

2004 OCT -8 P 12 05

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For Other Than An Authorized Committee

Office Use Only

1 NAME OF COMMITTEE (In full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4MS

MO - Political Action Committee of the Wyssquit Hospital Association

ADDRESS (number and street) PO Box 80

Check if different than previously reported. (ACC)

4712 Country Club Drive

Jefferson City MO 65102

2 FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C 000289777

IS THIS REPORT NEW OR AMENDED

4 TYPE OF REPORT

(Circle One)

|                            |             |             |              |  |
|----------------------------|-------------|-------------|--------------|--|
| (b) Monthly Report Due On: | Feb 20 (M2) | May 20 (M5) | Aug 20 (M8)  | Nov 20 (M11)<br>(Non-Election Year Only) |
|                            | Mar 20 (M3) | Jun 20 (M6) | Sep 20 (M9)  | Dec 20 (M12)<br>(Non-Election Year Only) |
|                            | Apr 20 (M4) | Jul 20 (M7) | Oct 20 (M10) | Jan 31 (YE)                              |

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

(c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Conversion (12C) Special (12S)

Election on in the State of

(d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)

Election on in the State of

5 Covering Period

07/15/04 through 09/30/04

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 Dwight L. Fink

Signature of Treasurer

*Dwight L. Fink*

Date

10/08/04

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

Office Use Only

FEC FORM 3X  
(Rev. 02/2003)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

MO - Political Action Committee of the Missouri Hospital Association

Report Covering the Period: From: 07 15 2004 To: 09 30 2004

|   | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------|-----------------------------------|
| 8. (a) Cash on Hand<br>January 1, 2004  | \$1,103.05              | \$1,103.05                        |
| (b) Cash on Hand at<br>Beginning of Reporting Period  | \$1,609.38              |                                   |
| (c) Total Receipts (from Line 19)   | \$1,519.79              | \$5,826.11                        |
| (d) Subtotal (add Lines 8(b) and<br>8(c) for Column A and Lines<br>8(a) and 8(c) for Column B)      | \$2,529.17              | \$7,029.17                        |
| 9. Total Disbursements (from Line 21)   | \$2,000.00              | \$6,600.00                        |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 9 from Line 8(d))                 | \$529.17                | \$529.17                          |
| 9. Debts and Obligations Owed TO<br>the Committee (itemize all on<br>Schedule C and/or Schedule D)  | \$0.00                  |                                   |
| 10. Debts and Obligations Owed BY<br>the Committee (itemize all on<br>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

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

MO - Political Action Committee of the Missouri Hospital Association

Report Covering the Period: From: 02 01 2004 To: 09 30 2004

| I. Receipts  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:   |                               |                                   |
| (a) Individual/Persons Other Than Political Committees:  |                               |                                   |
| (i) Itemized (use Schedule A) .....  | \$649.06                      |                                   |
| (ii) Unitemized .....  | \$866.72                      |                                   |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)) .....  | \$1,515.78                    | \$4,425.00                        |
| (b) Political Party Committees .....   | \$0.00                        | \$0.00                            |
| (c) Other Political Committees (such as PACs) .....  | \$0.00                        | \$1,500.00                        |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....   | \$1,515.78                    | \$5,925.00                        |
| 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.) .....   | \$0.21                        | \$1.11                            |
| 18. Transfers from Non-Federal and Levin Funds:  |                               |                                   |
| (a) Non-Federal Account (from Schedule H3) .....   | \$0.00                        | \$0.00                            |
| (b) Levin Funds (from Schedule H5) .....   | \$0.00                        | \$0.00                            |
| (c) Total Transfers (add 18(a) and 18(b)) .....  | \$0.00                        | \$0.00                            |
| 19. Total Receipts (add Lines 11(c), 12, 13, 14, 15, 16, 17, and 18(c)) .....                          | \$1,515.79                    | \$5,926.11                        |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....                                    | \$1,515.79                    | \$5,925.11                        |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| <b>II. Disbursements</b> |  | <b>COLUMN A</b><br>Total This Period | <b>COLUMN B</b><br>Calendar Year-to-Date |
|--------------------------|--|--------------------------------------|--|
| 21                       | Operating Expenditures:  |                                      |  |
| (a)                      | Allocated Federal/Non-Federal Activity (from Schedule H4)                            |                                      |  |
| (i)                      | Federal Share  | \$0.00                               | \$0.00                                   |
| (j)                      | Non-Federal Share  | \$0.00                               | \$0.00                                   |
| (b)                      | Other Federal Operating Expenditures   | \$0.00                               | \$0.00                                   |
| (c)                      | Total Operating Expenditures (add 21(a)(i), (a)(j), and (b))                         | \$0.00                               | \$0.00                                   |
| 22                       | Transfers to Affiliate/Other Party Committee   | \$0.00                               | \$0.00                                   |
| 23                       | Contributions to Federal Candidates/Committees and Other Political Committees        | \$2,000.00                           | \$6,500.00                               |
| 24                       | Independent Expenditures (use Schedule E)  | \$0.00                               | \$0.00                                   |
| 25                       | Coordinated Party Expenditures (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                                   |
| (c)                      | Total Contribution Refunds (add Lines 28(a), (b), and (c))                           | \$0.00                               | \$0.00                                   |
| 29                       | Other Disbursements  | \$0.00                               | \$1,000.00                               |
| 30                       | Federal Election Activity (2 U.S.C. §431(20))  |                                      |  |
| (a)                      | Allocated Federal Election Activity (from Schedule H5)                               |                                      |  |
| (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(c), 29 and 30(c))   | \$2,000.00                           | \$6,500.00                               |
| 32                       | Total Federal Disbursements (subtract Line 21(a)(j) and Line 30(e)(ii) from Line 31) | \$2,000.00                           | \$6,500.00                               |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2013)

Page 5

| III. Net Contributions/Operating Expenditures                                       | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3).....        | \$1,519.58                    | \$5,925.00                        |
| 34. Total Contribution Refunds<br>(from Line 23(x)).....                            | \$0.00                        | \$0.00                            |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33).....    | \$1,519.58                    | \$5,925.00                        |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b))..... | \$0.00                        | \$0.00                            |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                | \$0.00                        | \$0.00                            |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36).....              | \$0.00                        | \$0.00                            |

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

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

|   |                              |                              |                             |
|---|------------------------------|------------------------------|-----------------------------|
| FOR LINE NUMBER:                        |                              | PAGE 1 OF 5                  |                             |
| (check only one)                        |                              |                              |                             |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 15             | <input type="checkbox"/> 14  | <input type="checkbox"/> 13  | <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 request installations from such committee.

NAME OF COMMITTEE (In Full)

**MO - Political Action Committee of the Missouri Hospital Association**

Full Name (Last, First, Middle Initial)

**A. Ms. Mary C. Becker**

Mailing Address  
7800 South Eagle Road

City State Zip Code  
Columbia MO 65203-9017

FEC ID number of contributing federal political committee.

C

Name of Employer Occupation  
Missouri Hospital Association Senior VP, Comm. & Health Improvement

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
\$222.24

Date of Receipt

08 11 2004

Amount of Each Receipt this Period

\$27.78

Full Name (Last, First, Middle Initial)

**B. Mr. Dwight L. Fine**

Mailing Address  
12675 Riviera Heights Road

City State Zip Code  
Holtz Summit MO 65043-2039

FEC ID number of contributing federal political committee.

C

Name of Employer Occupation  
Missouri Hospital Association Sr. Vice President, Government Relations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
\$444.48

Date of Receipt

08 11 2004

Amount of Each Receipt this Period

\$55.56

Full Name (Last, First, Middle Initial)

**C. Ms. Kathleen C. Poff**

Mailing Address  
5119 Coventry Way

City State Zip Code  
Jefferson City MO 65101-8284

FEC ID number of contributing federal political committee.

C

Name of Employer Occupation  
Missouri Hospital Association Senior Vice President & CFO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
\$222.24

Date of Receipt

08 11 2004

Amount of Each Receipt this Period

\$27.78

SUBTOTAL of Receipts This Page (optional) ▶

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

\$111.12

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

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

| FOR LINE NUMBER                     |     | PAGE                     |      |
|-------------------------------------|-----|--------------------------|------|
| (check only one)                    |     | 2                        | OF 5 |
| <input checked="" type="checkbox"/> | 110 | <input type="checkbox"/> | 12   |
| <input type="checkbox"/>            | 13  | <input type="checkbox"/> | 16   |
| <input type="checkbox"/>            | 111 | <input type="checkbox"/> | 13   |
| <input type="checkbox"/>            | 14  | <input type="checkbox"/> | 15   |
| <input type="checkbox"/>            | 112 | <input type="checkbox"/> | 17   |

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NAME OF COMMITTEE (In Full)

**MO - Political Action Committee of the Missouri Hospital Association**

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Mr. Gerald M. Sill J.D.</b>  |   | Date of Receipt<br><b>08 11 2004</b>                 |
| Mailing Address<br>2906 Valley View Terrace   |   | Amount of Each Receipt this Period<br><b>\$27.78</b> |
| City<br>Jefferson City  | State Zip Code<br>MO 65109-1069                       |  |
| FEC ID number of contributing federal political committee<br><b>C</b>   |   | Amount of Each Receipt this Period<br><b>\$27.78</b> |
| Name of Employer<br>Missouri Hospital Association   | Occupation<br>Senior Vice President & General Counsel |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><b>\$222.24</b>           |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Mr. Marc D. Smith</b>  |   | Date of Receipt<br><b>08 11 2004</b>                 |
| Mailing Address<br>5612 Tanner Bridge Road  |   | Amount of Each Receipt this Period<br><b>\$33.34</b> |
| City<br>Jefferson City  | State Zip Code<br>MO 65101-8275                     |  |
| FEC ID number of contributing federal political committee<br><b>C</b>   |   | Amount of Each Receipt this Period<br><b>\$33.34</b> |
| Name of Employer<br>Missouri Hospital Association   | Occupation<br>President and Chief Executive Officer |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><b>\$266.72</b>         |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Mr. Kenneth L. Kusbler</b>   |   | Date of Receipt<br><b>08 11 2004</b>                 |
| Mailing Address<br>1004 Carriage Court  |   | Amount of Each Receipt this Period<br><b>\$27.78</b> |
| City<br>Jefferson City  | State Zip Code<br>MO 65109-5741             |  |
| FEC ID number of contributing federal political committee<br><b>C</b>   |   | Amount of Each Receipt this Period<br><b>\$27.78</b> |
| Name of Employer<br>Missouri Hospital Association   | Occupation<br>Executive Vice President      |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><b>\$222.24</b> |  |

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

**\$88.90**

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

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

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

|   |                                    |
|---|------------------------------------|
| FOR LINE NUMBER:<br>(check only one)          | PAGE 3 OF 5                        |
| <input checked="" type="checkbox"/> 11a<br>12 | <input type="checkbox"/> 11b<br>14 |
| <input type="checkbox"/> 11c<br>15            | <input type="checkbox"/> 12<br>16  |
| <input type="checkbox"/> 17                   |                                    |

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NAME OF COMMITTEE (in Full)

**MO - Political Action Committee of the Missouri Hospital Association**

|   |   |   |
|---|---|---|
| A. Full Name (Last, First, Middle Initial)<br><b>Mr. Michael R. Dunaway</b>   |   | Date of Receipt<br><b>08 31 2004</b>                  |
| Mailing Address<br><b>15081 Linden Lane</b>   |   | Amount of Each Receipt this Period<br><b>\$250.00</b> |
| City<br><b>Leawood</b>  | State Zip Code<br><b>KS 66224-3412</b>      |   |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |   | Amount of Each Receipt this Period<br><b>\$250.00</b> |
| Name of Employer<br><b>Missouri Hospital Association</b>  | Occupation<br><b>Senior Vice President</b>  |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><b>\$250.00</b> |   |

|   |  |   |
|---|--|---|
| B. Full Name (Last, First, Middle Initial)<br><b>Ms. Mary C. Becker</b>   |  | Date of Receipt<br><b>09 10 2004</b>                  |
| Mailing Address<br><b>7800 South Eagle Road</b>   |  | Amount of Each Receipt this Period<br><b>\$27.76</b>  |
| City<br><b>Columbia</b>   | State Zip Code<br><b>MO 65203-9017</b>                         |   |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |  | Amount of Each Receipt this Period<br><b>\$250.00</b> |
| Name of Employer<br><b>Missouri Hospital Association</b>  | Occupation<br><b>Senior VP, Comm. &amp; Health Improvement</b> |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><b>\$250.00</b>                    |   |

|   |   |   |
|---|---|---|
| C. Full Name (Last, First, Middle Initial)<br><b>Mr. Dwight L. Fine</b>   |   | Date of Receipt<br><b>09 10 2004</b>                  |
| Mailing Address<br><b>12875 Riviera Heights Road</b>  |   | Amount of Each Receipt this Period<br><b>\$55.52</b>  |
| City<br><b>Halls Summit</b>   | State Zip Code<br><b>MO 65043-2039</b>                        |   |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |   | Amount of Each Receipt this Period<br><b>\$500.00</b> |
| Name of Employer<br><b>Missouri Hospital Association</b>  | Occupation<br><b>Sr. Vice President, Government Relations</b> |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><b>\$500.00</b>                   |   |

|   |                 |
|---|-----------------|
| SUBTOTAL of Receipts this Page (optional)           | <b>\$333.28</b> |
| TOTAL this Period (last page this line number only) |                 |



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

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

|   |                             |
|---|-----------------------------|
| FOR LINE NUMBER:<br>(check only one)    | PAGE 4 OF 5                 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 11b            | <input type="checkbox"/> 13 |
| <input type="checkbox"/> 11c            | <input type="checkbox"/> 14 |
| <input type="checkbox"/> 11d            | <input type="checkbox"/> 15 |
| <input type="checkbox"/> 11e            | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 11f            | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (in full)

**MO - Political Action Committee of the Missouri Hospital Association**

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Ms. Kathleen C. Poff</b>                      |  | Date of Receipt<br><b>09 10 2004</b>  |  |
| Mailing Address<br>5119 Coventry Waye<br>City State Zip Code<br>Jefferson City MO 65101-8284   |  | Amount of Each Receipt this Period<br><b>\$27.76</b>  |  |
| FEC ID number of contributing federal political committee<br><b>C</b>                          |  | Aggregate Year-to-Date<br><b>\$250.00</b>   |  |
| Name of Employer<br>Missouri Hospital Association<br>Occupation<br>Senior Vice President & CFO |  | Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Mr. Gerald M. Sil J.D.</b>                                |  | Date of Receipt<br><b>09 10 2004</b>  |  |
| Mailing Address<br>2806 Valley View Terrace<br>City State Zip Code<br>Jefferson City MO 65109-1069         |  | Amount of Each Receipt this Period<br><b>\$27.76</b>  |  |
| FEC ID number of contributing federal political committee<br><b>C</b>                                      |  | Aggregate Year-to-Date<br><b>\$250.00</b>   |  |
| Name of Employer<br>Missouri Hospital Association<br>Occupation<br>Senior Vice President & General Counsel |  | Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Mr. Marc D. Smith</b>                                   |  | Date of Receipt<br><b>09 10 2004</b>  |  |
| Mailing Address<br>5612 Tanner Bridge Road<br>City State Zip Code<br>Jefferson City MO 65101-8275        |  | Amount of Each Receipt this Period<br><b>\$33.28</b>  |  |
| FEC ID number of contributing federal political committee<br><b>C</b>                                    |  | Aggregate Year-to-Date<br><b>\$300.00</b>   |  |
| Name of Employer<br>Missouri Hospital Association<br>Occupation<br>President and Chief Executive Officer |  | Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |

SUBTOTAL of Receipts This Page (optional) ▶

**\$88.80**

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

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

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

|   |                              |                              |                             |
|---|------------------------------|------------------------------|-----------------------------|
| FOR LINE NUMBER:                        |                              | PAGE 5 OF 6                  |                             |
| <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)

**MO - Political Action Committee of the Missouri Hospital Association**

|   |  |   |  |
|---|--|---|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Mr. Kenneth L. Kuebler   |  | Date of Receipt<br>09 10 2004                 |  |
| Mailing Address<br>1004 Carriage Court  |  | Amount of Each Receipt this Period<br>\$27.76 |  |
| City<br>Jefferson City  | State<br>MO                            | Zip Code<br>65109-5741                        |  |
| FEC ID number of contributing federal political committee.<br>C   |  |   |  |
| Name of Employer<br>Missouri Hospital Association   | Occupation<br>Executive Vice President |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>\$250.00   |   |  |

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

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

|   |          |
|---|----------|
| SUBTOTAL of Receipts This Page (optional)           | \$27.76  |
| TOTAL This Period (last page this line number only) | \$649.86 |

**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 1 OF

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

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)

**MO - Political Action Committee of the Missouri Hospital Association**

Full Name (Last, First, Middle Initial)

|   |  |  |
|---|--|--|
| <p><b>A. Friends of Steve Morrow</b></p> <p>Mailing Address<br/>PO Box 980</p> <p>City: <u>Boonville</u> State: <u>MO</u> Zip Code: <u>65613</u></p> <p>Purpose of Disbursement</p> <p>Candidate Name<br/><u>Steve Morrow</u></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: <u>MO</u> District: <u>4</u></p> |  | <p>Date of Disbursement</p> <p><u>07</u> / <u>21</u> / <u>2004</u></p> |
| <p>Disbursement For: 2004</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____</p>  |  | <p>Amount of Each Disbursement this Period</p> <p><b>\$250.00</b></p>  |
| <p>Category/Type</p> <p><b>011</b></p>  |  |  |

|   |  |  |
|---|--|--|
| <p><b>B. Patterson For Congress</b></p> <p>Mailing Address<br/>1246 West 59th Street</p> <p>City: <u>Kansas City</u> State: <u>MO</u> Zip Code: <u>64113</u></p> <p>Purpose of Disbursement</p> <p>Candidate Name<br/><u>Jeanne Patterson</u></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: <u>MO</u> District: <u>5</u></p> |  | <p>Date of Disbursement</p> <p><u>08</u> / <u>25</u> / <u>2004</u></p> |
| <p>Disbursement For: 2004</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____</p>  |  | <p>Amount of Each Disbursement this Period</p> <p><b>\$250.00</b></p>  |
| <p>Category/Type</p> <p><b>011</b></p>  |  |  |

|   |  |   |
|---|--|---|
| <p><b>C. 7th District Congressional Republican Coth. (Fed)</b></p> <p>Mailing Address<br/>PO Box 10076</p> <p>City: <u>Springfield</u> State: <u>MO</u> Zip Code: <u>65808</u></p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: _____ District: _____</p> |  | <p>Date of Disbursement</p> <p><u>09</u> / <u>20</u> / <u>2004</u></p>  |
| <p>Disbursement For:</p> <p><input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____</p>  |  | <p>Amount of Each Disbursement this Period</p> <p><b>\$1,500.00</b></p> |
| <p>Category/Type</p> <p><b>011</b></p>  |  |   |

|   |                   |
|---|-------------------|
| SUBTOTAL of Disbursements This Page (optional)      | <b>\$2,000.00</b> |
| TOTAL This Period (last page this line number only) | <b>\$2,000.00</b> |

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE  
 FOR INCOMING DOCUMENTS**

The FEC added this page to the end of this filing to indicate how it was received.

|  |   |
|--|---|
| <input type="checkbox"/> Hand Delivered  | Date of Receipt                                       |
| <input type="checkbox"/> USPS First Class Mail                                       | Postmarked  |
| <input type="checkbox"/> USPS Registered/Certified                                   | Postmarked (R/C)                                      |
| <input type="checkbox"/> USPS Priority Mail  | Postmarked  |
|  | Delivery Confirmation™ Label <input type="checkbox"/> |
| <input type="checkbox"/> USPS Express Mail   | Postmarked  |
| <input type="checkbox"/> Postmark Illegible  |   |
| <input type="checkbox"/> No Postmark   |   |
| <input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>UPS</i> | Shipping Date <i>10-7-04</i>                          |
| <input type="checkbox"/> Received from House Records & Registration Office           | Date of Receipt                                       |
| <input type="checkbox"/> Received from Senate Public Records Office                  | Date of Receipt                                       |
| <input type="checkbox"/> Received from Electronic Filing Office                      | Date of Receipt                                       |
| <input type="checkbox"/> Other (Specify):  | Date of Receipt or Postmarked                         |
| <i>GA</i><br>PREPARER  | <i>10-8-04</i><br>DATE PREPARED                       |