

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
MISSOURI VICTORY 2006

ADDRESS (number and street) POST OFFICE BOX 300077
 Check if different than previously reported. (ACC)
ST LOUIS MO 63130

2. **FEC IDENTIFICATION NUMBER** C00419739
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on 11 07 2006 in the State of MO

5. Covering Period 10 19 2006 through 11 27 2006

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 David Kirby
Signature of Treasurer Electronically Filed by David Kirby Date 07 15 2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
MISSOURI VICTORY 2006

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 1 | 0 |

| | |
|---|---|
| D | D |
| 1 | 9 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

 To:

| | |
|---|---|
| M | M |
| 1 | 1 |

| | |
|---|---|
| D | D |
| 2 | 7 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date | | | | | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------------|---|---|---|---|---|---|--|------|
| 6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table> | Y | Y | Y | Y | 2 | 0 | 0 | 6 | | 0.00 |
| Y | Y | Y | Y | | | | | | | |
| 2 | 0 | 0 | 6 | | | | | | | |
| (b) Cash on Hand at Beginning of Reporting Period | 172801.93 | | | | | | | | | |
| (c) Total Receipts (from Line 19) | 366350.00 | 971380.00 | | | | | | | | |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 539151.93 | 971380.00 | | | | | | | | |
| 7. Total Disbursements (from Line 31) | 473937.87 | 906165.94 | | | | | | | | |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 65214.06 | 65214.06 | | | | | | | | |
| 9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | | | | | | | | | |
| 10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) | 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**

Write or Type Committee Name
MISSOURI VICTORY 2006

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 1 | 0 |

| | |
|---|---|
| D | D |
| 1 | 9 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

 To:

| | |
|---|---|
| M | M |
| 1 | 1 |

| | |
|---|---|
| D | D |
| 2 | 7 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

| 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 | 347250.00 | 927200.00 |
| (i) Itemized (use Schedule A) | | |
| (ii) Unitemized | 5600.00 | 9430.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) | 352850.00 | 936630.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 13500.00 | 34750.00 |
| (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) | 366350.00 | 971380.00 |
| 12. Transfers From Affiliated/Other Party Committees | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) | 0.00 | 0.00 |
| 16. Refunds of Contributions Made to Federal candidates and Other Political Committees | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.) | 0.00 | 0.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3) | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfer (add 18(a) and 18(b)). | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) | 366350.00 | 971380.00 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 366350.00 | 971380.00 |

DETAILED SUMMARY PAGE

of Disbursements

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|-------------------------------------------------------------------------------------------------|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share..... | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures..... | 24679.00 | 123032.07 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... | 24679.00 | 123032.07 |
| 22. Transfers to Affiliated/Other Party Committees..... | 449258.87 | 783133.87 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 0.00 | 0.00 |
| 24. Independent Expenditure (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) | 0.00 | 0.00 |
| 29. Other Disbursements..... | 0.00 | 0.00 |
| 30. Federal Election Activity (2 U.S.C 431(20)) | | |
| (a) Shared Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).... | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. | 473937.87 | 906165.94 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)..... | 473937.87 | 906165.94 |

DETAILED SUMMARY PAGE
of Disbursements

| 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) | 366350.00 | 971380.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 366350.00 | 971380.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 24679.00 | 123032.07 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 24679.00 | 123032.07 |

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

| | | |
|------------------------------------------------------------------------|-----------------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 6 / 37 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <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 VICTORY 2006

A. Full Name (Last, First, Middle Initial)
Ernest Adelman

Mailing Address Post Office Box 225

City State Zip Code
Moro IL 62067-0225

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

Name of Employer Self-employed Occupation
Self-employed Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

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

Transaction ID: SA11A1.4689

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
Barry Aycock

Mailing Address Post Office Box 446

City State Zip Code
Parma MO 63870

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

Name of Employer Self-employed Occupation
Self-employed Agribusiness Entrepreneur

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
3100.00

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

Transaction ID: SA11A1.4717

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Francis J. Balint, Jr.

Mailing Address 5516 E. Arcadia Lane

City State Zip Code
Phoenix AZ 85018

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

Name of Employer Retired Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
2100.00

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

Transaction ID: SA11A1.5117

Amount of Each Receipt this Period
2100.00

| | |
|------------------------------------------------------------------|----------------|
| SUBTOTAL of Receipts This Page (optional) | 8100.00 |
| TOTAL This Period (last page this line number only) | |

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

| | | |
|------------------------------------------------------------------------|-----------------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 7 / 37 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
MISSOURI VICTORY 2006

| | | |
|---------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|-----------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Anne Bethune | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 3 / 2 0 0 6 |
| Mailing Address 1260 West 59th Street | | Transaction ID: SA11A1.4685 |
| City Kansas City | State MO | Zip Code 64113 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 1500.00 | |
| Name of Employer Self-employed | Occupation Homemaker | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1500.00 | |

| | | |
|---------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|-----------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Tyler Burgess | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 3 / 2 0 0 6 |
| Mailing Address 1421 Roxbury Lane | | Transaction ID: SA11A1.5089 |
| City Wauconda | State IL | Zip Code 60084 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 10000.00 | |
| Name of Employer Intl Profit Associates | Occupation Executive | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 10000.00 | |

| | | |
|---------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|-----------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. David Butsch | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 3 / 2 0 0 6 |
| Mailing Address 71 Waterman Place | | Transaction ID: SA11A1.4702 |
| City St. Louis | State MO | Zip Code 63112 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 750.00 | |
| Name of Employer Self-employed | Occupation Attorney | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 750.00 | |

| | | |
|------------------------------------------------------------------|---|----------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 12250.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
|------------------------------------------------------------------------|-----------------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 8 / 37 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
MISSOURI VICTORY 2006

A. Full Name (Last, First, Middle Initial)
John J. Carey

Mailing Address 16608 Kehrsgrrove Drive

City State Zip Code
Chesterfield MO 63005

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

Name of Employer Self-employed Occupation
Self-employed Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
12100.00

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

Transaction ID: SA11A1.5088

Amount of Each Receipt this Period
12100.00

B. Full Name (Last, First, Middle Initial)
Katherine Carey

Mailing Address 16608 Kehrsgrrove Drive

City State Zip Code
Chesterfield MO 63005

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

Name of Employer Self-employed Occupation
Self-employed Accountant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
12100.00

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

Transaction ID: SA11A1.4696

Amount of Each Receipt this Period
12100.00

C. Full Name (Last, First, Middle Initial)
William Caster

Mailing Address 3414 W. Coleman Rd

City State Zip Code
Kansas City MO 64111

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

Name of Employer Occupation
Hallmark Cards, Inc. Scheduler & Quality Assur.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 6

Transaction ID: SA11A1.4706

Amount of Each Receipt this Period
10000.00

| | |
|------------------------------------------------------------------|-----------------|
| SUBTOTAL of Receipts This Page (optional) | 34200.00 |
| TOTAL This Period (last page this line number only) | |

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

| | | |
|------------------------------------------------------------------------|-----------------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 9 / 37 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
MISSOURI VICTORY 2006

| | | | |
|---------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|-----------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Sandra Castetter | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 6 | |
| Mailing Address 104 Armour Road | | Transaction ID: SA11A1.4710 | |
| City State Zip Code North Kansas City MO 64116 | Amount of Each Receipt this Period 10000.00 | | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Self-employed | Occupation Homemaker | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 10000.00 | | |

| | | | |
|---------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|-----------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Check into Cash of Missouri | | Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 3 / 2 0 0 6 | |
| Mailing Address P.O. Box 550 | | Transaction ID: SA11A1.5136 | |
| City State Zip Code Cleveland TN 37364 | Amount of Each Receipt this Period 5000.00 | | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer | | Occupation | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 5000.00 | | |

| | | | |
|---------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|-----------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Robert Clark | | Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 6 | |
| Mailing Address 2199 Innerbelt Business Center | | Transaction ID: SA11A1.4727 | |
| City State Zip Code Breckenridge Hills MO 63114 | Amount of Each Receipt this Period 10000.00 | | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Clayco Construction Co. | | Occupation Chief Executive Officer | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 10000.00 | | |

| | |
|--------------------------------------------------------------------|----------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 25000.00 |
| TOTAL This Period (last page this line number only) ▶ | |

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

| | | |
|------------------------------------------------------------------------|-----------------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 10 / 37 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
MISSOURI VICTORY 2006

| | | |
|---------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Marcia J Corbett | | Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 5 / 2 0 0 6 |
| Mailing Address 4800 West 79th Street | | Transaction ID: SA11A1.4732 |
| City State Zip Code Prairie Village KS 66208 | Amount of Each Receipt this Period 100.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Self-Employed Occupation Paralegal | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 375.00 | |

| | | |
|---------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Joseph Danis | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 6 |
| Mailing Address 8235 Forsyth Blvd #1100 | | Transaction ID: SA11A1.4691 |
| City State Zip Code Clayton MO 63105 | Amount of Each Receipt this Period 12100.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Self-employed Occupation Attorney | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 12100.00 | |

| | | |
|---------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Lynn Danis | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 6 |
| Mailing Address 8235 Forsyth Blvd #1100 | | Transaction ID: SA11A1.4692 |
| City State Zip Code Clayton MO 63105 | Amount of Each Receipt this Period 12100.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Self-employed Occupation Homemaker | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 12100.00 | |

| | |
|--------------------------------------------------------------------|----------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 24300.00 |
| TOTAL This Period (last page this line number only) ▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|------------------------------------------------------------------------|-----------------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 11 / 37 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
MISSOURI VICTORY 2006

| | | |
|---------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|-----------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. A. David Davis | | Date of Receipt MM / DD / YYYY 11 / 03 / 2006 |
| Mailing Address 8125 Brill Road | | Transaction ID: SA11A1.5134 |
| City Cincinnati | State OH | Zip Code 45243 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 1250.00 | |
| Name of Employer 409 Group | Occupation Executive | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1250.00 | |

| | | |
|---------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|-----------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Bruce N. Davis | | Date of Receipt MM / DD / YYYY 10 / 31 / 2006 |
| Mailing Address 421 Collingwood Street | | Transaction ID: SA11A1.5105 |
| City San Francisco | State CA | Zip Code 94114 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 2000.00 | |
| Name of Employer Retired | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 2000.00 | |

| | | |
|---------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|-----------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Grant Davis | | Date of Receipt MM / DD / YYYY 10 / 23 / 2006 |
| Mailing Address 1100 Main Street Suite 2930 | | Transaction ID: SA11A1.5070 |
| City Kansas City | State MO | Zip Code 64105 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 7500.00 | |
| Name of Employer Davis Bethune & Jones | Occupation Attorney | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 10000.00 | |

| | | |
|------------------------------------------------------------------|---|----------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 10750.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
|------------------------------------------------------------------------------|-----------------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 12 / 37 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
MISSOURI VICTORY 2006

| | | | |
|---------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Jared A. Davis | | Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6 | |
| Mailing Address 5155 Financial Way | | Transaction ID: SA11A1.5132 | |
| City State Zip Code Mason OH 45040 | Amount of Each Receipt this Period 1250.00 | | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer One Financial Group Occupation President | Aggregate Year-to-Date ▼ 1250.00 | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. James Dowd | | Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6 | |
| Mailing Address 900 South Price Road | | Transaction ID: SA11A1.4729 | |
| City State Zip Code St. Louis MO 63124-1871 | Amount of Each Receipt this Period 1000.00 | | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Self-employed Occupation Attorney | Aggregate Year-to-Date ▼ 1000.00 | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. DPN LLC | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 6 | |
| Mailing Address 7925 Forsyth | | Transaction ID: SA11A1.5082 | |
| City State Zip Code Clayton MO 63105 | Amount of Each Receipt this Period 5000.00 | | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Occupation | Aggregate Year-to-Date ▼ 5000.00 | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | |
|--------------------------------------------------------------------|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 7250.00 |
| TOTAL This Period (last page this line number only) ▶ | |

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

| | | |
|------------------------------------------------------------------------|-----------------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 13 / 37 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
MISSOURI VICTORY 2006

A. Full Name (Last, First, Middle Initial)
Dennis Norman

Mailing Address 7925 Forsyth

City Clayton State MO Zip Code 63105

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

Name of Employer Saaman Corporation Occupation Real Estate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

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

Transaction ID: SA11A1.5082.0

Amount of Each Receipt this Period
5000.00

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
J. Norman Estes

Mailing Address 11142 Telmar Drive

City Northport State AL Zip Code 35475

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

Name of Employer Northport Health Services Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

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

Transaction ID: SA11A1.5092

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
Rebecca Estes

Mailing Address 11142 Telmar Drive

City Northport State AL Zip Code 35475

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

Name of Employer Self-employed Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

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

Transaction ID: SA11A1.5095

Amount of Each Receipt this Period
10000.00

| | | |
|------------------------------------------------------------------|---|----------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 15000.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
|------------------------------------------------------------------------------|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 14 / 37 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
MISSOURI VICTORY 2006

| | | |
|---------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Andrew Friedman | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 6 |
| Mailing Address 6242 N. 4th Drive | | Transaction ID: SA11A1.5115 |
| City Phoenix | State AZ | Zip Code 85013 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 2100.00 |
| Name of Employer Self-employed | Occupation Attorney | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 2100.00 | |

| | | |
|---------------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Marianne Friedman | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 6 |
| Mailing Address 6242 N. 4th Drive | | Transaction ID: SA11A1.5120 |
| City Phoenix | State AZ | Zip Code 85013 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 800.00 |
| Name of Employer Retired | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 800.00 | |

| | | |
|---------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Kay Gabbert | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 6 / 2 0 0 6 |
| Mailing Address 4115 Flora Place | | Transaction ID: SA11A1.5098 |
| City St. Louis | State MO | Zip Code 63110 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100.00 |
| Name of Employer The Roberts Companies | Occupation Senior Vice President | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 4300.00 | |

| | | |
|------------------------------------------------------------------|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 3000.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | | | | | | | |
|------------------------------------------------------------------------|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 15 / 37 | | | | | | |
| | (check only one) | | | | | | | |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |

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NAME OF COMMITTEE (In Full)
MISSOURI VICTORY 2006

| | | | |
|---------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Lee Gilbert | | Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 5 / 2 0 0 6 | |
| Mailing Address Post Office Box 14770 | | Transaction ID: SA11A1.4743 | |
| City State Zip Code Springfield MO 65814 | Amount of Each Receipt this Period 1000.00 | | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Retired | Occupation Retired | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 3100.00 | | |

| | | | |
|---------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Martin Green | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 6 | |
| Mailing Address 7733 Forsyth Boulevard Suite 700 | | Transaction ID: SA11A1.4687 | |
| City State Zip Code Clayton MO 63105 | Amount of Each Receipt this Period 5000.00 | | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Green Schaaf Margo | Occupation Attorney | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 5000.00 | | |

| | | | |
|---------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Edith M. Greenberg | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6 | |
| Mailing Address 501 N. Happy Valley Road | | Transaction ID: SA11A1.5124 | |
| City State Zip Code Prescott AZ 86305 | Amount of Each Receipt this Period 10000.00 | | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Retired | Occupation Retired | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 10000.00 | | |

| | |
|--------------------------------------------------------------------|----------|
| 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) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 16 / 37 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
MISSOURI VICTORY 2006

A. Full Name (Last, First, Middle Initial)
Harold H. Greenberg

Mailing Address 501 N. Happy Valley Road

City State Zip Code
Prescott AZ 86305

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

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

Transaction ID: SA11A1.5121

Amount of Each Receipt this Period
10000.00

B. Full Name (Last, First, Middle Initial)
Nancy Grove

Mailing Address 7 Sunnymead Drive

City State Zip Code
Clayton MO 63124

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

Name of Employer Self-employed Occupation Animal Welfare Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.4740

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
Thomas J. Guilfoil

Mailing Address 12709 Wyndrose Court

City State Zip Code
St. Louis MO 63131

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

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

Transaction ID: SA11A1.5096

Amount of Each Receipt this Period
10000.00

| | | |
|------------------------------------------------------------------|---|----------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 25000.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|------------------------------------------------------------------------|-----------------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 17 / 37 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
MISSOURI VICTORY 2006

| | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|---------------------------------------------------------------|
| A. Full Name (Last, First, Middle Initial) Eric D. Holland | | Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6 |
| Mailing Address 417 S. Rock Hill Road | | Transaction ID: SA11A1.5126 |
| City State Zip Code St. Louis MO 63119 | Amount of Each Receipt this Period 5000.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Self-employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Attorney Aggregate Year-to-Date ▼ 5000.00 | |

| | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|---------------------------------------------------------------|
| B. Full Name (Last, First, Middle Initial) Thomas Jones | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 6 |
| Mailing Address 3417 W. 68th Street | | Transaction ID: SA11A1.4698 |
| City State Zip Code Shawnee Mission MO 66208 | Amount of Each Receipt this Period 10000.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Self-employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Attorney Aggregate Year-to-Date ▼ 10000.00 | |

| | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|---------------------------------------------------------------|
| C. Full Name (Last, First, Middle Initial) Steven Katz | | Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 5 / 2 0 0 6 |
| Mailing Address 701 Market St., Suite 300 | | Transaction ID: SA11A1.4738 |
| City State Zip Code Saint Louis MO 63101 | Amount of Each Receipt this Period 2000.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Retired Aggregate Year-to-Date ▼ 2000.00 | |

| | |
|--------------------------------------------------------------------|-------------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 17000.00 |
| TOTAL This Period (last page this line number only) ▶ | [Empty Box] |

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

| | | |
|------------------------------------------------------------------------|-----------------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 18 / 37 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
MISSOURI VICTORY 2006

A. Full Name (Last, First, Middle Initial)
Gregg Kirkland

Mailing Address 12 Goshen Woods Estates

City State Zip Code
Edwardsville IL 62025

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

Name of Employer Occupation
Simmons Cooper Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

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

Transaction ID: SA11A1.4723

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
Sandor Korein

Mailing Address 412 Missouri Avenue

City State Zip Code
East Saint Louis IL 62201-3050

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

Name of Employer Occupation
Korein Tillery Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.4742

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
Steven Lipstein

Mailing Address 10 Carrswold Drive

City State Zip Code
Clayton MO 63105

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

Name of Employer Occupation
Barnes Jewish Hospital Chief Executive Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
7100.00

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

Transaction ID: SA11A1.5091

Amount of Each Receipt this Period
5000.00

| | | |
|------------------------------------------------------------------|---|----------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 12000.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
|------------------------------------------------------------------------|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 19 / 37 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
MISSOURI VICTORY 2006

| | | |
|---------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Randall M. Lipton | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 6 |
| Mailing Address 40 West Brentmoor Park | | Transaction ID: SA11A1.5099 |
| City State Zip Code Clayton MO 63105 | Amount of Each Receipt this Period 10000.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Self-employed Occupation Real Estate | Aggregate Year-to-Date ▼ 10000.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. William J. Marshall | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6 |
| Mailing Address 150 N. Meramec, #640 | | Transaction ID: SA11A1.5113 |
| City State Zip Code Clayton MO 63105 | Amount of Each Receipt this Period 5000.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Retired Occupation Retired | Aggregate Year-to-Date ▼ 5000.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Cynthia McClain | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 6 |
| Mailing Address 510 N. Delaware | | Transaction ID: SA11A1.5081 |
| City State Zip Code Independence MO 64050 | Amount of Each Receipt this Period 10000.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Self-employed Occupation Homemaker | Aggregate Year-to-Date ▼ 10000.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--------------------------------------------------------------------|----------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 25000.00 |
| TOTAL This Period (last page this line number only) ▶ | _____ |

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

| | | |
|------------------------------------------------------------------------------|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 20 / 37 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
MISSOURI VICTORY 2006

| | | |
|------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Kenneth McClain | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 6 |
| Mailing Address 510 North Delaware Street | | Transaction ID: SA11A1.4683 Amount of Each Receipt this Period 10000.00 |
| City Independence State MO Zip Code 64050 | FEC ID number of contributing federal political committee. C | |
| Name of Employer Humphrey Farrington & McC-lain Occupation Attorney | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 10000.00 |

| | | |
|-------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Sally Neukom | | Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6 |
| Mailing Address 2120 Waverly Way East | | Transaction ID: SA11A1.4731 Amount of Each Receipt this Period 10000.00 |
| City Seattle State WA Zip Code 98112 | FEC ID number of contributing federal political committee. C | |
| Name of Employer Self-employed Occupation Homemaker | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 10000.00 |

| | | |
|--------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Amy R. Powell | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 6 |
| Mailing Address P.O. Box 26250 | | Transaction ID: SA11A1.5071 Amount of Each Receipt this Period 10000.00 |
| City Kansas City State MO Zip Code 64196 | FEC ID number of contributing federal political committee. C | |
| Name of Employer Self-employed Occupation Attorney | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 10000.00 |

| | |
|--------------------------------------------------------------------|----------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 30000.00 |
| TOTAL This Period (last page this line number only) ▶ | _____ |

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

| | | | | | | | | |
|------------------------------------------------------------------------|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 21 / 37 | | | | | | |
| | (check only one) | | | | | | | |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |

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NAME OF COMMITTEE (In Full)
MISSOURI VICTORY 2006

| | | | |
|---------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) A. J.B. Pritzker | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 6 | |
| Mailing Address 2888 Sheridan Place | | Transaction ID: SA11A1.4704 | |
| City State Zip Code Evanston IL 60201 | Amount of Each Receipt this Period 7500.00 | | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Self-employed | Occupation Venture Capitalist | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 7500.00 | | |

| | | | |
|---------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Mary Kathryn Pritzker | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 6 | |
| Mailing Address 2888 Sheridan Place | | Transaction ID: SA11A1.5068 | |
| City State Zip Code Evanston IL 60201 | Amount of Each Receipt this Period 10000.00 | | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Evergreen Farm | Occupation Owner & Operator | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 10000.00 | | |

| | | | |
|---------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Lawrence A. Rouse | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 6 | |
| Mailing Address 8445 Linden Lane | | Transaction ID: SA11A1.5077 | |
| City State Zip Code Prairie Village KS 66207 | Amount of Each Receipt this Period 1000.00 | | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Retired | Occupation Retired | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1000.00 | | |

| | |
|--------------------------------------------------------------------|----------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 18500.00 |
| TOTAL This Period (last page this line number only) ▶ | |

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

| | | |
|------------------------------------------------------------------------|-----------------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 22 / 37 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
MISSOURI VICTORY 2006

| | | |
|---------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Landon Rowland | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 6 |
| Mailing Address 12717 Mount Olivet Road | | Transaction ID: SA11A1.4694 |
| City State Zip Code Kansas City MO 64166 | Amount of Each Receipt this Period 10000.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Retired Occupation Retired | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 10000.00 | |

| | | |
|---------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Jack Rudin | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6 |
| Mailing Address 241 Central Park West | | Transaction ID: SA11A1.4725 |
| City State Zip Code New York NY 10154 | Amount of Each Receipt this Period 2500.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Rudin Management Company Occupation Builder | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 2500.00 | |

| | | |
|---------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Jayne Simmons | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6 |
| Mailing Address 12 Danforth Rd | | Transaction ID: SA11A1.5112 |
| City State Zip Code Alton IL 62002 | Amount of Each Receipt this Period 10000.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Self-employed Occupation Homemaker | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 10000.00 | |

| | |
|--------------------------------------------------------------------|----------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 22500.00 |
| TOTAL This Period (last page this line number only) ▶ | |

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

| | | |
|------------------------------------------------------------------------------|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 23 / 37 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
MISSOURI VICTORY 2006

| | | |
|---------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. John Simmons | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6 |
| Mailing Address 12 Danforth Rd | | Transaction ID: SA11A1.4721 |
| City State Zip Code Alton IL 62002 | Amount of Each Receipt this Period 10000.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Self-employed | Occupation Attorney | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 10000.00 | |

| | | |
|---------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Rex Sinquefield | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 6 |
| Mailing Address 16987 Avenue De Santa Ynez | | Transaction ID: SA11A1.4716 |
| City State Zip Code Pacific Palisades CA 90272 | Amount of Each Receipt this Period 5000.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Dimensional Fund Advisors | Occupation Investment Advisor | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 5000.00 | |

| | | |
|---------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. James G. Sokolove | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6 |
| Mailing Address 1340j Centre Street #102 | | Transaction ID: SA11A1.5109 |
| City State Zip Code Newton Center MA 02459 | Amount of Each Receipt this Period 10000.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Self-employed | Occupation Attorney | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 10000.00 | |

| | |
|--------------------------------------------------------------------|----------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 25000.00 |
| TOTAL This Period (last page this line number only) ▶ | [] |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|------------------------------------------------------------------------|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 24 / 37 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
MISSOURI VICTORY 2006

| | | | |
|---------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Carolyn Stewart | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6 | |
| Mailing Address 201 Pointe Lucerne Court | | Transaction ID: SA11A1.4714 | |
| City State Zip Code Ballwin MO 63011 | Amount of Each Receipt this Period 2500.00 | | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Retired | Occupation Retired | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 2500.00 | | |

| | | | |
|---------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Steven Stone | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6 | |
| Mailing Address 7733 Forsyth Blvd., Ste 500 | | Transaction ID: SA11A1.4712 | |
| City State Zip Code Clayton MO 63105 | Amount of Each Receipt this Period 3500.00 | | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Stone Leyton Greshman | Occupation Executive | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 3500.00 | | |

| | | | |
|---------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|---------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Stephen Tillery | | Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 5 / 2 0 0 6 | |
| Mailing Address 701 Market #300 | | Transaction ID: SA11A1.4736 | |
| City State Zip Code Saint Louis MO 63101 | Amount of Each Receipt this Period 2000.00 | | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Korein Tillery | Occupation Attorney | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 2000.00 | | |

| | |
|--------------------------------------------------------------------|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 8000.00 |
| TOTAL This Period (last page this line number only) ▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 25 / 37 |
| | <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 VICTORY 2006

| | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. University Square Company (LLC) | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6 |
| Mailing Address 7733 Forsyth Blvd., Ste 500 | | Transaction ID: SA11A1.5102 |
| City Clayton State MO Zip Code 63105 | Amount of Each Receipt this Period 1500.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Aggregate Year-to-Date ▼ 1500.00 | |

| | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Steven Stone | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6 |
| Mailing Address 7733 Forsyth Blvd., Ste 500 | | Transaction ID: SA11A1.5102.0 |
| City Clayton State MO Zip Code 63105 | Amount of Each Receipt this Period 1500.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Executive Aggregate Year-to-Date ▼ 5000.00 | |

[MEMO ITEM]

| | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|---------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Gregory Wendt | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6 |
| Mailing Address 1 Muir Loop | | Transaction ID: SA11A1.4719 |
| City San Francisco State CA Zip Code 94129 | Amount of Each Receipt this Period 2900.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Financier Aggregate Year-to-Date ▼ 2900.00 | |

| | |
|--------------------------------------------------------------------|-------------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 4400.00 |
| TOTAL This Period (last page this line number only) ▶ | [Empty Box] |

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

| | | |
|------------------------------------------------------------------------|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 26 / 37 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
MISSOURI VICTORY 2006

| | | | |
|---------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|-----------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Lisa Wendt | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 6 | |
| Mailing Address 1 Muir Loop | | Transaction ID: SA11A1.5107 | |
| City State Zip Code San Francisco CA 94129 | Amount of Each Receipt this Period 3000.00 | | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer WR Hambrecht & Company | Occupation Investor | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 3000.00 | | |

| | | | |
|---------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|-----------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. David Westbrook | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 3 / 2 0 0 6 | |
| Mailing Address 5226 Mercier | | Transaction ID: SA11A1.4700 | |
| City State Zip Code Kansas City MO 64112 | Amount of Each Receipt this Period 1000.00 | | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Corporate Communications Group | Occupation President | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1000.00 | | |

| | |
|--------------------------------------------------------------------|-----------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 4000.00 |
| TOTAL This Period (last page this line number only) ▶ | 347250.00 |

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

| | | |
|------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 27 / 37 |
| | <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 VICTORY 2006

| | | | |
|---------------------------------------------------------------------------------------------------------------------------------|-------------|---------------------------------------------------------------|-----------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Advance Cash America Centers Inc. PAC | | Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6 | |
| Mailing Address P.O. Box 3053 | | Transaction ID: SA11C.5130 | |
| City Spartanburg | State SC | Zip Code 29306 | Amount of Each Receipt this Period 5000.00 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer | | Occupation | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 5000.00 | |

| | | | |
|---------------------------------------------------------------------------------------------------------------------------------|-------------|---------------------------------------------------------------|-----------------------------------------------|
| Full Name (Last, First, Middle Initial) B. Association of Trial Lawyers of America PAC | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 6 | |
| Mailing Address 1050 31st Street NW | | Transaction ID: SA11C.5063 | |
| City Washington | State DC | Zip Code 20007 | Amount of Each Receipt this Period 5000.00 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer | | Occupation | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 5000.00 | |

| | | | |
|---------------------------------------------------------------------------------------------------------------------------------|-------------|---------------------------------------------------------------|-----------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Cash America International Inc. PAC | | Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6 | |
| Mailing Address 1000 West 7th Street | | Transaction ID: SA11C.5128 | |
| City Fort Worth | State TX | Zip Code 76102 | Amount of Each Receipt this Period 1000.00 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer | | Occupation | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 1000.00 | |

| | |
|--------------------------------------------------------------------|----------|
| 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) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 28 / 37 |
| | (check only one) | |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
MISSOURI VICTORY 2006

A. Full Name (Last, First, Middle Initial)
PAC of the Missouri Hospital Association

Mailing Address P.O. Box 60

| | | |
|----------------|-------|----------|
| City | State | Zip Code |
| Jefferson City | MO | 65102 |

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

| | |
|------------------|------------|
| Name of Employer | Occupation |
| | |

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

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

Transaction ID: SA11C.5066

Amount of Each Receipt this Period
2500.00

| | | |
|------------------------------------------------------------------|---|----------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 2500.00 |
| TOTAL This Period (last page this line number only) | ▶ | 13500.00 |

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)

PAGE 29 / 37

| | | | | | |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
MISSOURI VICTORY 2006

| | | |
|------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. American Express AXP | | Transaction ID: SB21B.4681 Date of Disbursement 11 / 02 / 2006 |
| Mailing Address PO Box 53852 | | Amount of Each Disbursement this Period 147.50 |
| City Phoenix | State AZ | |
| Zip Code 65072 | | |
| Purpose of Disbursement Credit Card Processing Fees | | |
| Candidate Name | | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ District: _____ | | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. American Express AXP | | Transaction ID: SB21B.4911 Date of Disbursement 11 / 06 / 2006 |
| Mailing Address PO Box 53852 | | Amount of Each Disbursement this Period 5.00 |
| City Phoenix | State AZ | |
| Zip Code 65072 | | |
| Purpose of Disbursement Credit Card Processing Fee | | |
| Candidate Name | | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ District: _____ | | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. Creative Lltho | | Transaction ID: SB21B.4669 Date of Disbursement 10 / 31 / 2006 |
| Mailing Address 3021 Cherokee Street | | Amount of Each Disbursement this Period 1814.47 |
| City St. Louis | State MO | |
| Zip Code 63118 | | |
| Purpose of Disbursement Printing | | |
| Candidate Name | | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ District: _____ | | |

| | |
|--------------------------------------------------------------------|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 1966.97 |
| 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)

PAGE 30 / 37

| | | | | | |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
MISSOURI VICTORY 2006

| | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Creative Lltho | | Transaction ID: SB21B.4670 Date of Disbursement 10 / 31 / 2006 | |
| Mailing Address 3021 Cherokee Street | | Amount of Each Disbursement this Period 810.00 | |
| City St. Louis State MO Zip Code 63118 | Purpose of Disbursement Printing | | |
| Candidate Name | | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Creative Lltho | | Transaction ID: SB21B.4671 Date of Disbursement 10 / 31 / 2006 | |
| Mailing Address 3021 Cherokee Street | | Amount of Each Disbursement this Period 3092.99 | |
| City St. Louis State MO Zip Code 63118 | Purpose of Disbursement Printing | | |
| Candidate Name | | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Creative Lltho | | Transaction ID: SB21B.4672 Date of Disbursement 10 / 31 / 2006 | |
| Mailing Address 3021 Cherokee Street | | Amount of Each Disbursement this Period 166.16 | |
| City St. Louis State MO Zip Code 63118 | Purpose of Disbursement Printing | | |
| Candidate Name | | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--------------------------------------------------------------------|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 4069.15 |
| TOTAL This Period (last page this line number only) ▶ | [Empty Box] |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

| | | | | | |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
MISSOURI VICTORY 2006

| | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|--|
| A. Jerry Lockett Full Name (Last, First, Middle Initial) | | Transaction ID: SB21B.4667 Date of Disbursement 10 / 31 / 2006 | |
| Mailing Address 201 Wyandotte Street | | Amount of Each Disbursement this Period 250.00 | |
| City Kansas City State MO Zip Code 64105 | Purpose of Disbursement Photography | | |
| Candidate Name | | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|--|
| B. Marriott Kansas City Downtown Full Name (Last, First, Middle Initial) | | Transaction ID: SB21B.4677 Date of Disbursement 10 / 31 / 2006 | |
| Mailing Address 200 West 12th Street | | Amount of Each Disbursement this Period 11943.89 | |
| City Kansas City State MO Zip Code 64105 | Purpose of Disbursement Catering | | |
| Candidate Name | | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|--|
| C. Production Support Services Full Name (Last, First, Middle Initial) | | Transaction ID: SB21B.4662 Date of Disbursement 10 / 31 / 2006 | |
| Mailing Address 1450 S. Vandeventer | | Amount of Each Disbursement this Period 4071.00 | |
| City St. Louis State MO Zip Code 63110 | Purpose of Disbursement AV Equipment & Services | | |
| Candidate Name | | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

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|--------------------------------------------------------------------|----------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 16264.89 |
| TOTAL This Period (last page this line number only) ▶ | [] |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

| | | | | | |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
MISSOURI VICTORY 2006

| | | |
|------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. Ashley Roseboro | | Transaction ID: SB21B.4676 Date of Disbursement 10 / 31 / 2006 |
| Mailing Address 12345 F Cross Creek Cove | | Amount of Each Disbursement this Period 405.00 |
| City St. Louis State OH Zip Code 63141 | | |
| Purpose of Disbursement Compliance Consulting | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. The Business Bank | | Transaction ID: SB21B.4656 Date of Disbursement 10 / 19 / 2006 |
| Mailing Address 8000 Maryland Avenue | | Amount of Each Disbursement this Period 5.00 |
| City St. Louis State MO Zip Code 63105 | | |
| Purpose of Disbursement Bank Fee | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. The Business Bank | | Transaction ID: SB21B.4680 Date of Disbursement 11 / 13 / 2006 |
| Mailing Address 8000 Maryland Avenue | | Amount of Each Disbursement this Period 120.00 |
| City St. Louis State MO Zip Code 63105 | | |
| Purpose of Disbursement Bank Fees | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|--------------------------------------------------------------------|---------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 530.00 |
| 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)

PAGE 33 / 37

| | | | | | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 21b | <input type="checkbox"/> | 22 | <input type="checkbox"/> | 23 | <input type="checkbox"/> | 24 | <input type="checkbox"/> | 25 | <input type="checkbox"/> | 26 |
| <input type="checkbox"/> | 27 | <input type="checkbox"/> | 28a | <input type="checkbox"/> | 28b | <input type="checkbox"/> | 28c | <input type="checkbox"/> | 29 | <input type="checkbox"/> | 30b |

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NAME OF COMMITTEE (In Full)
MISSOURI VICTORY 2006

Full Name (Last, First, Middle Initial)

A. Uptown UGA LLC

Mailing Address 3700 Broadway

City Kansas City State MO Zip Code 64111

Purpose of Disbursement
Facility Rental

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.4663

Date of Disbursement

10 / 31 / 2006

Amount of Each Disbursement this Period

1826.00

SUBTOTAL of Disbursements This Page (optional)

1826.00

TOTAL This Period (last page this line number only)

24657.01

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

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

FOR LINE NUMBER:
(check only one)

| | | | | | |
|------------------------------|----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
MISSOURI VICTORY 2006

| | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. MCCASKILL FOR MISSOURI | | Transaction ID: SB22.4660 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 6 |
| Mailing Address PO BOX 6771 | | Amount of Each Disbursement this Period 16000.00 |
| City ST LOUIS State MO Zip Code 63144 | | |
| Purpose of Disbursement Joint Fundraising Proceeds | Category/ Type | |
| Candidate Name CLAIRE MCCASKILL | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 00 | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. MISSOURI DEMOCRATIC STATE COMMITTEE | | Transaction ID: SB22.4653 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6 |
| Mailing Address P.O. Box 719 | | Amount of Each Disbursement this Period 125000.00 |
| City Jefferson City State MO Zip Code 65102 | | |
| Purpose of Disbursement Joint Fundraising Proceeds | Category/ Type | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. MISSOURI DEMOCRATIC STATE COMMITTEE | | Transaction ID: SB22.4654 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 6 |
| Mailing Address P.O. Box 719 | | Amount of Each Disbursement this Period 10000.00 |
| City Jefferson City State MO Zip Code 65102 | | |
| Purpose of Disbursement Joint Fundraising Proceeds | Category/ Type | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--------------------------------------------------------------------|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 151000.00 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

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

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

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
MISSOURI VICTORY 2006

| | | |
|------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) A. MISSOURI DEMOCRATIC STATE COMMITTEE | | Transaction ID: SB22.4655 Date of Disbursement |
| Mailing Address P.O. Box 719 | | <input type="text" value="10"/> <input type="text" value="24"/> / <input type="text" value="20"/> <input type="text" value="06"/> |
| City Jefferson City | State MO | Zip Code 65102 |
| Purpose of Disbursement Joint Fundraising Proceeds | <input type="text" value="135000.00"/> | |
| Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) B. MISSOURI DEMOCRATIC STATE COMMITTEE | | Transaction ID: SB22.4659 Date of Disbursement |
| Mailing Address P.O. Box 719 | | <input type="text" value="10"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="06"/> |
| City Jefferson City | State MO | Zip Code 65102 |
| Purpose of Disbursement Joint Fundraising Proceeds | <input type="text" value="66008.87"/> | |
| Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial) C. MISSOURI DEMOCRATIC STATE COMMITTEE | | Transaction ID: SB22.4661 Date of Disbursement |
| Mailing Address P.O. Box 719 | | <input type="text" value="10"/> <input type="text" value="27"/> / <input type="text" value="20"/> <input type="text" value="06"/> |
| City Jefferson City | State MO | Zip Code 65102 |
| Purpose of Disbursement Joint Fundraising Proceeds | <input type="text" value="6150.00"/> | |
| Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|------------------------------------------------------------------|----------------------------------------|
| SUBTOTAL of Disbursements This Page (optional) | <input type="text" value="207158.87"/> |
| TOTAL This Period (last page this line number only) | <input type="text"/> |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 36 / 37

| | | | | | |
|------------------------------|----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
MISSOURI VICTORY 2006

A. Full Name (Last, First, Middle Initial)
MISSOURI DEMOCRATIC STATE COMMITTEE

Mailing Address P.O. Box 719

City State Zip Code
Jefferson City MO 65102

Purpose of Disbursement
Joint Fundraising Proceeds

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB22.4678

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
MISSOURI DEMOCRATIC STATE COMMITTEE

Mailing Address P.O. Box 719

City State Zip Code
Jefferson City MO 65102

Purpose of Disbursement
Joint Fundraising Proceeds

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB22.4679

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

Form/Schedule: **F3XA**

Transaction ID:

1. The Committee is a joint fundraising representative on behalf of an authorized committee and a political party committee. As such, all of the operating expenditures disbursed by the Committee are fundraising expenses in support of the joint fundraising activities. Each participant's share of the fundraising expenses, as determined pursuant to the Commission's regulations at 11 C.F.R. Sec. 102.17, are deducted from the gross proceeds distributed to each. Therefore, each participant in effect pays for their fundraising expenses rather than the joint fundraising representative. Expenditures for Catering, Facility Rental, Photography and Printing itemized on Schedule B are operating expenses and are not in-kind contributions or independent expenditures, nor are they public communications or voter drive activity. Express advocacy is not an issue. 2. Mr. Joseph Danis contributed \$12100 to the joint fundraising committee. A second contribution for \$12100 is attributable to his spouse, Lynn Danis, since her signature is on the check. The attribution is corrected in this amendment.