83860188

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Funk, Sandra, , ,

Mailing Address P O Box 245

City  
Gainesville

State  
MO

Zip Code  
65655-0100

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Century Bank of the Ozarks

Occupation (for Individual)

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2021

Transaction ID : 83860189

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

900.00

# 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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Missouri Bankers Association Federal PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Drake, Matthew, , ,

Mailing Address 100 W 3rd St

City  
Caruthersville

State  
MO

Zip Code  
63830-1356

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
First State Bank & Trust Company, Inc.

Occupation (for Individual)  
President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2021

Transaction ID : 83860190

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Henegar, Ed, , ,

Mailing Address Box 426

City  
Gainesville

State  
MO

Zip Code  
65655-0426

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Century Bank of the Ozarks

Occupation (for Individual)  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2021

Transaction ID : 83860191

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Crawford, Lance, , ,

Mailing Address 100 W 3rd St

City  
Caruthersville

State  
MO

Zip Code  
63830-1356

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
First State Bank & Trust Company, Inc.

Occupation (for Individual)  
EVP/COO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2021

Transaction ID : 83860193

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

850.00

# **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 OF 14

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Missouri Bankers Association Federal PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Petersen, Eric, , ,**

Mailing Address PO Box 116

City  
Wardell

State  
MO

Zip Code  
63879-0116

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
First State Bank and Trust Co., Inc.

Occupation (for Individual)  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2021

**Transaction ID : 83860199**

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Droste, James, R, ,**

Mailing Address 3033 Mockingbird Dr

City

Saint Charles

State  
MO

Zip Code  
63301-1219

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
First State Bank of St Charles

Occupation (for Individual)  
Bank Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2021

**Transaction ID : 83860209**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Lawrence, Bruce, , ,**

Mailing Address 609 Laurelwood Ave

City

Sikeston

State  
MO

Zip Code  
63801-4621

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
First State Bank & Trust Co., Inc.

Occupation (for Individual)  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2021

**Transaction ID : 83860225**

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

1100.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 OF 14  
(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)

Missouri Bankers Association Federal PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Goellner, Christopher, , ,

Mailing Address 95 Green Number Nine Dr

City  
Saint Charles

State  
MO

Zip Code  
63303-5092

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Goellner Printing, Inc.

Occupation (for Individual)  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2021

Transaction ID : 83860235

Amount of Each Receipt this Period

350.00

☐ Memo Item

Contribution from Individual

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

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

350.00

6500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 14

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<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)

Missouri Bankers Association Federal PAC

Full Name (Last, First, Middle Initial)

**A. ABA BankPAC**

Mailing Address 1120 Connecticut Avenue

City  
WashingtonState  
DCZip Code  
20036Purpose of Disbursement  
Transfer to Affiliated Committee

008

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2021

FEC Identification Number

C C00004275

Transaction ID : 83860226

Amount of Each Disbursement this Period

51000.00

Transfer to Affiliated Committee

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

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

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

51000.00

51000.00