

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

RECEIVED
FEDERAL ELECTION
COMMISSION
ADMINISTRATIVE DIVISION

Dec 19 11 52 AM '94

1. NAME OF COMMITTEE (in full)
St. Louisians For Better Government

ADDRESS (number and street) Check if different than previously reported
40 Bernard Pasternak
41 Claverock Drive

CITY, STATE and ZIP CODE
St. Louis, Missouri 63105

2. FEC IDENTIFICATION NUMBER
C-00148135

3. This committee has qualified as a multicandidate committee. (see FEC FORM 1M)
See Note Below

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report

Note: In accordance with correspondence from FEC dated 12-93 this committee has satisfied criteria of multicandidate status prior to 1-1-92

Monthly Report Due On:

<input type="checkbox"/> February 20	<input type="checkbox"/> June 20	<input type="checkbox"/> October 20
<input type="checkbox"/> March 20	<input type="checkbox"/> July 20	<input type="checkbox"/> November 20
<input type="checkbox"/> April 20	<input type="checkbox"/> August 20	<input type="checkbox"/> December 20
<input type="checkbox"/> May 20	<input type="checkbox"/> September 20	<input type="checkbox"/> January 31

Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____

Thirtieth day report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5.	Covering Period <u>Jan 1, 1994</u> through <u>Mar 31, 1994</u>		
6.	(a) Cash on Hand January 1, 19 <u>94</u>		\$ <u>34718.58</u>
	(b) Cash on Hand at Beginning of Reporting Period	\$ <u>34718.52</u>	
	(c) Total Receipts (from Line 19)	\$ <u>31449.63</u>	\$ <u>31449.63</u>
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ <u>66168.21</u>	\$ <u>66168.21</u>
7.	Total Disbursements (from Line 30)	\$ <u>11703.69</u>	\$ <u>11703.69</u>
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ <u>54464.52</u>	\$ <u>54464.52</u>
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ <u>284.60</u>	

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
Bernard Pasternak

Signature of Treasurer
Bernard Pasternak

Date
April 14, 1994

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 8437g.

34038241976

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X**

(Revised 1/1/91)

NAME OF COMMITTEE
St. Louisian for Better Government

REPORT COVERING PERIOD
FROM *Jan 1, 1996* TO *Nov 31, 1996*

		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11.	Contributions (other than loans) From:		
a.	Individual/Persons Other Than Political Committees		
i.	Itemized (use Schedule A)	<i>31250.00</i>	<i>31250.00</i>
ii.	Unitemized		
iii.	Total (add i and ii) >	<i>31250.00</i>	<i>31250.00</i>
b.	Political Party Committees		
c.	Other Political Committees (such as PACs)		
d.	Total Contributions (add a, b, and c) >	<i>31250.00</i>	<i>31250.00</i>
12.	Transfers From Affiliated/Other Party Committees		
13.	All Loans Received		
14.	Loan Repayments Received		
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)		
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17.	Other Federal Receipts (Dividends, Interest, etc.)	<i>199.63</i>	<i>199.63</i>
18.	Transfers from Nonfederal Account for Joint Activity		
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	<i>31449.63</i>	<i>31449.63</i>
20.	Total Federal Receipts (subtract line 18 from line 19) >	<i>31449.63</i>	<i>31449.63</i>
II. Disbursements			
21.	Operating Expenditures:		
a.	Shared Federal/Non-Federal Activity (from Schedule H4)		
i.	Federal Share		
ii.	Non-Federal Share		
b.	Other Federal Operating Expenditures	<i>1703.69</i>	<i>1703.69</i>
c.	Total Operating Expenditures (add a i, ii, and b) >	<i>1703.69</i>	<i>1703.69</i>
22.	Transfers to Affiliated/Other Party Committees		
23.	Contributions to Federal Candidates/Committees and Other Political Committees	<i>10000.00</i>	<i>10000.00</i>
24.	Independent Expenditures (use Schedule E)		
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)		
26.	Loan Repayments Made		
27.	Loans Made		
28.	Refunds of Contributions To:		
a.	Individuals/Persons Other Than Political Committees		
b.	Political Party Committees		
c.	Other Political Committees (such as PACs)		
d.	Total Contribution Refunds (add a, b and c) >		
29.	Other Disbursements		
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	<i>11703.69</i>	<i>11703.69</i>
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >	<i>11703.69</i>	<i>11703.69</i>
III. Net Contributions/Operating Expenditures			
32.	Total Contributions (other than loans)(from line 11d)	<i>31250.00</i>	<i>31250.00</i>
33.	Total Contribution Refunds (from line 28d)		
34.	Net Contributions (other than loans)(subtract line 33 from 32)	<i>31250.00</i>	<i>31250.00</i>
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	<i>1703.69</i>	<i>1703.69</i>
36.	Offsets to Operating Expenditures (from line 15)		
37.	Net Operating Expenditures (subtract line 36 from 35) >	<i>1703.69</i>	<i>1703.69</i>

24038941977

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 15
FOR LINE NUMBER 11.2.1.

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)

St. Louisians For Better Government

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jacques A. Herzog 23 Portland Drive St. Louis, MO 63131	Self	1-3-94	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Physician	Aggregate Year-to-Date > \$ 500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Allan R. Hoffman 12400 Olive St., #305 St. Louis, MO 63141	St. Louis County Realty	1-3-94	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Real Estate Developer	Aggregate Year-to-Date > \$ 1000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Stanley Shapiro 10842 / Ronsday Drive St. Louis, MO 63141	Self	1-3-94 1-22-94	252.00 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Real Estate	Aggregate Year-to-Date > \$ 500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bertha Feist 550 S. Brentwood St. Louis, MO 63105		1-7-94	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: HOMEMAKER	Aggregate Year-to-Date > \$ 1000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael M. Karl 14 Thorndell Dr. St. Louis, MO 63117	Washington University	1-8-94	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Physician	Aggregate Year-to-Date > \$ 1000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mark Kalisman 28 Maryhill St. Louis, MO 63124	Self	1-9-94	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Home Builder	Aggregate Year-to-Date > \$ 500.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William Leve 12315 Boothbay Court St. Louis, MO 63141	MM PL	1-10-94	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Real Estate Management	Aggregate Year-to-Date > \$ 1000.00	

SUBTOTAL of Receipts This Page (optional)

5500.00

TOTAL This Period (last page this line number only)

24038241978

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 5
FOR LINE NUMBER 11A.1.

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NAME OF COMMITTEE (in Full)

St. Louisians For Better Government

34038941979

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Saul N. Mirowitz 4 Ladue Estates St. Louis, MO 63141	DeMar Financial Co.	1-10-94	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Chairman of Board	Aggregate Year-to-Date > \$1200.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Garry M. Vicker 349 Chalmersway Chester, MO 63017	Self	1-12-94	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: M.D.	Aggregate Year-to-Date > \$1000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jerome B. Osherow 17 Upper Price Road St. Louis, MO 63132		1-14-94	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired	Aggregate Year-to-Date > \$1000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gary Sosnow 530 Laque Woods St. Louis, MO 63141	-	1-2-94	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired	Aggregate Year-to-Date > \$1000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Samuel R. Goldstein 14 Twin Springs Lane St. Louis, MO 63124	Apex Oil	1-15-94	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Executive	Aggregate Year-to-Date > \$1000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Eugene Weissman 62 Briarcliff St. Louis, MO 63124		1-27-94	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired	Aggregate Year-to-Date > \$1000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mary Zoransky 2100 S. Warsaw St. Louis, MO 63124		1-20-94	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Homemaker	Aggregate Year-to-Date > \$1000.00	

SUBTOTAL of Receipts This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 5
FOR LINE NUMBER 11-a-1

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NAME OF COMMITTEE (In Full)

St. Louisians for Better Government

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Louis I. Zorensky 2100 S. Warson Road St. Louis, MO 63124	Self	1-20-94	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Relief State Director	Aggregate Year-to-Date > \$1000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Harry I. Berland 29 Granada Way St. Louis, MO 63124		1-31-94	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retiree	Aggregate Year-to-Date > \$1000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Rosaline Neuman 248 S. Meramec St. Louis, MO 63105	Washington University	2-2-94	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Professor	Aggregate Year-to-Date > \$1000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Shulamith Simon 7423 Pershing St. Louis, MO 63130	Self	2-6-94	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Lawyer	Aggregate Year-to-Date > \$1000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Carl A. Lyss 721 S. Central St. Louis, MO 63105	Internal Medicine Consultants, Inc.	2-6-94	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Physician	3-3-94	250.00
		Aggregate Year-to-Date > \$500.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Carl J. Carlie 14248 Forest Crest Drive Chesterfield, MO 63017	Stone Carlie & Co.	2-7-94	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: CPA	Aggregate Year-to-Date > \$1000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Robert M. Dolgin 28 Portlona Place St. Louis, MO 63108	R.M. Dolgin, Inc.	2-9-94	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Tax Consultant	Aggregate Year-to-Date > \$1000.00	

SUBTOTAL of Receipts This Page (optional)

6500.00

TOTAL This Period (last page this line number only)

0.4038941930

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 5
FOR LINE NUMBER 11-a-1

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NAME OF COMMITTEE (in Full)

St. Louisians for Better Government

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ben Fixman 200 E. Brentwood, Apt. 102 St. Louis, MO 63017	Self	2-7-94	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Businessman Aggregate Year-to-Date > \$ 1000.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sydney Jacobs 2600 Delmar, M-2 St. Louis, MO 63127	Investors Assoc.	2-14-91	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: President Aggregate Year-to-Date > \$ 1000.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Wilma E. Messing 30 Westwood CC. Grds. St. Louis, MO 63131		2-18-94	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Homemaker Aggregate Year-to-Date > \$ 1000.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert E. Kleiger 4333 C Laclede Ave. St. Louis, MO 63108	Jewish Hospital	2-21-94	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Physician Aggregate Year-to-Date > \$ 1000.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mitchell Yanow 2 Rolling Rock Lane St. Louis, MO 63124	OB-GYN Inc.	2-27-94	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Physician Aggregate Year-to-Date > \$ 1000.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
I.E. Millstone 8510 Eager Road St. Louis, MO 63144	K.M. Investors	3-1-94	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: President Aggregate Year-to-Date > \$ 1000.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Paul Brown 1027 Accent St. Louis, MO 63146	Quatrix Inc.	3-8-94	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Computers Aggregate Year-to-Date > \$ 1000.00		

SUBTOTAL of Receipts This Page (optional) 7000.00

TOTAL This Period (last page this line number only)

34038941931

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 5 OF 5
FOR LINE NUMBER 11,011

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NAME OF COMMITTEE (In Full)

St. Louisians for Better Government

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Morris Lazarus 1316 S. 7th St. St. Louis, MO 63104	Clean Coverall Supply Co., Inc.	3-7-94	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Owner/Businessman	Aggregate Year-to-Date > \$250.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Morris S. Leiton 111 Westport Plaza St. Louis, MO 63146	Metal Exchange Corporation	3-11-94	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Businessman	Aggregate Year-to-Date > \$1000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bernard Pasivnick 41 Claverack Drive St. Louis, MO 63105	Pasternak Schweitzer & Co., P.C.	3-23-94	1900.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: CPA	Aggregate Year-to-Date > \$1900.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sam I. Goldman 51 Terry Hill Lane St. Louis, MO 63131	Miss Elaine Inc.	3-24-94	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Businessman	Aggregate Year-to-Date > \$1000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sandor Korein 701 Market St., #300 St. Louis, MO 63101	Catr, Korein, etc	3-25-94	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Lawyer	Aggregate Year-to-Date > \$1000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Litwack 5104 Tregaron Place St. Louis, MO 63131		3-25-94	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired	Aggregate Year-to-Date > \$1000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

5250.00

TOTAL This Period (last page this line number only)

31250.00

743341902

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

St. Louisians For Better Government

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MAGNA BANK 1401 E. Brentwood St. Louis, MO 63144		1-12-54 2-15-71 3-16-74	57.53 64.26 77.24
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): INTEREST EARNED	Occupation	Aggregate Year-to-Date > \$ 199.63	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

199.63

TOTAL This Period (last page this line number only)

199.63

24038941983

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER

23

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NAME OF COMMITTEE (in Full)

St. Louisians For Better Government

24038941985

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends for Bryan 320 4th Street, N.E. Washington DC 20002	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2-15-74	5000.00
Friends of Kent Conrad Box 747 Bismarck, North Dakota 58501	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2-21-74	5000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

10000.00

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Name of Committee (In Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
St. Louisians for Better Government				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Missouri Department of Revenue Jefferson City, MO 65108	5.00	5.00	5.00	5.00
Nature of Debt (Purpose): State Withholding Tax				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Missouri Department of Revenue Jefferson City, MO 65105	40.95	33.90	40.95	33.90
Nature of Debt (Purpose): State Unemployment Tax				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Internal Revenue Service Kansas City, MO 64999	48.00	12.00	48.00	12.00
Nature of Debt (Purpose): Federal Unemployment Tax				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Barbara Bianco 10 Watson Hills Lane St. Louis, MO 63124	45.87	155.25		201.12
Nature of Debt (Purpose): Various Out of Pocket Expenses				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Pasternak, Schwarzer & Co., P.C. 12400 Olive Blvd., Suite 500 St. Louis, MO 63141	29.83	2.75		32.58
Nature of Debt (Purpose): Postage				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				
2) TOTALS This Period (last page in this line only)				284.60
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				284.60

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