

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

SECRETARY OF THE SENATE 03 JUL 16 PM 5:06

Office Use Only

1. NAME OF COMMITTEE (in full) Jean Carnahan for Missouri Committee

USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines

ADDRESS (number and street) PO Box 920 Rolla MO 65402

2. FEC IDENTIFICATION NUMBER C00384232 3. IS THIS REPORT NEW (N) OR AMENDED (A) MO

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: July 15 Quarterly Report (Q2) (b) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)

Covering Period 05 01 2003 through 06 30 2003

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 Netta F. Pyron, Assistant Treasurer

Signature of Treasurer Netta F. Pyron Date 07 11 2003

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

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Jean Carnahan for Missouri Committee

Report Covering the Period:

From:

MM  
04DD  
01YYYY  
2003

To:

MM  
06DD  
30YYYY  
2003

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>5. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))...	0.00	3000.00
(b) Total Contribution Refunds (from Line 20(d))...	0.00	18985.00
(c) Net Contributions (other than loans) (subtract Line 5(b) from Line 5(a))...	0.00	-15985.00
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17)...	13049.23	419200.78
(b) Total Offsets to Operating Expenditures (from Line 14)...	8756.96	48835.36
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))...	4292.27	370365.40
<b>8. Cash on Hand at Close of Reporting Period (from Line 27)...</b>	3006.28	
<b>9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)...</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)...</b>	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 02/2003)

Page 3

Write or Type Committee Name  
Jean Carnahan for Missouri Committee

Report Covering the Period:

From:

MM	DD	YYYY
04	01	2003

To:

MM	DD	YYYY
06	30	2003

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)...	0.00	
(ii) Unitemized.....	0.00	
(iii) TOTAL of contributions from individuals... ▶	0.00	0.00
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACS)...	0.00	3000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	3000.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES...</b>	0.00	0.00
<b>13. LOANS</b>		
(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
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)...</b>	8756.96	48835.38
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	0.00	344.58
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...</b> ▶	8756.96	52179.96

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES...	13049.23	419200.78
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES...	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidates...	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...	0.00	18985.00
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs)...	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))...	0.00	18985.00
21. OTHER DISBURSEMENTS.....	6175.00	27175.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	19224.23	495360.78

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	13473.55
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3)...	8758.98
25. SUBTOTAL (add Line 23 and Line 24)...	22230.51
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	19224.23
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	3006.28

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

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

FOR LINE NUMBER: PAGE 5 / 19

(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 checked="" 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)  
Jean Carnahan for Missouri Committee

**A.** Full Name (Last, First, Middle Initial)  
1st Ward Democratic Organization

Mailing Address 5058 Durant Ave.

City State Zip Code  
St. Louis MO 63115

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

Name of Employer Occupation

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2003

Transaction ID: 174766129869

Amount of Each Receipt this Period  
300.00

Refund  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

**B.** Full Name (Last, First, Middle Initial)  
20th Ward Democratic Organization

Mailing Address 4725 Penrose St.

City State Zip Code  
St. Louis MO 63115

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

Name of Employer Occupation

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2003

Transaction ID: 174774129870

Amount of Each Receipt this Period  
300.00

Refund  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

**C.** Full Name (Last, First, Middle Initial)  
A-B Date

Mailing Address Box 17062

City State Zip Code  
Milwaukee WI 53217

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

Name of Employer Occupation

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼  
17533.87

Date of Receipt  
MM / DD / YYYY  
05 / 28 / 2003

Transaction ID: 100899129856

Amount of Each Receipt this Period  
285.06

List Rental  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **885.06**

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

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

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

FOR LINE NUMBER: PAGE 6 / 19

(check only one)

 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)

Jean Carnahan for Missouri Committee

Full Name (Last, First, Middle Initial)

A. A-B Data

Mailing Address Box 17062

 City State Zip Code  
 Milwaukee WI 53217

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2002

 Primary  General  
 Other (specify)

Election Cycle-to-Date ▼

17533.87

Date of Receipt

MM / DD / YYYY  
06 / 18 / 2003

Transaction ID: 100699129864

Amount of Each Receipt this Period

1415.31

List Rental

 Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Kelly L. Dietrich

Mailing Address 5462 Congress Ave., #4

 City State Zip Code  
 Madison WI 53718

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2002

 Primary  General  
 Other (specify)

Election Cycle-to-Date ▼

895.07

Date of Receipt

MM / DD / YYYY  
06 / 10 / 2003

Transaction ID: 156584129861

Amount of Each Receipt this Period

266.42

COBRA Health Insurance Payment

 Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Halle Ferry Township

Mailing Address 9608 Cherryfield Drive

 City State Zip Code  
 St. Louis MO 63136

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2002

 Primary  General  
 Other (specify)

Election Cycle-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
06 / 30 / 2003

Transaction ID: 174589129868

Amount of Each Receipt this Period

300.00

Refund

 Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1981.73

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 7 / 19  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Jean Carnahan for Missouri Committee

**A.** Full Name (Last, First, Middle Initial)  
The Hartford Underwriters Insurance Co.

Mailing Address Box 820

City State Zip Code  
New Hartford NY 13413

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼  
1339.00

Date of Receipt  
MM / DD / YYYY  
03 / 28 / 2003

Transaction ID: 184456129868

Amount of Each Receipt this Period  
1339.00

Refund  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

**B.** Full Name (Last, First, Middle Initial)  
Lisa J. Jaworski

Mailing Address 3021 Nicosh Cir #1310

City State Zip Code  
Falls Church VA 22042

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼  
1025.22

Date of Receipt  
MM / DD / YYYY  
04 / 03 / 2003

Transaction ID: 156696129871

Amount of Each Receipt this Period  
1025.22

Refund of paycheck  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

**C.** Full Name (Last, First, Middle Initial)  
Daniel Alan Lemkow

Mailing Address 17849 Jasmine Drive

City State Zip Code  
Park Rapids MN 56470

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Jean Carnahan for MO Committee  
Division Director

Receipt For: 2002  
 Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼  
1684.15

Date of Receipt  
MM / DD / YYYY  
04 / 15 / 2003

Transaction ID: 156656129850

Amount of Each Receipt this Period  
257.22

COBRA Health Insurance Payment  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

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

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

2621.44

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

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

FOR LINE NUMBER: PAGE 8 / 18  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Jean Carnahan for Missouri Committee

A. Full Name (Last, First, Middle Initial)  
Daniel Alan Leadlow  
Mailing Address 1784B Jasmine Drive  
City Park Rapids State MN Zip Code 56470  
FEC ID number of contributing federal political committee. C  
Name of Employer Jean Carnahan for MO Committee Occupation Division Director  
Receipt For: 2002  
 Primary  General  
 Other (specify) Election Cycle-to-Date 1684.15

Date of Receipt 05 / 10 / 2003  
Transaction ID: 156656129863  
Amount of Each Receipt this Period 133.21  
COBRA Health Insurance Payment  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

B. Full Name (Last, First, Middle Initial)  
Moss Communications, Inc.  
Mailing Address 4101 W. Cypress St.  
City Tampa State FL Zip Code 33607  
FEC ID number of contributing federal political committee. C  
Name of Employer Occupation  
Receipt For: 2002  
 Primary  General  
 Other (specify) Election Cycle-to-Date 250.00

Date of Receipt 05 / 30 / 2003  
Transaction ID: 183612129858  
Amount of Each Receipt this Period 250.00  
Refund  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

C. Full Name (Last, First, Middle Initial)  
Yael E. Duzilou  
Mailing Address 10303 Twin Hills Ct.  
City Houston State TX Zip Code 77031  
FEC ID number of contributing federal political committee. C  
Name of Employer Occupation  
Receipt For: 2002  
 Primary  General  
 Other (specify) Election Cycle-to-Date 3373.39

Date of Receipt 04 / 07 / 2003  
Transaction ID: 137896129846  
Amount of Each Receipt this Period 408.12  
COBRA Health Insurance Payment  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

SUBTOTAL of Receipts This Page (optional) 781.33  
TOTAL This Period (last page this line number only)



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

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

FOR LINE NUMBER:		PAGE 9 / 19	
(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 checked="" type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Jean Carnahan for Missouri Committee

Full Name (Last, First, Middle Initial) A. Yael E. Ouzilou		Date of Receipt MM / DD / YYYY 05 / 02 / 2003	
Mailing Address 10303 Twin Hills Ct.		Transaction ID: 137898129854	
City Houston	State TX	Zip Code 77031	Amount of Each Receipt this Period 444.23
FEC ID number of contributing federal political committee. C		COBRA Health Insurance Payment <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)	
Name of Employer	Occupation		
Receipt For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)▼	Election Cycle-to-Date ▼ 3373.39		

Full Name (Last, First, Middle Initial) B. Yael E. Ouzilou		Date of Receipt MM / DD / YYYY 06 / 05 / 2003	
Mailing Address 10303 Twin Hills Ct.		Transaction ID: 137898129859	
City Houston	State TX	Zip Code 77031	Amount of Each Receipt this Period 444.28
FEC ID number of contributing federal political committee. C		COBRA Health Insurance Payment <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)	
Name of Employer	Occupation		
Receipt For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)▼	Election Cycle-to-Date ▼ 3373.39		

Full Name (Last, First, Middle Initial) C. Yael E. Ouzilou		Date of Receipt MM / DD / YYYY 06 / 30 / 2003	
Mailing Address 10303 Twin Hills Ct.		Transaction ID: 137898129860	
City Houston	State TX	Zip Code 77031	Amount of Each Receipt this Period 444.28
FEC ID number of contributing federal political committee. C		COBRA Health Insurance Payment <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)	
Name of Employer	Occupation		
Receipt For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)▼	Election Cycle-to-Date ▼ 3373.39		

SUBTOTAL of Receipts This Page (optional) .....	1332.79
TOTAL This Period (last page this line number only) .....	

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

Use separate schedule(a)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 / 19

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Jean Camahan for Missouri Committee

Full Name (Last, First, Middle Initial) A. Lawrence M. Smer, Jr.		Date of Receipt MM / DD / YYYY 04 / 07 / 2003
Mailing Address 5330 Pershing, #701		Transaction ID: 122409129847
City St. Louis	State MO	Zip Code 63112
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 125.73	
Name of Employer	Occupation	COBRA Health Insurance Payment <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1a-1))
Receipt For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)▼	Election Cycle-to-Date ▼ 769.34	

Full Name (Last, First, Middle Initial) B. Lawrence M. Smer, Jr.		Date of Receipt MM / DD / YYYY 04 / 16 / 2003
Mailing Address 5330 Pershing, #701		Transaction ID: 122409129849
City St. Louis	State MO	Zip Code 63112
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 7.48	
Name of Employer	Occupation	COBRA Health Insurance Payment <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1a-1))
Receipt For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)▼	Election Cycle-to-Date ▼ 769.34	

Full Name (Last, First, Middle Initial) C. Lawrence M. Smer, Jr.		Date of Receipt MM / DD / YYYY 05 / 09 / 2003
Mailing Address 5330 Pershing, #701		Transaction ID: 122409129855
City St. Louis	State MO	Zip Code 63112
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 133.21	
Name of Employer	Occupation	COBRA Health Insurance Payment <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1a-1))
Receipt For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)▼	Election Cycle-to-Date ▼ 769.34	

SUBTOTAL of Receipts This Page (optional) .....	266.42
TOTAL This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 11 / 19

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)

Jean Carnahan for Missouri Committee

Full Name (Last, First, Middle Initial)

A. State Farm Insurance Co.

Mailing Address 4700 S. Providence

Date of Receipt

MM / DD / YYYY  
06 / 23 / 2003

City State Zip Code  
Columbia MO 65217

Transaction ID: 100710129865

FEC ID number of contributing federal political committee.

C

Amount of Each Receipt this Period

408.00

Name of Employer

Occupation

Refund

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1)-(2))

Receipt For: 2002

Primary  General  
 Other (specify)▼

Election Cycle-to-Date ▼

408.00

SUBTOTAL of Receipts This Page (optional) ▶

408.00

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

8286.77

**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 12 / 19

<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 type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Jean Carnahan for Missouri Committee

Full Name (Last, First, Middle Initial)  
A. 19th Ward Democratic Organization

Transaction ID: 174587106295  
Date of Disbursement

M	M	,	D	D	,	Y	Y	Y	Y
0	5		2	7		2	0	0	3

Mailing Address 1112 Red Fox Lane

Amount of Each Disbursement this Period

500.00
--------

City State Zip Code  
St. Louis MO 63113

Purpose of Disbursement  
Nonfederal Contribution

Category/ Type
-------------------

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2002  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)  
B. Gephardt for President Inc.

Transaction ID:  
Date of Disbursement

M	M	,	D	D	,	Y	Y	Y	Y
0	6		3	0		2	0	0	3

Mailing Address P.O. Box 34807

Amount of Each Disbursement this Period

1000.00
---------

City State Zip Code  
Washington DC 20043

Purpose of Disbursement  
Contribution

Category/ Type
-------------------

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Candidate Name

Richard A. Gephardt

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2004  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)  
C. Robin Carnahan for Missouri

Transaction ID: 194619106298  
Date of Disbursement

M	M	,	D	D	,	Y	Y	Y	Y
0	6		2	7		2	0	0	3

Mailing Address 211 N. Broadway #2980

Amount of Each Disbursement this Period

1175.00
---------

City State Zip Code  
St. Louis MO 63102

Purpose of Disbursement  
Nonfederal Contribution

Category/ Type
-------------------

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Candidate Name

Robin A. Carnahan

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2004  
 Primary  General  
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) .....	2675.00
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)

PAGE 13 / 19

17  18  19a  19b  
 20a  20b  20c  21

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NAME OF COMMITTEE (In Full)  
Jean Carnahan for Missouri Committee

Full Name (Last, First, Middle Initial) <b>A. Russ Carnahan for Congress Exploratory Committee</b>		Transaction ID: 194620106299	
Mailing Address 3150 Allen Ave		Date of Disbursement 06 / 30 / 2003	
City St. Louis	State MO	Zip Code 63104	Amount of Each Disbursement this Period 2000.00
Purpose of Disbursement Contribution		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name Russ Carnahan			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MO	District: 3		

Full Name (Last, First, Middle Initial) <b>B. Slay for Mayor</b>		Transaction ID: 194617106298	
Mailing Address 6550 Itaska		Date of Disbursement 05 / 30 / 2003	
City St. Louis	State MO	Zip Code 63109	Amount of Each Disbursement this Period 500.00
Purpose of Disbursement Nonfederal Contribution		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

Full Name (Last, First, Middle Initial) <b>C. A Lot of People Supporting Tom Daschle Inc.</b>		Transaction ID: 194621106300	
Mailing Address P.O. Box 1656		Date of Disbursement 06 / 30 / 2003	
City Sioux Falls	State SD	Zip Code 57101	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement Contribution		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name Thomas A. Daschle			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: SD	District:		

SUBTOTAL of Disbursements This Page (optional) .....	3500.00
TOTAL This Period (last page this line number only) .....	6175.00

**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)

PAGE 14 / 19

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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**NAME OF COMMITTEE (In Full)**  
Jean Carnahan for Missouri Committee

<b>A. A-B Data</b> Full Name (Last, First, Middle Initial) Mailing Address: Box 17082 City: Milwaukee State: WI Zip Code: 53217 Purpose of Disbursement: Direct mail expenses Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 100899106285 Date of Disbursement: 04 / 17 / 2003 Amount of Each Disbursement this Period: 8000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
--	--	---

<b>B. Bank of America</b> Full Name (Last, First, Middle Initial) Mailing Address: 210 W. 8th City: Rolla State: MO Zip Code: 65401 Purpose of Disbursement: Bank Service Charge Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 137876106303 Date of Disbursement: 05 / 31 / 2003 Amount of Each Disbursement this Period: 4.48 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
---	--	--

<b>C. Bank of America</b> Full Name (Last, First, Middle Initial) Mailing Address: 210 W. 8th City: Rolla State: MO Zip Code: 65401 Purpose of Disbursement: Bank Service Charge Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 137876106304 Date of Disbursement: 06 / 30 / 2003 Amount of Each Disbursement this Period: 5.45 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	8009.93
<b>TOTAL</b> 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 15 / 19

 17  
20a
  18  
20b
  19a  
20c
  19b  
21

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NAME OF COMMITTEE (In Full)

Jean Gamahan for Missouri Committee

Full Name (Last, First, Middle Initial)

A. Blue Cross and Blue Shield of Missouri

Mailing Address Box 956551

 City State Zip Code  
St. Louis MO 63195

 Purpose of Disbursement  
Insurance

Candidate Name

  
Category/  
Type

 Office Sought:  House  
 Senate  
 President

 Disbursement For: 2002  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 104078106274

Date of Disbursement

 M /  D /  Y  
04 / 07 / 2003

Amount of Each Disbursement this Period

 1442.43

 Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Blue Cross and Blue Shield of Missouri

Mailing Address Box 956551

 City State Zip Code  
St. Louis MO 63195

 Purpose of Disbursement  
Insurance

Candidate Name

  
Category/  
Type

 Office Sought:  House  
 Senate  
 President

 Disbursement For: 2002  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 104078106284

Date of Disbursement

 M /  D /  Y  
04 / 28 / 2003

Amount of Each Disbursement this Period

 597.88

 Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Blue Cross and Blue Shield of Missouri

Mailing Address Box 956551

 City State Zip Code  
St. Louis MO 63195

 Purpose of Disbursement  
Insurance

Candidate Name

  
Category/  
Type

 Office Sought:  House  
 Senate  
 President

 Disbursement For: 2002  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 104078106302

Date of Disbursement

 M /  D /  Y  
06 / 05 / 2003

Amount of Each Disbursement this Period

 420.78

 Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

 2461.07

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 18 / 19

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

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NAME OF COMMITTEE (In Full)  
Jean Carnahan for Missouri Committee

Full Name (Last, First, Middle Initial) A. Carnahan Investments		Transaction ID: 100810108290 Date of Disbursement 05 / 01 / 2003
Mailing Address Box 904		Amount of Each Disbursement this Period 600.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Rolla	State MO	
Zip Code 65402	Category/ Type	
Purpose of Disbursement Rent	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. CGI Long Distance		Transaction ID: 100852108286 Date of Disbursement 04 / 28 / 2003
Mailing Address 6950 W. 58th St.		Amount of Each Disbursement this Period 24.94 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Mission	State KS	
Zip Code 66202	Category/ Type	
Purpose of Disbursement Phone service	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. CGI Long Distance		Transaction ID: 100852108287 Date of Disbursement 05 / 05 / 2003
Mailing Address 6950 W. 58th St.		Amount of Each Disbursement this Period 6.06 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Mission	State KS	
Zip Code 66202	Category/ Type	
Purpose of Disbursement Phone service	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) .....	631.00
TOTAL This Period (last page this line number only) .....	





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

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for each category of the  
Detailed Summary Page

 FOR LINE NUMBER:  
(check only one)

PAGE 18 / 19

 17  
20a
  18  
20b
  19a  
20c
  19b  
21

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NAME OF COMMITTEE (in Full)

Jean Carnahan for Missouri Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Hungerford Printers		Transaction ID: 138308106288 Date of Disbursement <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2003"/>	
Mailing Address 1228 Ninth St. NW		Amount of Each Disbursement this Period <input type="text" value="456.50"/>	
City Washington State DC Zip Code 20001	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
Purpose of Disbursement Printing Candidate Name	<input type="checkbox"/> Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) Netta (Peggy) Pyron		Transaction ID: 100702106291 Date of Disbursement <input type="text" value="05"/> / <input type="text" value="01"/> / <input type="text" value="2003"/>	
Mailing Address 1308 Spring Ave.		Amount of Each Disbursement this Period <input type="text" value="216.00"/>	
City Rolla State MO Zip Code 65401	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
Purpose of Disbursement Financial Consulting Candidate Name	<input type="checkbox"/> Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) Netta (Peggy) Pyron		Transaction ID: 100702106294 Date of Disbursement <input type="text" value="06"/> / <input type="text" value="01"/> / <input type="text" value="2003"/>	
Mailing Address 1308 Spring Ave.		Amount of Each Disbursement this Period <input type="text" value="78.00"/>	
City Rolla State MO Zip Code 65401	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
Purpose of Disbursement Financial Consulting Candidate Name	<input type="checkbox"/> Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶		<input type="text" value="750.50"/>	
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		<input type="text"/>	

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

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NAME OF COMMITTEE (In Full)  
Jean Camahan for Missouri Committee

Full Name (Last, First, Middle Initial) A. Scott Sorrell		Transaction ID: 100700106288	
Mailing Address 2000 Vienna Rd		Date of Disbursement MM / DD / YYYY 05 / 01 / 2003	
City Rolla	State MO	Zip Code 65401	Amount of Each Disbursement this Period 976.16
Purpose of Disbursement Computer Consulting		Category/ Type	
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

SUBTOTAL of Disbursements This Page (optional) .....	976.16
TOTAL This Period (last page this line number only) .....	13049.23

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