

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For 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

Nodler for Congress

ADDRESS (number and street)

PO Box 14710

Check if different than previously reported. (ACC)

Springfield

MO

65814

0710

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

STATE DISTRICT

C00462846

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

MO

07

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

in the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

07

15

2010

through

08

19

2010

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 Tom Mechsner

Signature of Treasurer Electronically Filed by Tom Mechsner

Date

08

19

2010

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 3 (Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Nodler for Congress

Report Covering the Period:

From: To:

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	12555.00	378329.64
(b) Total Contribution Refunds (from Line 20(d)).....	41449.46	42349.46
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	-28894.46	335980.18
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	51307.19	340530.18
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	51307.19	340530.18
8. Cash on Hand at Close of Reporting Period (from Line 27).....	0.00	
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	

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 3 (Revised 12/2003)

Write or Type Committee Name
Nodler for Congress

Report Covering the Period: From:

M	M
0	7

D	D
1	5

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	8

D	D
1	9

Y	Y	Y	Y
2	0	1	0

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees	10035.00	95772.26
(i) Itemized (use Schedule A).....	1520.00	244255.46
(ii) Unitemized.....	11555.00	340027.72
(iii) TOTAL of contributions from individuals..... ▶	0.00	0.00
(b) Political Party Committees.....	1000.00	38301.92
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	12555.00	378329.64
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	0.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	4800.00	4800.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	17355.00	383129.64

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

4 / 28

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	51307.19	340530.18
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	36449.46	37349.46
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	5000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	41449.46	42349.46
21. OTHER DISBURSEMENTS.....	0.00	250.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	92756.65	383129.64

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	75401.65
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	17355.00
25. SUBTOTAL (add Line 23 and Line 24).....	92756.65
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	92756.65
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	0.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 28

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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)
Nodler for Congress

A.

Full Name (Last, First, Middle Initial)
Anonymous Contributor

Mailing Address Not Applicable

City State Zip Code
N/A 00000

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: A-C947

Amount of Each Receipt this Period

60.00

Contribution

B.

Full Name (Last, First, Middle Initial)
Anonymous Contributor

Mailing Address Not Applicable

City State Zip Code
N/A 00000

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: A-C948

Amount of Each Receipt this Period

40.00

Contribution

C.

Full Name (Last, First, Middle Initial)
Edward L McAllister, D.D.S.

Mailing Address 1530 S Range Line Road

City State Zip Code
Joplin MO 64804-3229

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

Name of Employer Self-Employed Occupation Dentist

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: A-C965

Amount of Each Receipt this Period

500.00

Contribution

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 6 / 28
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Nodler for Congress

A. Full Name (Last, First, Middle Initial)
Nick Myers, CPA, PC

Mailing Address PO Box 2523

City State Zip Code
Joplin MO 64803-2523

FEC ID number of contributing federal political committee. C

Name of Employer Self-Employed Occupation
Self-Employed Certified Public Accountant

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: A-C951

Amount of Each Receipt this Period 250.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mark F Saladin, D.M.D.

Mailing Address PO Box 862

City State Zip Code
Carthage MO 64836-0862

FEC ID number of contributing federal political committee. C

Name of Employer Self-Employed Occupation
Self-Employed Dentist

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: A-C969

Amount of Each Receipt this Period 500.00

Contribution

C. Full Name (Last, First, Middle Initial)
Richard Davidson

Mailing Address 2809 Neosho Heights Avenue

City State Zip Code
Neosho MO 64850

FEC ID number of contributing federal political committee. C

Name of Employer Self-Employed Occupation
Marco Group, Inc. Owner

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt M M / D D / Y Y Y Y
07 / 16 / 2010

Transaction ID: A-C958

Amount of Each Receipt this Period 1000.00

Contribution

SUBTOTAL of Receipts This Page (optional) 1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 28
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Nodler for Congress

A. Full Name (Last, First, Middle Initial)
H. Dwight Douglas

Mailing Address 6126 Highland Drive

City State Zip Code
Joplin MO 64804-5838

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Freeman Health System General Counsel

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1400.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 16 / 2010

Transaction ID: A-C957

Amount of Each Receipt this Period
350.00

Contribution

B. Full Name (Last, First, Middle Initial)
Alden Buerge

Mailing Address 3405 Arbor Road

City State Zip Code
Joplin MO 64804-1413

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
First State Bank Chairman & CEO

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 19 / 2010

Transaction ID: A-C977

Amount of Each Receipt this Period
500.00

Contribution

C. Full Name (Last, First, Middle Initial)
Jackie K Waganer

Mailing Address 4821 Wendi Road

City State Zip Code
Joplin MO 64804-5160

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
N/A Retired

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 19 / 2010

Transaction ID: A-C976

Amount of Each Receipt this Period
250.00

Contribution

SUBTOTAL of Receipts This Page (optional) 1100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 28
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Nodler for Congress

A. Full Name (Last, First, Middle Initial)
Vernon R Lawson

Mailing Address 1744 SE Murphy Boulevard

City State Zip Code
Joplin MO 64804-1063

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

Name of Employer Occupation
Allgerer, Martin, & Assoc- Electrical Engineer
iat

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 20 / 2010

Transaction ID: A-C978

Amount of Each Receipt this Period
500.00

Contribution

B. Full Name (Last, First, Middle Initial)
Aaron W Farber

Mailing Address PO Box 86

City State Zip Code
Neosho MO 64850-0086

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

Name of Employer Occupation
Farber Law Firm Attorney-at-law

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 22 / 2010

Transaction ID: A-C982

Amount of Each Receipt this Period
400.00

Contribution

C. Full Name (Last, First, Middle Initial)
Gregg L Hartley

Mailing Address 857 Cedar Drive

City State Zip Code
Deale MD 20751-9613

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

Name of Employer Occupation
Cassidy & Associates Vice President/COO

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 26 / 2010

Transaction ID: A-C983

Amount of Each Receipt this Period
1360.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **2260.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 28
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Nodler for Congress

<p>A. Full Name (Last, First, Middle Initial) Donald J Babb</p> <p>Mailing Address 951 Oak Terrace</p> <p>City State Zip Code Bolivar MO 65613-3015</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Citizens Memorial Health-care</p> <p>Occupation CEO/Executive Director</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 07 / 27 / 2010</p> <p>Transaction ID: A-C990</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>Contribution</p>
---	---

<p>B. Full Name (Last, First, Middle Initial) Thomas E Esterly</p> <p>Mailing Address PO Box 168</p> <p>City State Zip Code Eagle Rock MO 65641-0168</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Exeter R-VI School District</p> <p>Occupation Teacher</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 750.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 07 / 27 / 2010</p> <p>Transaction ID: A-C997</p> <p>Amount of Each Receipt this Period 150.00</p> <p>Contribution</p>
--	--

<p>C. Full Name (Last, First, Middle Initial) Joe F Rayl</p> <p>Mailing Address PO Box 197</p> <p>City State Zip Code Bolivar MO 65613-0197</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer N/A</p> <p>Occupation Retired</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 975.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 07 / 27 / 2010</p> <p>Transaction ID: A-C994</p> <p>Amount of Each Receipt this Period 375.00</p> <p>Contribution</p>
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SUBTOTAL of Receipts This Page (optional)	1525.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 28
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Nodler for Congress

A. Full Name (Last, First, Middle Initial)
Michael J Stephens, R, Ph.
Mailing Address 340 S Elgin Avenue
City Bolivar State MO Zip Code 65613-2000
FEC ID number of contributing federal political committee. **C**
Name of Employer Stephens Pharmacy & Homecare Occupation Owner/Pharmacist
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Date of Receipt 07 / 27 / 2010
Transaction ID: A-C992
Amount of Each Receipt this Period 1000.00
Contribution 1000.00

B. Full Name (Last, First, Middle Initial)
Douglas Lawson
Mailing Address 5777 Pine Tree Circle
City Loma Linda State MO Zip Code 64804-8869
FEC ID number of contributing federal political committee. **C**
Name of Employer Information Requested Occupation Information Requested
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Date of Receipt 07 / 28 / 2010
Transaction ID: A-C999
Amount of Each Receipt this Period 50.00
Contribution 250.00

C. Full Name (Last, First, Middle Initial)
James M Zerkel
Mailing Address 100 Colonial Drive
City Webb City State MO Zip Code 64870-1651
FEC ID number of contributing federal political committee. **C**
Name of Employer Snyder Bridge Company Occupation President
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Date of Receipt 07 / 28 / 2010
Transaction ID: A-C1000
Amount of Each Receipt this Period 1000.00
Contribution 1000.00

SUBTOTAL of Receipts This Page (optional) ► 2050.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 28

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Nodler for Congress

A.

Full Name (Last, First, Middle Initial)
William H Perry

Mailing Address PO Box 1645

City State Zip Code
Joplin MO 64802-1645

FEC ID number of contributing federal political committee. C

Name of Employer Self-Employed Occupation
Attorney-at-law

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	1	0

Transaction ID: A-C1015

Amount of Each Receipt this Period
750.00

Contribution

SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line number only)	10035.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 / 28
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Nodler for Congress

A.	Full Name (Last, First, Middle Initial) The Empire District Electric Co. Political Action Committee		Date of Receipt
	Mailing Address PO Box 127		<input type="text" value="07"/> / <input type="text" value="16"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Joplin	MO	64802-0127
	FEC ID number of contributing federal political committee.		Transaction ID: A-C970
	<input type="text" value="C"/> C00208249		Amount of Each Receipt this Period
Name of Employer		Occupation	<input type="text" value="1000.00"/>
Receipt For: 2010		Election Cycle-to-Date ▼	Contribution
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="3500.00"/>	
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="1000.00"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 28
	(check only one)
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input checked="" type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Nodler for Congress

A.

Full Name (Last, First, Middle Initial) KODE TV Channel 12		Date of Receipt MM / DD / YYYY 07 / 29 / 2010
Mailing Address 1928 W 13th Street		Transaction ID: A-M1002
City Joplin	State MO	Zip Code 64801-3839
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1200.00
Name of Employer	Occupation	Media Advertising Refund
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1200.00	

B.

Full Name (Last, First, Middle Initial) Gary Nodler		Date of Receipt MM / DD / YYYY 08 / 12 / 2010
Mailing Address 308 Morgan Court		Transaction ID: A-M1046
City Joplin	State MO	Zip Code 64801-1587
FEC ID number of contributing federal political committee. C H8MO07066		Amount of Each Receipt this Period 3600.00
Name of Employer State of Missouri	Occupation Senator	Deposit for un-paid bills
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3600.00	

SUBTOTAL of Receipts This Page (optional)	4800.00
TOTAL This Period (last page this line number only)	4800.00

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Nodler for Congress

A. Full Name (Last, First, Middle Initial) KOAM TV Channel 17 <hr/> Mailing Address 745 S Range Line Road <hr/> City Joplin State MO Zip Code 64801-5582 <hr/> Purpose of Disbursement Media Advertising Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-959 Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2010
	Amount of Each Disbursement this Period 4415.75
	Category/ Type 004
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) KODE TV Channel 12 <hr/> Mailing Address 1928 W 13th Street <hr/> City Joplin State MO Zip Code 64801-3839 <hr/> Purpose of Disbursement Media Advertising Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-961 Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2010
	Amount of Each Disbursement this Period 2176.00
	Category/ Type 004
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) KSN Channel 16 <hr/> Mailing Address 1502 S Cleveland Avenue <hr/> City Joplin State MO Zip Code 64801-3569 <hr/> Purpose of Disbursement Media Advertising Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-960 Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2010
	Amount of Each Disbursement this Period 2371.50
	Category/ Type 004
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

8963.25

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Nodler for Congress

A.	Full Name (Last, First, Middle Initial) FLS Connect, LLC	Transaction ID: B-E-943 Date of Disbursement 07 / 16 / 2010
	Mailing Address 7300 Hudson Boulevard N Suite 270	Amount of Each Disbursement this Period 1891.74
	City Saint Paul State MN Zip Code 55128-7143	
	Purpose of Disbursement Automated Call-Threats Candidate Name	004 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FLS Connect, LLC	Transaction ID: B-E-944 Date of Disbursement 07 / 16 / 2010
	Mailing Address 7300 Hudson Boulevard N Suite 270	Amount of Each Disbursement this Period 1405.17
	City Saint Paul State MN Zip Code 55128-7143	
	Purpose of Disbursement Automated Call-#1 Candidate Name	004 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Promail/Field Force	Transaction ID: B-E-945 Date of Disbursement 07 / 16 / 2010
	Mailing Address 13621 Wyandotte Street	Amount of Each Disbursement this Period 290.88
	City Kansas City State MO Zip Code 64145-1516	
	Purpose of Disbursement 202 Invites for Davidson Recep Candidate Name	007 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

3587.79

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Nodler for Congress

A.	Full Name (Last, First, Middle Initial) Promail/Field Force Mailing Address 13621 Wyandotte Street City Kansas City State MO Zip Code 64145-1516 Purpose of Disbursement 185 Invites for Buerge Recepti Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-E-946 Date of Disbursement 07 / 16 / 2010 Amount of Each Disbursement this Period 266.40 007 Category/ Type
B.	Full Name (Last, First, Middle Initial) FLS Connect, LLC Mailing Address 7300 Hudson Boulevard N Suite 270 City Saint Paul State MN Zip Code 55128-7143 Purpose of Disbursement Automated Phone Calls-TTH 6/14 Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-E-962 Date of Disbursement 07 / 19 / 2010 Amount of Each Disbursement this Period 2634.84 004 Category/ Type
C.	Full Name (Last, First, Middle Initial) FLS Connect, LLC Mailing Address 7300 Hudson Boulevard N Suite 270 City Saint Paul State MN Zip Code 55128-7143 Purpose of Disbursement Automated Phone Calls-TTH 6/22 Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-E-963 Date of Disbursement 07 / 19 / 2010 Amount of Each Disbursement this Period 2322.34 004 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

5223.58

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 17 / 28

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Nodler for Congress

A.

Full Name (Last, First, Middle Initial)
Faulkner Strategies, LLC

Mailing Address 12801 Sandy Court

City Granger State IN Zip Code 46530-4309

Purpose of Disbursement
Guns Mailer

Candidate Name

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B-E-967
Date of Disbursement: 07 / 20 / 2010

Amount of Each Disbursement this Period
9477.99

Category/Type: 004

B.

Full Name (Last, First, Middle Initial)
KOAM TV Channel 17

Mailing Address 745 S Range Line Road

City Joplin State MO Zip Code 64801-5582

Purpose of Disbursement
Media Advertising

Candidate Name

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B-E-981
Date of Disbursement: 07 / 22 / 2010

Amount of Each Disbursement this Period
1200.00

Category/Type: 004

C.

Full Name (Last, First, Middle Initial)
Brooke Hobbs

Mailing Address 1954 E Cambridge Street

City Springfield State MO Zip Code 65804-3818

Purpose of Disbursement
Mileage & Supplies Reimburseme

Candidate Name

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B-E-979
Date of Disbursement: 07 / 23 / 2010

Amount of Each Disbursement this Period
1003.88

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional) ▶

11681.87

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Nodler for Congress

A.	Full Name (Last, First, Middle Initial) Complete Campaigns.com Mailing Address 205 Pennsylvania Avenue SE City Washington State DC Zip Code 20003-1164 Purpose of Disbursement July Campaign Software Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-E-1016 Date of Disbursement 07 / 26 / 2010 Amount of Each Disbursement this Period 500.00 Category/Type: 001
B.	Full Name (Last, First, Middle Initial) Empire District Electric Mailing Address 602 S Joplin Avenue City Joplin State MO Zip Code 64801-2337 Purpose of Disbursement Joplin HQ Utilities-Electric Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-E-984 Date of Disbursement 07 / 26 / 2010 Amount of Each Disbursement this Period 172.53 Category/Type:
C.	Full Name (Last, First, Middle Initial) OnMedia Mailing Address 1533 S Enterprise Avenue Suite A City Springfield State MO Zip Code 65804-1739 Purpose of Disbursement Production Costs Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-E-995 Date of Disbursement 07 / 28 / 2010 Amount of Each Disbursement this Period 295.00 Category/Type: 004

SUBTOTAL of Disbursements This Page (optional) ▶	967.53
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Nodler for Congress

A. Full Name (Last, First, Middle Initial) Mechsner & Company, LLC <hr/> Mailing Address PO Box 14710 <hr/> City Springfield State MO Zip Code 65814-0710 <hr/> Purpose of Disbursement July Treasurer Duties Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-1006 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 1692.00
	Category/Type 001
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) OnMedia <hr/> Mailing Address 1533 S Enterprise Avenue Suite A <hr/> City Springfield State MO Zip Code 65804-1739 <hr/> Purpose of Disbursement Media Advertising Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-1005 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 29.09
	Category/Type 004
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Ozark Adworks <hr/> Mailing Address 4540 Wendy Way <hr/> City Joplin State MO Zip Code 64804-8638 <hr/> Purpose of Disbursement Media Advertising & Misc. Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-1009 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 1765.00
	Category/Type 004
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

3486.09

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Nodler for Congress

A.	Full Name (Last, First, Middle Initial) Brooke Hobbs	Transaction ID: B-E-1007 Date of Disbursement 08 / 02 / 2010
	Mailing Address 1954 E Cambridge Street	
	City Springfield State MO Zip Code 65804-3818	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement Campaign Consulting Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) FLS Connect, LLC	Transaction ID: B-E-1012 Date of Disbursement 08 / 03 / 2010
	Mailing Address 7300 Hudson Boulevard N Suite 270	
	City Saint Paul State MN Zip Code 55128-7143	Amount of Each Disbursement this Period 13046.94
	Purpose of Disbursement Audio Advertising Candidate Name	004 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Brooke Hobbs	Transaction ID: B-E-1011 Date of Disbursement 08 / 03 / 2010
	Mailing Address 1954 E Cambridge Street	
	City Springfield State MO Zip Code 65804-3818	Amount of Each Disbursement this Period 182.52
	Purpose of Disbursement Postage & Office Depot reimburse Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	15729.46
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Nodler for Congress

A.	Full Name (Last, First, Middle Initial) Click & Pledge	Transaction ID: B-E-1025 Date of Disbursement																			
	Mailing Address 2200 Kraft Drive Suite 1175	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	0		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	0		2	0	1	0												
	City Blacksburg State VA Zip Code 24060-6704	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Credit Card Fees	<table border="1"><tr><td>135.92</td></tr></table>	135.92																		
135.92																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

B.	Full Name (Last, First, Middle Initial) Dennis Hobbs	Transaction ID: B-E-1045 Date of Disbursement																			
	Mailing Address 1841 E Stoneridge Drive	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	2		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	2		2	0	1	0												
	City Springfield State MO Zip Code 65803-4818	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Cell Phone & Mileage Reimburse	<table border="1"><tr><td>853.88</td></tr></table>	853.88																		
853.88																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

C.	Full Name (Last, First, Middle Initial) Mechsner & Company, LLC	Transaction ID: B-E-1048 Date of Disbursement																			
	Mailing Address PO Box 14710	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	8		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	8		2	0	1	0												
	City Springfield State MO Zip Code 65814-0710	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Treasurer Duties	<table border="1"><tr><td>6.41</td></tr></table>	6.41																		
6.41																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>996.21</td></tr></table>	996.21
996.21		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td>50635.78</td></tr></table>	50635.78
50635.78		

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Nodler for Congress

A. Full Name (Last, First, Middle Initial) Quapaw Tribe Of Oklahoma <hr/> Mailing Address PO Box 765 <hr/> City Quapaw State OK Zip Code 74363-0765 <hr/> Purpose of Disbursement Refund for General Election Candidate Name	Transaction ID: B-E-1039 Date of Disbursement 08 / 12 / 2010
	Amount of Each Disbursement this Period 2400.00
	010 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:
B. Full Name (Last, First, Middle Initial) Paula Baker <hr/> Mailing Address 502 Morgan Court <hr/> City Joplin State MO Zip Code 64801-1581 <hr/> Purpose of Disbursement Refund for General Election Candidate Name	Transaction ID: B-E-1034 Date of Disbursement 08 / 12 / 2010
	Amount of Each Disbursement this Period 250.00
	010 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:
C. Full Name (Last, First, Middle Initial) Dorothy Farber <hr/> Mailing Address 100 N Wood Street <hr/> City Neosho State MO Zip Code 64850-1525 <hr/> Purpose of Disbursement Refund for General Election Candidate Name	Transaction ID: B-E-1026 Date of Disbursement 08 / 12 / 2010
	Amount of Each Disbursement this Period 2400.00
	010 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

5050.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Nodler for Congress

A. Full Name (Last, First, Middle Initial) Rudolph E Farber <hr/> Mailing Address 100 N Wood Street <hr/> City Neosho State MO Zip Code 64850-1525 <hr/> Purpose of Disbursement Refund for General Election Candidate Name	Transaction ID: B-E-1027 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 2 / 2 0 1 0
	Amount of Each Disbursement this Period 2400.00
	010 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:
B. Full Name (Last, First, Middle Initial) Gary Hall <hr/> Mailing Address PO Box 217 <hr/> City Galena State KS Zip Code 66739-0217 <hr/> Purpose of Disbursement Refund for General Election Candidate Name	Transaction ID: B-E-1031 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 2 / 2 0 1 0
	Amount of Each Disbursement this Period 2400.00
	010 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:
C. Full Name (Last, First, Middle Initial) Gregg L Hartley <hr/> Mailing Address 857 Cedar Drive <hr/> City Deale State MD Zip Code 20751-9613 <hr/> Purpose of Disbursement Refund for General Election Candidate Name	Transaction ID: B-E-1042 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 2 / 2 0 1 0
	Amount of Each Disbursement this Period 2399.46
	010 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

7199.46

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Nodler for Congress

A. Full Name (Last, First, Middle Initial) Greg E Hoberock <hr/> Mailing Address 1 Oak Ridge Drive <hr/> City Washington State MO Zip Code 63090-5611 <hr/> Purpose of Disbursement Refund for General Election Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-1038 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 2 / 2 0 1 0
	Amount of Each Disbursement this Period 2400.00
	Category/ Type 010
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) David Humphreys <hr/> Mailing Address PO Box 4050 <hr/> City Joplin State MO Zip Code 64803-4050 <hr/> Purpose of Disbursement Refund for General Election Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-1028 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 2 / 2 0 1 0
	Amount of Each Disbursement this Period 2400.00
	Category/ Type 010
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Debra G Humphreys <hr/> Mailing Address PO Box 4050 <hr/> City Joplin State MO Zip Code 64803-4050 <hr/> Purpose of Disbursement Refund for General Election Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-1029 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 2 / 2 0 1 0
	Amount of Each Disbursement this Period 2400.00
	Category/ Type 010
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

7200.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Nodler for Congress

<p>A. Full Name (Last, First, Middle Initial) Andrew Hunte</p> <p>Mailing Address 13 Wildwood Drive</p> <p>City Joplin State MO Zip Code 64804-5821</p> <p>Purpose of Disbursement Refund for General Election Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-1040 Date of Disbursement 08 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 2400.00</p> <p>010 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Angelina Hunte</p> <p>Mailing Address 13 Wildwood Drive</p> <p>City Joplin State MO Zip Code 64804-5821</p> <p>Purpose of Disbursement Refund for General Election Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-1041 Date of Disbursement 08 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 2400.00</p> <p>010 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Bill McCoy</p> <p>Mailing Address 5928 S Parkhaven Lane</p> <p>City Springfield State MO Zip Code 65810-1971</p> <p>Purpose of Disbursement Refund for General Election Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-1043 Date of Disbursement 08 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 2400.00</p> <p>010 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

7200.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Nodler for Congress

A. Full Name (Last, First, Middle Initial) Charles Nodler, Jr. <hr/> Mailing Address 1215 Northwest Boulevard <hr/> City Neosho State MO Zip Code 64850-1308 <hr/> Purpose of Disbursement Refund for General Election Candidate Name	Transaction ID: B-E-1032 Date of Disbursement MM / DD / YYYY 08 / 12 / 2010
	Amount of Each Disbursement this Period 2400.00 <hr/> Purpose of Disbursement Refund for General Election Candidate Name
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Rex Sinquefield <hr/> Mailing Address 244 Bent Walnut <hr/> City Westphalia State MO Zip Code 65085 <hr/> Purpose of Disbursement Refund for General Election Candidate Name	Transaction ID: B-E-1035 Date of Disbursement MM / DD / YYYY 08 / 12 / 2010
	Amount of Each Disbursement this Period 2400.00 <hr/> Purpose of Disbursement Refund for General Election Candidate Name
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Michele R Slawson <hr/> Mailing Address 612 Islington Place <hr/> City Joplin State MO Zip Code 64801-1017 <hr/> Purpose of Disbursement Refund for General Election Candidate Name	Transaction ID: B-E-1037 Date of Disbursement MM / DD / YYYY 08 / 12 / 2010
	Amount of Each Disbursement this Period 2400.00 <hr/> Purpose of Disbursement Refund for General Election Candidate Name
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

7200.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Nodler for Congress

A.

Full Name (Last, First, Middle Initial)
Stephen H Slawson, M.D.

Transaction ID: B-E-1036
Date of Disbursement

Mailing Address 612 Islington Place

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	2		2	0	1	0

City Joplin State MO Zip Code 64801-1017

Amount of Each Disbursement this Period

2400.00

Purpose of Disbursement
Refund for General Election

010

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: District:

B.

Full Name (Last, First, Middle Initial)
Jerry E Wells

Transaction ID: B-E-1033
Date of Disbursement

Mailing Address 18 Fox Hollow Drive

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	2		2	0	1	0

City Joplin State MO Zip Code 64804-5836

Amount of Each Disbursement this Period

200.00

Purpose of Disbursement
Refund for General Election

010

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional)

2600.00

TOTAL This Period (last page this line number only)

36449.46

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input checked="" type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Nodler for Congress

A.

Full Name (Last, First, Middle Initial)
Leggett & Platt, Inc. Political Action Committee

Transaction ID: B-E-1030

Date of Disbursement

Mailing Address PO Box 757

^M	^M	/	^D	^D	/	^Y	^Y	^Y	^Y
0	8		1	2		2	0	1	0

City Carthage State MO Zip Code 64836-0757

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement
Refund for General Election

010

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

5000.00