

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 RISING ACTION

ADDRESS (number and street) **131 EAST HIGH ST.**
Check if different than previously reported. (ACC) **JEFFERSON CITY MO 65101**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00652875 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 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 / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on **11** / **06** / **2018** in the State of **MO**

5. Covering Period **10** / **18** / **2018** through **11** / **26** / **2018**

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 **Hayes, Deanna, , ,**

Signature of Treasurer **Hayes, Deanna, , ,** [Electronically Filed] Date **12** / **06** / **2018**

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

MISSOURI RISING ACTION

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>	<input type="text" value="0.12"/>	<input type="text" value="0.12"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="360344.73"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="513394.00"/>	<input type="text" value="2915436.76"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="873738.73"/>	<input type="text" value="2915436.88"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="844739.39"/>	<input type="text" value="2886437.54"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="28999.34"/>	<input type="text" value="28999.34"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

MISSOURI RISING ACTION

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).....	512334.00	2914224.00
(ii) Unitemized	60.00	212.76
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	512394.00	2914436.76
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	1000.00	1000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	513394.00	2915436.76
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.).....	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 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)).....▶	513394.00	2915436.76
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	513394.00	2915436.76

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

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	243038.03	555358.79
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	243038.03	555358.79
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	601701.36	2331078.75
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)) ..	844739.39	2886437.54
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	844739.39	2886437.54

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	513394.00	2915436.76
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	513394.00	2915436.76
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	243038.03	555358.79
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	243038.03	555358.79

**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 OF 38
	<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)
MISSOURI RISING ACTION

A. Beren, Adam, E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1739 N Duckcross Cv
 City Wichita State KS Zip Code 67205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Berexco LLC Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 11 / 02 / 2018
Transaction ID : SA11AI.4455
 Amount of Each Receipt this Period 25000.00
 Memo Item Contribution

B. Brundage, Thomas, O., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8000 IH 10 West Ste 705
 City San Antonio State TX Zip Code 78230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Brundage Management Co Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 01 / 2018
Transaction ID : SA11AI.4476
 Amount of Each Receipt this Period 1000.00
 Memo Item Contribution

C. Busch, August, , , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1011 Seasons View
 City Fenton State MO Zip Code 63026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275000.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11AI.4456
 Amount of Each Receipt this Period 25000.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....▶	51000.00
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 7 OF 38
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MISSOURI RISING ACTION

A. Chazen, Stephen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. Box 1229

City Bellaire	State TX	Zip Code 77402
------------------	-------------	-------------------

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

Name of Employer (for Individual) Magnolia Oil and Gas	Occupation (for Individual) Corporate Officer
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2018

Transaction ID : SA11AI.4472

Amount of Each Receipt this Period
15000.00

Memo Item Contribution

B. Childs, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 165 Sago Palm Road

City Vero Beach	State FL	Zip Code 32963
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JW Childs Associates LP	Occupation (for Individual) Chairman
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2018

Transaction ID : SA11AI.4464

Amount of Each Receipt this Period
20000.00

Memo Item Contribution

C. Farr, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 Fair Oaks Dr

City St. Louis	State MO	Zip Code 63124
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Emerson Electric Co	Occupation (for Individual) Executive
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2018

Transaction ID : SA11AI.4460

Amount of Each Receipt this Period
25000.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	60000.00
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 OF 38
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
MISSOURI RISING ACTION

A. Fox, Sam, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7701 Forsyth Blvd, Ste 600
 City St. Louis State MO Zip Code 63105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Harbour Group Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300000.00

Date of Receipt 10 / 19 / 2018
Transaction ID : SA11AI.4353
 Amount of Each Receipt this Period 50000.00
 Memo Item Contribution

B. Griffin, Kenneth, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 S Dearborn St Ste 32
 City Chicago State IL Zip Code 60603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Citadel Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250000.00

Date of Receipt 10 / 30 / 2018
Transaction ID : SA11AI.4466
 Amount of Each Receipt this Period 250000.00
 Memo Item Contribution

C. Joyce, Charles, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O Box 330
 City Wellsville State NY Zip Code 14895
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Otis Eastern Service LLC Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 29 / 2018
Transaction ID : SA11AI.4458
 Amount of Each Receipt this Period 5000.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	305000.00
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 9 OF 38
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
MISSOURI RISING ACTION

A. Klingenstein, Thomas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1410 Broadway
 City New York State NY Zip Code 10018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Cohen Klingenstein LLP Occupation (for Individual) Investment Counselor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt **10 / 25 / 2018**
Transaction ID : SA11AI.4475
 Amount of Each Receipt this Period 25000.00
 Memo Item Contribution

B. Lee, Francis, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 417 Liberty Park Dr
 City Flowood State MS Zip Code 39232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Lee Timber Co Occupation (for Individual) Timber
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt **10 / 26 / 2018**
Transaction ID : SA11AI.4462
 Amount of Each Receipt this Period 10000.00
 Memo Item Contribution

C. Miller, Dana, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 Fairway Drive, P.O. Box 807
 City La Crosse State KS Zip Code 67548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIS Occupation (for Individual) Retirement Plan Specialist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **11 / 01 / 2018**
Transaction ID : SA11AI.4459
 Amount of Each Receipt this Period 1000.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....▶	36000.00
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 10 OF 38
	<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 RISING ACTION

A. Morrison, Carla, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 727 Lari Dawn
 City San Antonio State TX Zip Code 78258
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Brundage Management Co Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 01 / 2018
Transaction ID : SA11AI.4457
 Amount of Each Receipt this Period 1000.00
 Memo Item Contribution

B. Orscheln, Robert, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5938 Screaming Eagle Lane
 City Columbia State MO Zip Code 65201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Orscheln Products LLC Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7500.00

Date of Receipt 11 / 01 / 2018
Transaction ID : SA11AI.4469
 Amount of Each Receipt this Period 5000.00
 Memo Item Contribution

C. Orscheln, William, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 280
 City Moberly State MO Zip Code 65270
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Orscheln Management Co. Occupation (for Individual) Chairman & CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 7500.00

Date of Receipt 11 / 01 / 2018
Transaction ID : SA11AI.4477
 Amount of Each Receipt this Period 5000.00
 Memo Item Contribution

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 11 OF 38
<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 RISING ACTION

A. Pfautch, Roy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 52 Portland Pl
 City St.Louis State MO Zip Code 63108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Civic Service Inc Occupation (for Individual) Owner and Founder
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11AI.4470
 Amount of Each Receipt this Period 10000.00
 Memo Item Contribution

B. Qualy, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 Brentmoor Park
 City St. Louis State MO Zip Code 63105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 27 / 2018
Transaction ID : SA11AI.4465
 Amount of Each Receipt this Period 1000.00
 Memo Item Contribution

C. Rayes, Patrick, O, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4212 Lomo Alto Apt 101
 City Dallas State TX Zip Code 75219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Rayes Inc. Occupation (for Individual) Oil and Gas Developer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 11 / 01 / 2018
Transaction ID : SA11AI.4468
 Amount of Each Receipt this Period 5000.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	16000.00
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 OF 38
	<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 RISING ACTION

A. Schnucks, Terry, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 237 Linden Avenue
 City St. Louis State MO Zip Code 63105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Producer
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **11 / 01 / 2018**
Transaction ID : SA11AI.4474
 Amount of Each Receipt this Period 5000.00
 Memo Item Contribution

B. Scrivner, Douglas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25461 W. Fremont Rd.
 City Los Altos Hills State CA Zip Code 94022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **10 / 27 / 2018**
Transaction ID : SA11AI.4461
 Amount of Each Receipt this Period 5000.00
 Memo Item Contribution

C. Strata Products Worldwide LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8995 Roswell Road
 City Sandy Springs State GA Zip Code 30350
 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 ▼ 3334.00

Date of Receipt **10 / 23 / 2018**
Transaction ID : SA11AI.4473
 Amount of Each Receipt this Period 3334.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....▶	13334.00
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 13 OF 38
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
MISSOURI RISING ACTION

A. Switzer, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 413 Maple Rise Path

City Chesterfield	State MO	Zip Code 63005
----------------------	-------------	-------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2018

Transaction ID : SA11AI.4463

Amount of Each Receipt this Period
5000.00

Memo Item Contribution

B. Templeton, William, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6914 Oak Manor Drive

City Dallas	State TX	Zip Code 75230
----------------	-------------	-------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2018

Transaction ID : SA11AI.4478

Amount of Each Receipt this Period
5000.00

Memo Item Contribution

C. Templeton, William, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6914 Oak Manor Drive

City Dallas	State TX	Zip Code 75230
----------------	-------------	-------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
20000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2018

Transaction ID : SA11AI.4479

Amount of Each Receipt this Period
10000.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	20000.00
TOTAL This Period (last page this line number only).....	512334.00

**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 14 OF 38
<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)
MISSOURI RISING ACTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MILA PAC		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 14 / 2018
Mailing Address 308 E High Street Ste 301		Transaction ID : SA11C.4432
City Jefferson Coty	State MO	Zip Code 65101
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual)	Occupation (for Individual)	<input type="checkbox"/> Memo Item Contribution- State PAC
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

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

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

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

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"/> 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 RISING ACTION

Full Name (Last, First, Middle Initial)

A. America Rising Corp

Mailing Address 1500 Wilson Blvd 5th Floor

City Arlington State VA Zip Code 22209

Purpose of Disbursement
Research Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 01 / 2018

FEC Identification Number

C
Transaction ID : SB21B.4420
Amount of Each Disbursement this Period
25390.00

Memo Item

Full Name (Last, First, Middle Initial)

B. America Rising Corp

Mailing Address 1500 Wilson Blvd 5th Floor

City Arlington State VA Zip Code 22209

Purpose of Disbursement
Research Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 02 / 2018

FEC Identification Number

C
Transaction ID : SB21B.4418
Amount of Each Disbursement this Period
6728.14

Memo Item

Full Name (Last, First, Middle Initial)

C. America Rising Corp

Mailing Address 1500 Wilson Blvd 5th Floor

City Arlington State VA Zip Code 22209

Purpose of Disbursement
Research Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 02 / 2018

FEC Identification Number

C
Transaction ID : SB21B.4419
Amount of Each Disbursement this Period
3207.30

Memo Item

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

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

35325.44

**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"/> 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 RISING ACTION

A. America Rising Corp

Full Name (Last, First, Middle Initial)

Mailing Address 1500 Wilson Blvd 5th Floor

City Arlington State VA Zip Code 22209

Purpose of Disbursement Research Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 06 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4421

Amount of Each Disbursement this Period: 10800.00

Memo Item

B. Chain Bridge Bank

Full Name (Last, First, Middle Initial)

Mailing Address 1445-A Laughlin Ave

City McLean State VA Zip Code 22101

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 24 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4325

Amount of Each Disbursement this Period: 40.00

Memo Item

C. Chain Bridge Bank

Full Name (Last, First, Middle Initial)

Mailing Address 1445-A Laughlin Ave

City McLean State VA Zip Code 22101

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 29 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4487

Amount of Each Disbursement this Period: 40.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 10880.00

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"/> 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 RISING ACTION

A. Chain Bridge Bank

Full Name (Last, First, Middle Initial)

Mailing Address 1445-A Laughlin Ave

City McLean State VA Zip Code 22101

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 29 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4488

Amount of Each Disbursement this Period: 40.00

Memo Item

B. Chain Bridge Bank

Full Name (Last, First, Middle Initial)

Mailing Address 1445-A Laughlin Ave

City McLean State VA Zip Code 22101

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 01 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4489

Amount of Each Disbursement this Period: 40.00

Memo Item

C. Chain Bridge Bank

Full Name (Last, First, Middle Initial)

Mailing Address 1445-A Laughlin Ave

City McLean State VA Zip Code 22101

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 05 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4490

Amount of Each Disbursement this Period: 40.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 120.00

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"/> 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 RISING ACTION

A. Chain Bridge Bank

Full Name (Last, First, Middle Initial)

Mailing Address 1445-A Laughlin Ave

City McLean State VA Zip Code 22101

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 06 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4491

Amount of Each Disbursement this Period: 40.00

Memo Item

B. Chain Bridge Bank

Full Name (Last, First, Middle Initial)

Mailing Address 1445-A Laughlin Ave

City McLean State VA Zip Code 22101

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 06 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4492

Amount of Each Disbursement this Period: 40.00

Memo Item

C. Chain Bridge Bank

Full Name (Last, First, Middle Initial)

Mailing Address 1445-A Laughlin Ave

City McLean State VA Zip Code 22101

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 06 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4493

Amount of Each Disbursement this Period: 40.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 120.00

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"/> 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 RISING ACTION

Full Name (Last, First, Middle Initial)

A. Chain Bridge Bank

Mailing Address 1445-A Laughlin Ave

City McLean State VA Zip Code 22101

Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 08 / 2018

FEC Identification Number

C
Transaction ID : SB21B.4494
Amount of Each Disbursement this Period
19.95

Memo Item

Full Name (Last, First, Middle Initial)

B. Chain Bridge Bank

Mailing Address 1445-A Laughlin Ave

City McLean State VA Zip Code 22101

Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 08 / 2018

FEC Identification Number

C
Transaction ID : SB21B.4495
Amount of Each Disbursement this Period
19.95

Memo Item

Full Name (Last, First, Middle Initial)

C. Chain Bridge Bank

Mailing Address 1445-A Laughlin Ave

City McLean State VA Zip Code 22101

Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 09 / 2018

FEC Identification Number

C
Transaction ID : SB21B.4496
Amount of Each Disbursement this Period
19.95

Memo Item

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

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

59.85

**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"/> 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 RISING ACTION

Full Name (Last, First, Middle Initial)

A. Grand Slam Finance

Mailing Address 3200 Appennini Way

City Cedar Park State TX Zip Code 78613

Purpose of Disbursement
Accounting and Compliance

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 26 / 2018

FEC Identification Number

C
Transaction ID : SB21B.4480
Amount of Each Disbursement this Period
5725.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Jones Day

Mailing Address 51 Louisiana Avenue, N.W.

City Washington State DC Zip Code 20001

Purpose of Disbursement
Legal Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 06 / 2018

FEC Identification Number

C
Transaction ID : SB21B.4430
Amount of Each Disbursement this Period
18386.62

Memo Item

Full Name (Last, First, Middle Initial)

C. Mack Brook Co.

Mailing Address 6059 Kenwood Avenue

City Dallas State TX Zip Code 75205

Purpose of Disbursement
Fundraising Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 02 / 2018

FEC Identification Number

C
Transaction ID : SB21B.4416
Amount of Each Disbursement this Period
7500.00

Memo Item

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

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

31611.62

**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"/> 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 RISING ACTION

A. Mack Brook Co.

Full Name (Last, First, Middle Initial)

Mailing Address 6059 Kenwood Avenue

City Dallas State TX Zip Code 75205

Purpose of Disbursement Fundraising Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 07 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4428

Amount of Each Disbursement this Period: 4000.00

Memo Item

B. Mouton, Paul, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 24604 Juno Lane

City Webb City State MO Zip Code 64870

Purpose of Disbursement Coalitions Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 05 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4423

Amount of Each Disbursement this Period: 5000.00

Memo Item

C. Right Country Lists

Full Name (Last, First, Middle Initial)

Mailing Address 117 North Saint Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement List rental

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 06 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4499

Amount of Each Disbursement this Period: 5790.21

Memo Item

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

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

50790.21

**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"/> 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 RISING ACTION

Full Name (Last, First, Middle Initial)

A. Targeted Victory

Mailing Address 1100 Wilson Blvd, 10th Floor

City Arlington State VA Zip Code 22209

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.4482
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Targeted Victory

Mailing Address 1100 Wilson Blvd, 10th Floor

City Arlington State VA Zip Code 22209

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.4483
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Targeted Victory

Mailing Address 1100 Wilson Blvd, 10th Floor

City Arlington State VA Zip Code 22209

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.4484
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 checked="" type="checkbox"/> 21b	<input 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 RISING ACTION

Full Name (Last, First, Middle Initial)

A. Targeted Victory

Mailing Address 1100 Wilson Blvd, 10th Floor

City Arlington State VA Zip Code 22209

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 01 / 2018

FEC Identification Number

C
Transaction ID : SB21B.4485
Amount of Each Disbursement this Period
656.00

Memo Item

Full Name (Last, First, Middle Initial)

B. The KAM Co.

Mailing Address 233 W. 53rd Ter

City Kansas City State MO Zip Code 64112

Purpose of Disbursement
Fundraising Consulting

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 19 / 2018

FEC Identification Number

C
Transaction ID : SB21B.4501
Amount of Each Disbursement this Period
3750.00

Memo Item

Full Name (Last, First, Middle Initial)

C. The KAM Co.

Mailing Address 233 W. 53rd Ter

City Kansas City State MO Zip Code 64112

Purpose of Disbursement
Shipping Fee

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 25 / 2018

FEC Identification Number

C
Transaction ID : SB21B.4326
Amount of Each Disbursement this Period
61.45

Memo Item

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

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

4467.45

**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"/> 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 RISING ACTION

Full Name (Last, First, Middle Initial)

A. The KAM Co.

Mailing Address 233 W. 53rd Ter

City Kansas City State MO Zip Code 64112

Purpose of Disbursement Fundraising Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 25 / 2018

FEC Identification Number

C
Transaction ID : SB21B.4327
Amount of Each Disbursement this Period
3750.00

Memo Item

Full Name (Last, First, Middle Initial)

B. The KAM Co.

Mailing Address 233 W. 53rd Ter

City Kansas City State MO Zip Code 64112

Purpose of Disbursement Fundraising Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 02 / 2018

FEC Identification Number

C
Transaction ID : SB21B.4417
Amount of Each Disbursement this Period
7500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. The KAM Co.

Mailing Address 233 W. 53rd Ter

City Kansas City State MO Zip Code 64112

Purpose of Disbursement Fundraising Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 07 / 2018

FEC Identification Number

C
Transaction ID : SB21B.4427
Amount of Each Disbursement this Period
40000.00

Memo Item

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

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

51250.00

**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"/> 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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
MISSOURI RISING ACTION

Full Name (Last, First, Middle Initial)

A. The Morning Group

Mailing Address 5918 4th Street NW

City Washington State DC Zip Code 20011

Purpose of Disbursement Fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 26 / 2018

FEC Identification Number

C
Transaction ID : SB21B.4415
Amount of Each Disbursement this Period
7500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. The Morning Group

Mailing Address 5918 4th Street NW

City Washington State DC Zip Code 20011

Purpose of Disbursement Fundrasing Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify)

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 08 / 2018

FEC Identification Number

C
Transaction ID : SB21B.4422
Amount of Each Disbursement this Period
40000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. The Morning Group

Mailing Address 5918 4th Street NW

City Washington State DC Zip Code 20011

Purpose of Disbursement Fundraising Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 14 / 2018

FEC Identification Number

C
Transaction ID : SB21B.4434
Amount of Each Disbursement this Period
7500.00

Memo Item

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

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

55000.00

**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"/> 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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
MISSOURI RISING ACTION

Full Name (Last, First, Middle Initial)

A. The Sahl Company

Mailing Address 16714 Fitzhugh Road

City Dripping Springs State TX Zip Code 78620

Purpose of Disbursement
Fundraising Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 05 / 2018

FEC Identification Number

C

Transaction ID : SB21B.4425

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify)

Category/
Type

Date of Disbursement

M M / 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

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / 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)..... ▶

500.00

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

243038.03

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) MISSOURI RISING ACTION
FEC IDENTIFICATION NUMBER C C00652875

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Campaign Inbox LLC
Mailing Address 601 New Jersey Ave NW Suite 400
City Washington State DC Zip Code 20001
Purpose of Expenditure MO GOTV Email Rental Category/Type 004
Date of Public Distribution/Dissemination 11/05/2018
Amount 1500.00
Transaction ID: SE.4409
Date of Disbursement or Obligation 11/05/2018

Name of Federal Candidate: MCCASKILL, CLAIRE, , ,
Support Oppose
Office Sought: House Senate State: MO
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee Columbia Daily Tribune
Mailing Address 101 N. 4th Street
City Columbia State MO Zip Code 65201
Purpose of Expenditure Print Ad Placement and Production Category/Type 004
Date of Public Distribution/Dissemination 11/02/2018
Amount 2000.00
Transaction ID: SE.4378
Date of Disbursement or Obligation 11/02/2018

Name of Federal Candidate: MCCASKILL, CLAIRE, , ,
Support Oppose
Office Sought: House Senate State: MO
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 3500.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hayes, Deanna, , ,

[Electronically Filed]

Date 12/06/2018

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) MISSOURI RISING ACTION	FEC IDENTIFICATION NUMBER ▼ C C00652875
--	--

Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item Columbia Daily Tribune	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 101 N. 4th Street	Amount <input type="text"/>
City Columbia State MO Zip Code 65201	Transaction ID : SE.4412 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Print Ad Placement (Estimated) Category/Type 004	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose MCCASKILL, CLAIRE, , , Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: MO
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 1180648.75	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item Connection Strategy LLC	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address PO Box 25913	Amount <input type="text"/>
City Alexandria State VA Zip Code 22313	Transaction ID : SE.4363 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure GOTV Phone Calls Category/Type 005	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose MCCASKILL, CLAIRE, , , Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: MO
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 978039.89	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 62585.72
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Hayes, Deanna, , , *[Electronically Filed]* Date / /

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) MISSOURI RISING ACTION
FEC IDENTIFICATION NUMBER C C00652875

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Connection Strategy LLC
Mailing Address PO Box 25913
City Alexandira State VA Zip Code 22313
Purpose of Expenditure Election Day GOTV Phone Calls
Category/Type 005
Name of Federal Candidate: MCCASKILL, CLAIRE, , ,
Office Sought: Senate State: MO
Disbursement For: General 2018
Amount 10000.00
Transaction ID: SE.4498

Full Name of Payee Conservative Connector LLC
Mailing Address PO Box 952
City Grandville State MI Zip Code 49468
Purpose of Expenditure Targeted Emails
Category/Type 004
Name of Federal Candidate: MCCASKILL, CLAIRE, , ,
Office Sought: Senate State: MO
Disbursement For: General 2018
Amount 4000.00
Transaction ID: SE.4405

(a) SUBTOTAL of Itemized Independent Expenditures 14000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hayes, Deanna, , ,

[Electronically Filed]

Date

12 / 06 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) MISSOURI RISING ACTION
FEC IDENTIFICATION NUMBER C C00652875

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee FP1 Digital LLC
Mailing Address 3001 Washington Blvd 7th Floor
City Arlington State VA Zip Code 22201
Purpose of Expenditure Digital Ad Placement and Production
Category/Type 004
Date of Public Distribution/Dissemination 11/01/2018
Amount 26250.00
Transaction ID : SE.4361
Date of Disbursement or Obligation 10/31/2018

Name of Federal Candidate: MCCASKILL, CLAIRE, , ,
Support Oppose
Office Sought: House Senate State: MO
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee FP1 Digital LLC
Mailing Address 3001 Washington Blvd 7th Floor
City Arlington State VA Zip Code 22201
Purpose of Expenditure Digital Ad Placement and Production
Category/Type 004
Date of Public Distribution/Dissemination 11/01/2018
Amount 26250.00
Transaction ID : SE.4364
Date of Disbursement or Obligation 11/01/2018

Name of Federal Candidate: MCCASKILL, CLAIRE, , ,
Support Oppose
Office Sought: House Senate State: MO
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 52500.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Hayes, Deanna, , , [Electronically Filed] Date 12/06/2018

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) MISSOURI RISING ACTION
FEC IDENTIFICATION NUMBER C C00652875

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee FP1 Digital LLC
Mailing Address 3001 Washington Blvd 7th Floor
City Arlington State VA Zip Code 22201
Purpose of Expenditure Digital Ad Placement and Production
Category/Type 004
Name of Federal Candidate: MCCASKILL, CLAIRE, , ,
Calendar Year-To-Date Per Election for Office Sought 1117025.40
Disbursement For: General 2018

Full Name of Payee FP1 Strategies LLC
Mailing Address 1826 Jefferson Place NW
City Washington State DC Zip Code 20036
Purpose of Expenditure Digital Ad Production
Category/Type 004
Name of Federal Candidate: MCCASKILL, CLAIRE, , ,
Calendar Year-To-Date Per Election for Office Sought 917454.17
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 95176.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hayes, Deanna, , ,

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Date 12 / 06 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) MISSOURI RISING ACTION
FEC IDENTIFICATION NUMBER C C00652875

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Hannibal Courier News
Mailing Address 200 N. 3rd Street
City Hannibal State MO Zip Code 63401
Purpose of Expenditure Print Ad Placement and Production
Category/Type 004
Name of Federal Candidate: MCCASKILL, CLAIRE, , ,
Office Sought: Senate State: MO
Calendar Year-To-Date Per Election for Office Sought 1023965.40
Disbursement For: General 2018

Full Name of Payee Intermarkets, Inc.
Mailing Address 11951 Freedom Drive, 11th Floor
City Reston State VA Zip Code 20190
Purpose of Expenditure Digital Ad Placement and Production
Category/Type 004
Name of Federal Candidate: MCCASKILL, CLAIRE, , ,
Office Sought: Senate State: MO
Calendar Year-To-Date Per Election for Office Sought 850028.17
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 41500.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hayes, Deanna, , ,

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Date 12 / 06 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) MISSOURI RISING ACTION
FEC IDENTIFICATION NUMBER C C00652875

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Joplin Globe
Mailing Address 117 East 4th Street
City Joplin State MO Zip Code 64801
Purpose of Expenditure Print Ad Placement and Production
Category/Type 004
Name of Federal Candidate: MCCASKILL, CLAIRE, , ,
Office Sought: Senate State: MO
Calendar Year-To-Date Per Election for Office Sought 1005539.89
Disbursement For: General 2018

Full Name of Payee Joplin Globe
Mailing Address 117 East 4th Street
City Joplin State MO Zip Code 64801
Purpose of Expenditure Print Ad Placement and Production
Category/Type 004
Name of Federal Candidate: MCCASKILL, CLAIRE, , ,
Office Sought: Senate State: MO
Calendar Year-To-Date Per Election for Office Sought 1005714.89
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 1425.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hayes, Deanna, , ,

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Date 12 / 06 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) MISSOURI RISING ACTION
FEC IDENTIFICATION NUMBER C C00652875

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Majority Strategies LLC
Mailing Address 12854 Kenan Dr Suite 145
City Jacksonville State FL Zip Code 32258
Purpose of Expenditure Print Ad Placement and Production
Category/Type 004
Date of Public Distribution/Dissemination 10/23/2018
Amount 221080.78
Transaction ID: SE.4319
Date of Disbursement or Obligation 10/24/2018

Name of Federal Candidate: MCCASKILL, CLAIRE, ,
Support Oppose
Office Sought: House Senate State: MO
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee National Cable Communications, LLC
Mailing Address 7501 Wisconsin Avenue, Suite 800 E
City Bethesda State MD Zip Code 20814
Purpose of Expenditure Digital Ad Placement and Production
Category/Type 004
Date of Public Distribution/Dissemination 10/30/2018
Amount 30000.00
Transaction ID: SE.4356
Date of Disbursement or Obligation 10/29/2018

Name of Federal Candidate: MCCASKILL, CLAIRE, ,
Support Oppose
Office Sought: House Senate State: MO
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 251080.78
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Hayes, Deanna, ,

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Date 12/06/2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) MISSOURI RISING ACTION
FEC IDENTIFICATION NUMBER C C00652875

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee National Sales Production
Mailing Address 5321 Corporate Blvd
City Baton Rouge State LA Zip Code 70808
Purpose of Expenditure Digital Ad Placement and Production
Category/Type 004
Date of Public Distribution/Dissemination 11/04/2018
Amount 32073.00
Transaction ID: SE.4388
Date of Disbursement or Obligation 11/02/2018

Name of Federal Candidate: MCCASKILL, CLAIRE, ,
Support Oppose
Office Sought: House Senate State: MO
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee SE Missourian
Mailing Address PO Box 699
City Cape Girardeau State MO Zip Code 63701
Purpose of Expenditure Print Adf Placement and Production
Category/Type 004
Date of Public Distribution/Dissemination 11/02/2018
Amount 1750.00
Transaction ID: SE.4387
Date of Disbursement or Obligation 11/02/2018

Name of Federal Candidate: MCCASKILL, CLAIRE, ,
Support Oppose
Office Sought: House Senate State: MO
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 33823.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hayes, Deanna, ,

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Date 12/06/2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) MISSOURI RISING ACTION
FEC IDENTIFICATION NUMBER C C00652875

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Springfield News Leader
Mailing Address 651 Boonville Road
City Springfield State MO Zip Code 65086
Purpose of Expenditure Print Ad Placement and Production
Name of Federal Candidate: MCCASKILL, CLAIRE, , ,
Calendar Year-To-Date Per Election for Office Sought 1013465.40

Full Name of Payee St. Joseph News Press
Mailing Address 825 Edmond Street
City Saint Joseph State MO Zip Code 64501
Purpose of Expenditure Print Ad Placement and Production
Name of Federal Candidate: MCCASKILL, CLAIRE, , ,
Calendar Year-To-Date Per Election for Office Sought 1033025.40

(a) SUBTOTAL of Itemized Independent Expenditures 16810.51
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hayes, Deanna, , ,

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Date 12 / 06 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) MISSOURI RISING ACTION
FEC IDENTIFICATION NUMBER C C00652875

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee St. Louis Post Journal
Mailing Address 900 N. Tucker Blvd
City St Louis State MO Zip Code 63101
Purpose of Expenditure Print Ad Placement and Production
Category/Type 004
Date of Public Distribution/Dissemination 11/02/2018
Amount 20001.35
Transaction ID: SE.4385
Date of Disbursement or Obligation 11/02/2018

Name of Federal Candidate: MCCASKILL, CLAIRE, ,
Support Oppose
Office Sought: House Senate State: MO
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee The Examiner
Mailing Address 410 S. Liberty Street
City Independence State MO Zip Code 64050
Purpose of Expenditure Print Ad Placement and Production
Category/Type 004
Date of Public Distribution/Dissemination 11/04/2018
Amount 299.00
Transaction ID: SE.4383
Date of Disbursement or Obligation 11/02/2018

Name of Federal Candidate: MCCASKILL, CLAIRE, ,
Support Oppose
Office Sought: House Senate State: MO
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 20300.35
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hayes, Deanna, ,

[Electronically Filed]

Date 12/06/2018

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) MISSOURI RISING ACTION	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00652875 </div>
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Check if 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item The Kansas Star	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 02 / 2018						
Mailing Address 1601 McGee St	Amount 9000.00						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-bottom: 1px solid black;">City</td> <td style="width:33%; border-bottom: 1px solid black;">State</td> <td style="width:33%; border-bottom: 1px solid black;">Zip Code</td> </tr> <tr> <td>Kansas City</td> <td>MO</td> <td>64108</td> </tr> </table>		City	State	Zip Code	Kansas City	MO	64108
City		State	Zip Code				
Kansas City	MO	64108					
Purpose of Expenditure Print Ad Placement and Production							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose MCCASKILL, CLAIRE, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: MO						
Calendar Year-To-Date Per Election for Office Sought 1022465.40	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____						

Full Name of Payee <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y						
Mailing Address	Amount 						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-bottom: 1px solid black;">City</td> <td style="width:33%; border-bottom: 1px solid black;">State</td> <td style="width:33%; border-bottom: 1px solid black;">Zip Code</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>		City	State	Zip Code			
City		State	Zip Code				
Purpose of Expenditure							
Name of Federal Candidate: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: _____						
Calendar Year-To-Date Per Election for Office Sought 	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____						

(a) SUBTOTAL of Itemized Independent Expenditures ▶	9000.00
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	
(c) TOTAL Independent Expenditures ▶	601701.36

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hayes, Deanna, , ,

[Electronically Filed]

Date M M / D D / Y Y Y Y Y Y
12 / 06 / 2018

Signature