

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

Friends of Roy Blunt

ADDRESS (number and street) PO Box 50100

Check if different than previously reported. (ACC) Springfield MO 65805

2. **FEC IDENTIFICATION NUMBER** C00304758

3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

CITY STATE **ZIP CODE** STATE DISTRICT

MO 7

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 08 08 2006 in the State of MO

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

General (30G) Runoff (30R) Special (30S)

Election on in the State of

5. Covering Period 07 01 2006 through 07 19 2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Gordon Elliott, Treasurer

Signature of Treasurer Electronically Filed by Gordon Elliott, Treasurer Date 07 27 2006

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

Write or Type Committee Name

Friends of Roy Blunt

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	7

D	D
1	9

Y	Y	Y	Y
2	0	0	6

	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)).....	115680.00	2319910.15
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	6100.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	115680.00	2313810.15
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	38654.25	1590098.98
(b) Total Offsets to Operating Expenditures (from Line 14).....	18.23	45218.16
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	38636.02	1544880.82
8. Cash on Hand at Close of Reporting Period (from Line 27).....	492005.76	
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).....	23559.97	

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)

Write or Type Committee Name
Friends of Roy Blunt

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	7

D	D
1	9

Y	Y	Y	Y
2	0	0	6

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

(i) Itemized (use Schedule A).....

39800.00

914655.26

(ii) Unitemized.....

380.00

49022.86

(iii) TOTAL of contributions

40180.00

963678.12

from individuals..... ▶

0.00

636.51

(b) Political Party Committees.....

(c) Other Political Committees (such as PACS).....

75500.00

1355595.52

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans)

115680.00

2319910.15

(add Lines 11(a)(iii), (b), (c), and (d))

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

0.00

0.00

(add Lines 13(a) and (b)).....

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.).....

18.23

45218.16

15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

0.00

11201.31

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

115698.23

2376329.62

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	38654.25	1590098.98
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.....	0.00	1100.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	5000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	6100.00
21. OTHER DISBURSEMENTS.....	543000.00	876510.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	581654.25	2472708.98

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	957961.78
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	115698.23
25. SUBTOTAL (add Line 23 and Line 24).....	1073660.01
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	581654.25
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	492005.76

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 5 / 59
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<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)
Friends of Roy Blunt

A. Full Name (Last, First, Middle Initial)
Kenneth Meyer

Mailing Address 3639 E. Kensington Way
Cooper Estates

City Springfield State MO Zip Code 65802

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

Name of Employer Meyer Communications Occupation Owner/President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4100.00

Date of Receipt
MM / DD / YYYY
07 / 10 / 2006

Transaction ID: 60712.C24723

Amount of Each Receipt this Period
2100.00

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

B. Full Name (Last, First, Middle Initial)
John T. Russell

Mailing Address P.O. Box 93

City Lebanon State MO Zip Code 65536

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

Name of Employer Semi-Retired Occupation Semi-Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
07 / 03 / 2006

Transaction ID: 60712.C24696

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Doug Russell

Mailing Address 1616 Arbour Dr.

City Lebanon State MO Zip Code 65536

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

Name of Employer Durham Company Occupation President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
07 / 10 / 2006

Transaction ID: 60712.C24734

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional)	3600.00
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 6 / 59
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Roy Blunt

A. Full Name (Last, First, Middle Initial)
Barbara Barnes

Mailing Address 4250 E. Farm Road 148

City State Zip Code
Springfield MO 65809

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

Name of Employer
Self Employed

Occupation
Travel Company

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
07 / 03 / 2006

Transaction ID: 60712.C24694

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Leland L. Gannaway

Mailing Address 3271 E Battlefield St Ste 200

City State Zip Code
Springfield MO 65804-4091

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

Name of Employer
Gannaway & Cummings

Occupation
Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1250.00

Date of Receipt
MM / DD / YYYY
07 / 10 / 2006

Transaction ID: 60712.C24725

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Carl A. Lowe

Mailing Address 20671 Potomac Drive

City State Zip Code
Lebanon MO 65536

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

Name of Employer
Self Employed

Occupation
Investor/Rancher

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt
MM / DD / YYYY
07 / 13 / 2006

Transaction ID: 60715.C24747

Amount of Each Receipt this Period
1000.00

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

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 59
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Roy Blunt

A. Full Name (Last, First, Middle Initial)
Mary E. Swanson

Mailing Address 193 Plateau Lane

City State Zip Code
Kimberling City MO 65686-9586

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

Name of Employer Retired Occupation Retired

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2700.00

Date of Receipt
MM / DD / YYYY
07 / 14 / 2006

Transaction ID: 60718.C24768

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Edwin Rice Jr.

Mailing Address P.O. Box 11250

City State Zip Code
Springfield MO 65808-1250

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

Name of Employer Coca-Cola Occupation President & CEO

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2200.00

Date of Receipt
MM / DD / YYYY
07 / 10 / 2006

Transaction ID: 60712.C24714

Amount of Each Receipt this Period
200.00

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

C. Full Name (Last, First, Middle Initial)
W. Bruce Howell

Mailing Address 1947 E. Seminole

City State Zip Code
Springfield MO 65804

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

Name of Employer Self Employed Occupation Gorman-Scharpe Funeral Home

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00

Date of Receipt
MM / DD / YYYY
07 / 05 / 2006

Transaction ID: 60712.C24700

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► 1700.00

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 8 / 59
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Roy Blunt

A. Full Name (Last, First, Middle Initial)
Carol Lorange

Mailing Address 103 Saddlebrooke Drive

City State Zip Code
Chestnutridge MO 65630

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

Name of Employer Self Employed Occupation
Saddlebrook Development

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt
MM / DD / YYYY
07 / 10 / 2006

Transaction ID: 60712.C24710

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
William H. Darr

Mailing Address 2951 White Oak Dr.

City State Zip Code
Springfield MO 65809

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

Name of Employer ADF Occupation
President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt
MM / DD / YYYY
07 / 10 / 2006

Transaction ID: 60712.C24732

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Virginia Darr

Mailing Address 2951 White Oak Dr.

City State Zip Code
Springfield MO 65809

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

Name of Employer Retired Occupation
Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt
MM / DD / YYYY
07 / 10 / 2006

Transaction ID: 60712.C24720

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **2500.00**

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 9 / 59
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Roy Blunt

Full Name (Last, First, Middle Initial) A. Wendell Bailey		Date of Receipt M M / D D / Y Y Y Y 07 / 10 / 2006	
Mailing Address 11 W 4th		Transaction ID: 60712.C24726	
City Willow Springs	State MO	Zip Code 65793	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer US Government	Occupation Small Business Administration		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1250.00		

Full Name (Last, First, Middle Initial) B. Joe T. White		Date of Receipt M M / D D / Y Y Y Y 07 / 14 / 2006	
Mailing Address 1353 Lakeshore Dr.		Transaction ID: 60718.C24771	
City Branson	State MO	Zip Code 65616	Amount of Each Receipt this Period 800.00
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Kanakuk Kamps	Occupation Owner		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 800.00		

Full Name (Last, First, Middle Initial) C. Debbie Jo White		Date of Receipt M M / D D / Y Y Y Y 07 / 14 / 2006	
Mailing Address 1353 Lakeshore Dr.		Transaction ID: 60718.C24772	
City Branson	State MO	Zip Code 65616	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Kanakuk Kamps	Occupation Camp Director		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3100.00		

SUBTOTAL of Receipts This Page (optional) ▶	1150.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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 10 / 59
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Roy Blunt

A. Full Name (Last, First, Middle Initial)
Debbie Jo White

Mailing Address 1353 Lakeshore Dr.

City Branson State MO Zip Code 65616

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

Name of Employer Kanakuk Kamps Occupation Camp Director

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4200.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 14 / 2006

Transaction ID: 60718.C24773

Amount of Each Receipt this Period
 1100.00

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

B. Full Name (Last, First, Middle Initial)
David A. Cole

Mailing Address 1002 Chinquapin Woods

City Cassville State MO Zip Code 65625

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

Name of Employer Ellis Cupps & Cole Occupation Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 10 / 2006

Transaction ID: 60712.C24731

Amount of Each Receipt this Period
 1000.00

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

C. Full Name (Last, First, Middle Initial)
Patty A. Connell

Mailing Address P.O. Box 640

City Kimberling City State MO Zip Code 65686

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

Name of Employer Stone Co. RE Occupation Vice President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 03 / 2006

Transaction ID: 60712.C24697

Amount of Each Receipt this Period
 500.00

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

SUBTOTAL of Receipts This Page (optional) ► 2600.00

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 / 59
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Roy Blunt

A. Full Name (Last, First, Middle Initial)
Thomas G. Field

Mailing Address 5109 Woodfield Place

City State Zip Code
Springfield MO 65810

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

Name of Employer Occupation
Nealet Newman Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1250.00

Date of Receipt
MM / DD / YYYY
07 / 13 / 2006

Transaction ID: 60715.C24753

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Glen Garrett

Mailing Address RR 1 Box 41A

City State Zip Code
Purdy MO 65734-9710

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

Name of Employer Occupation
TSMT Trucking Co. CEO

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3250.00

Date of Receipt
MM / DD / YYYY
07 / 10 / 2006

Transaction ID: 60712.C24716

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Thomas P. Sweeney

Mailing Address 2592 S. Skyline Drive

City State Zip Code
Springfield MO 65804

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

Name of Employer Occupation
Retired Physician

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
MM / DD / YYYY
07 / 10 / 2006

Transaction ID: 60712.C24730

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional)	▶	2500.00
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 12 / 59
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Roy Blunt

A. Full Name (Last, First, Middle Initial)
Jose M. Dominguez

Mailing Address 1001 E Primrose St

City State Zip Code
Springfield MO 65807-5155

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

Name of Employer Occupation
Ferrell-Duncan Clinic Physician

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

3000.00

Date of Receipt
MM / DD / YYYY
07 / 10 / 2006

Transaction ID: 60712.C24718

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Lawana Low

Mailing Address PO Box 4208

City State Zip Code
Springfield MO 65808

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

Name of Employer Occupation
Prime, Inc. Secretary

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

2100.00

Date of Receipt
MM / DD / YYYY
07 / 13 / 2006

Transaction ID: 60715.C24749

Amount of Each Receipt this Period
2100.00

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

C. Full Name (Last, First, Middle Initial)
Lawana Low

Mailing Address PO Box 4208

City State Zip Code
Springfield MO 65808

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

Name of Employer Occupation
Prime, Inc. Secretary

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

4200.00

Date of Receipt
MM / DD / YYYY
07 / 13 / 2006

Transaction ID: 60715.C24750

Amount of Each Receipt this Period
2100.00

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

SUBTOTAL of Receipts This Page (optional)	5200.00
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 13 / 59
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Roy Blunt

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

Mailing Address PO Box 5

City State Zip Code
Marshfield MO 65706

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

Name of Employer Occupation
Thompson Communications Consultant

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 10 / 2006

Transaction ID: 60712.C24729

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Carl H. Tiedt

Mailing Address 3735 E. Eaglescliffe Drive

City State Zip Code
Springfield MO 65809

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

Name of Employer Occupation
Retired Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 10 / 2006

Transaction ID: 60712.C24719

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Jay M. Wasson

Mailing Address 315 Wilderness Rd.

City State Zip Code
Nixa MO 65714

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

Name of Employer Occupation
Self Employed Business Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 17 / 2006

Transaction ID: 60720.C24776

Amount of Each Receipt this Period
250.00

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

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 59
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Roy Blunt

A. Full Name (Last, First, Middle Initial)
Patti Penny

Mailing Address 2960 W. Weaver Rd.

City Springfield State MO Zip Code 65810

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

Name of Employer Penmac Personnel Occupation Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
07 / 05 / 2006

Transaction ID: 60712.C24705

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Ronald F. Richard

Mailing Address 1419 W 4th St

City Joplin State MO Zip Code 64801-3033

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

Name of Employer Self Employed Occupation Business Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2250.00

Date of Receipt
MM / DD / YYYY
07 / 10 / 2006

Transaction ID: 60712.C24715

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Randal R. Swanson

Mailing Address P.O. Box 952

City Kimberling City State MO Zip Code 65686

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

Name of Employer Port of Kimberling Marina Occupation Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
07 / 10 / 2006

Transaction ID: 60712.C24735

Amount of Each Receipt this Period
1000.00

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

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 59
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Roy Blunt

A. Full Name (Last, First, Middle Initial)
Robert E. Roundtree

Mailing Address 2669 S Marlan Ave

City Springfield State MO Zip Code 65804-3808

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

Name of Employer Retired Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2100.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 06 / 2006

Transaction ID: 60712.C24703

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Sharon K. Garrett

Mailing Address RR 1 Box 41A

City Purdy State MO Zip Code 65734-9710

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

Name of Employer The Trunk, Inc. Occupation Retail Sales

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 10 / 2006

Transaction ID: 60712.C24717

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Stephen F. Brauer

Mailing Address 11250 Hunter Drive

City Bridgeton State MO Zip Code 63044

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

Name of Employer Hunter Engineering Co. Occupation Executive

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 10 / 2006

Transaction ID: 60712.C24711

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
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 16 / 59
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Roy Blunt

A. Full Name (Last, First, Middle Initial)
Michael S. Waite

Mailing Address 5233 Brawner PI

City State Zip Code
Alexandria VA 22304

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

Name of Employer Occupation
The Livingston Group Lobbyist

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
07 / 12 / 2006

Transaction ID: 60715.C24759

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Susan B. Perez

Mailing Address 1415 S. Fairway

City State Zip Code
Springfield MO 65804

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
MM / DD / YYYY
07 / 05 / 2006

Transaction ID: 60712.C24699

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Rochelle M. Buckner

Mailing Address 4931 S Farm Rd 145

City State Zip Code
Springfield MO 65810

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
07 / 13 / 2006

Transaction ID: 60715.C24752

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **3000.00**

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 17 / 59
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Roy Blunt

A. Full Name (Last, First, Middle Initial)
Teresa Ollis

Mailing Address 5340 E Pleasant Valley Ln

City State Zip Code
Springfield MO 65809-3175

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
07 / 06 / 2006

Transaction ID: 60712.C24701

Amount of Each Receipt this Period
100.00

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

B. Full Name (Last, First, Middle Initial)
William H. Zelif, Jr.

Mailing Address 409 S. Capitol St. SW Suite 600

City State Zip Code
Washington DC 20003

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

Name of Employer Occupation
The Livingston Group Lobbyist

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
07 / 12 / 2006

Transaction ID: 60715.C24758

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Craig Schneider

Mailing Address 3600 S Farm Rd 205

City State Zip Code
Rogersville MO 65742

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

Name of Employer Occupation
Esterly Schneider & Associates Architect

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Date of Receipt
MM / DD / YYYY
07 / 05 / 2006

Transaction ID: 60712.C24704

Amount of Each Receipt this Period
100.00

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

SUBTOTAL of Receipts This Page (optional) ► **1200.00**

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 18 / 59
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Roy Blunt

A. Full Name (Last, First, Middle Initial)
J. Ryan Hamilton

Mailing Address P.O. Box 281

City State Zip Code
Kimberling City MO 65686

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

Name of Employer Occupation
Port of Kimberling Marina General Manager

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

3000.00

Date of Receipt
MM / DD / YYYY
07 / 10 / 2006

Transaction ID: 60712.C24721

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Mary M. Arnold

Mailing Address 3858 E Farm Rd 186

City State Zip Code
Rogersville MO 65742

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

Name of Employer Occupation
Esterly Schneider & Associates Office Manager

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

350.00

Date of Receipt
MM / DD / YYYY
07 / 05 / 2006

Transaction ID: 60712.C24706

Amount of Each Receipt this Period
100.00

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

C. Full Name (Last, First, Middle Initial)
Mary Lawson

Mailing Address 3861 E Linwood Ter

City State Zip Code
Springfield MO 65809-2224

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

1250.00

Date of Receipt
MM / DD / YYYY
07 / 10 / 2006

Transaction ID: 60712.C24728

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► **1600.00**

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 19 / 59
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Roy Blunt

A. Full Name (Last, First, Middle Initial)
Mary Barnes

Mailing Address 3649 N Stewart Ave

City Springfield State MO Zip Code 65803-4840

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

Name of Employer Vita-Erb Ltd Occupation Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
07 / 06 / 2006

Transaction ID: 60712.C24702

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Bryna W. Justice Jr.

Mailing Address 3520 E Battlefield St

City Springfield State MO Zip Code 65809-3400

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

Name of Employer Justice Jewelers Occupation Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt
MM / DD / YYYY
07 / 10 / 2006

Transaction ID: 60712.C24722

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
James R. Herschend

Mailing Address 2235 Smyrna Rd

City Ozark State MO Zip Code 65721-7681

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

Name of Employer Herschend Family Ent. Corp. Occupation Vice President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
07 / 03 / 2006

Transaction ID: 60712.C24695

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► 2500.00

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 20 / 59
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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)
Friends of Roy Blunt

A. Full Name (Last, First, Middle Initial)
Diane Frank

Mailing Address 2075 Nottingham Dr

City State Zip Code
Ozark MO 65721-7615

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

Name of Employer Occupation
Kanakuk Camp CFO

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
07 / 05 / 2006

Transaction ID: 60712.C24698

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Steven Welko

Mailing Address 264 Johnson Way Ln

City State Zip Code
Kimberling City MO 65686-9353

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

Name of Employer Occupation
Dess.Welko Construction General Contractor

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
07 / 10 / 2006

Transaction ID: 60712.C24724

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Mary Lou Wittmer

Mailing Address 4197 E Wilshire St

City State Zip Code
Springfield MO 65809-3407

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

Name of Employer Occupation
Retired Nurse

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
07 / 10 / 2006

Transaction ID: 60712.C24733

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **2250.00**

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 21 / 59
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Roy Blunt

A. Full Name (Last, First, Middle Initial)
Jay P. Cummings

Mailing Address 4352 E Cross Timbers St

City Springfield State MO Zip Code 65809-3551

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

Name of Employer Jay P. Cummings, P.C. Occupation Lawyer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
07 / 10 / 2006

Transaction ID: 60712.C24736

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Terry Franc

Mailing Address 19 Briarcliff

City Saint Louis State MO Zip Code 63124

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
07 / 06 / 2006

Transaction ID: 60715.C24745

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Ziya Sukun

Mailing Address PO Box 489

City Westport State CT Zip Code 06881

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

Name of Employer ITKIB USA Occupation Business Executive

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
07 / 12 / 2006

Transaction ID: 60715.C24757

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

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 22 / 59	
	(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) Friends of Roy Blunt

A. Full Name (Last, First, Middle Initial) Paul C. Horn	
Mailing Address 1909 Huntington Dr	
City Cape Girardeau	State MO
Zip Code 63701-2921	
FEC ID number of contributing federal political committee. C	
Name of Employer Cape Labs and Pathology	Occupation Physician
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY 07 / 14 / 2006
Transaction ID: 60718.C24767
Amount of Each Receipt this Period 500.00
Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	500.00
TOTAL This Period (last page this line number only)	39800.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 23 / 59
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<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)
Friends of Roy Blunt

A. Full Name (Last, First, Middle Initial)
Owner-Operator Ind. Drivers Assn. PAC

Mailing Address 1101 30th Street NW
Suite 300

City State Zip Code
Washington DC 20007

FEC ID number of contributing federal political committee. **C** C00236778

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
6500.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 13 / 2006

Transaction ID: 60715.C24748

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
American Medical Association PAC

Mailing Address 1101 Vermont Avenue, NW
12th Floor

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00000422

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 13 / 2006

Transaction ID: 60715.C24751

Amount of Each Receipt this Period
5000.00

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

C. Full Name (Last, First, Middle Initial)
National Association of Realtors PAC

Mailing Address 430 N Michigan Ave

City State Zip Code
Chicago IL 60611-4011

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 10 / 2006

Transaction ID: 60712.C24707

Amount of Each Receipt this Period
4000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
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 24 / 59
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<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)
Friends of Roy Blunt

Full Name (Last, First, Middle Initial) A. American Health Care Association PAC		Date of Receipt M M / D D / Y Y Y Y 07 / 14 / 2006	
Mailing Address 1201 L St NW		Transaction ID: 60718.C24774	
City State Zip Code Washington DC 20005-4024	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C C00006080		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 10000.00		

Full Name (Last, First, Middle Initial) B. American Bankers Assn. PAC		Date of Receipt M M / D D / Y Y Y Y 07 / 10 / 2006	
Mailing Address 1120 Connecticut Ave NW		Transaction ID: 60712.C24713	
City State Zip Code Washington DC 20036-3902	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C C00004275		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 7000.00		

Full Name (Last, First, Middle Initial) C. American Bankers Assn. PAC		Date of Receipt M M / D D / Y Y Y Y 07 / 10 / 2006	
Mailing Address 1120 Connecticut Ave NW		Transaction ID: 60712.C24708	
City State Zip Code Washington DC 20036-3902	Amount of Each Receipt this Period 3000.00		
FEC ID number of contributing federal political committee. C C00004275		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 10000.00		

SUBTOTAL of Receipts This Page (optional) ▶	13000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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 25 / 59
	<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)
Friends of Roy Blunt

Full Name (Last, First, Middle Initial) A. National Council of Farmer Cooperatives		Date of Receipt M M / D D / Y Y Y Y 07 / 03 / 2006
Mailing Address CO-OP/ PAC 50 F Street NW, Suite 900		Transaction ID: 60707.C24685
City Washington State DC Zip Code 20001	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00002238		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. National Milk Producers Federation PAC		Date of Receipt M M / D D / Y Y Y Y 07 / 12 / 2006
Mailing Address 2101 Wilson Blvd., Suite 400		Transaction ID: 60715.C24760
City Arlington State VA Zip Code 22201	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00325324		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. Deloitte & Touche Federal PAC		Date of Receipt M M / D D / Y Y Y Y 07 / 03 / 2006
Mailing Address PO Box 365		Transaction ID: 60707.C24690
City Washington State DC Zip Code 20044-0365	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00211318		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 10000.00	

SUBTOTAL of Receipts This Page (optional) ▶	7000.00
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 26 / 59
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Roy Blunt

A. Full Name (Last, First, Middle Initial)
The Bond Market Association PAC

Mailing Address 1399 New York Ave., NW

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00158980

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 10 / 2006

Transaction ID: 60715.C24754

Amount of Each Receipt this Period
2500.00

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

B. Full Name (Last, First, Middle Initial)
Walt Disney Company Employees PAC

Mailing Address 1150 17th St NW Suite 400

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00197749

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 10 / 2006

Transaction ID: 60715.C24755

Amount of Each Receipt this Period
5000.00

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

C. Full Name (Last, First, Middle Initial)
POWER PAC

Mailing Address 2301 M Street, NW Suite 300

City State Zip Code
Washington DC 20037-1484

FEC ID number of contributing federal political committee. **C** C00161570

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 19 / 2006

Transaction ID: 60721.C24798

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **8500.00**

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 27 / 59
	<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)
Friends of Roy Blunt

Full Name (Last, First, Middle Initial) A. Darden Restaurants Inc. Employees		Date of Receipt M M / D D / Y Y Y Y 07 / 10 / 2006	
Mailing Address Good Government Fund 5900 Lake Ellenor Drive		Transaction ID: 60715.C24756	
City State Zip Code Orlando FL 32809		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00108282		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 10000.00	

Full Name (Last, First, Middle Initial) B. Baxter Healthcare Corp. PAC		Date of Receipt M M / D D / Y Y Y Y 07 / 19 / 2006	
Mailing Address 1501 K St NW		Transaction ID: 60721.C24802	
City State Zip Code Washington DC 20005-1401		Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C C00117838		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation			
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. UBS Americas Fund		Date of Receipt M M / D D / Y Y Y Y 07 / 03 / 2006	
Mailing Address for Better Government 1285 Avenue of the Americas, 14th		Transaction ID: 60707.C24688	
City State Zip Code New York NY 10019		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00012245		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 10000.00	

SUBTOTAL of Receipts This Page (optional) ▶	12000.00
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 28 / 59
	(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)
Friends of Roy Blunt

A. Full Name (Last, First, Middle Initial)
Skin PAC

Mailing Address 1350 I St NW Ste 870

City Washington State DC Zip Code 20005-3305

FEC ID number of contributing federal political committee. **C** C00359539

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 7000.00

Date of Receipt

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

Transaction ID: 60707.C24689

Amount of Each Receipt this Period
5000.00

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

B. Full Name (Last, First, Middle Initial)
Association of American Railroads

Mailing Address PAC (RAIL PAC)
50 F Street NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00280743

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	2	/	2	0	0	6

Transaction ID: 60715.C24762

Amount of Each Receipt this Period
1500.00

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

C. Full Name (Last, First, Middle Initial)
United Technologies Corporation PAC

Mailing Address 1401 I Street, NW
Suite 600

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00035683

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	2	/	2	0	0	6

Transaction ID: 60715.C24761

Amount of Each Receipt this Period
1500.00

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

SUBTOTAL of Receipts This Page (optional)	8000.00
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 29 / 59
	<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)
Friends of Roy Blunt

A. Full Name (Last, First, Middle Initial) United Technologies Corporation PAC		Date of Receipt M M / D D / Y Y Y Y 07 / 19 / 2006
Mailing Address 1401 I Street, NW Suite 600		Transaction ID: 60721.C24801
City Washington State DC Zip Code 20005	Amount of Each Receipt this Period 1500.00	
FEC ID number of contributing federal political committee. C C00035683		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation	Election Cycle-to-Date ▼ 3000.00	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) PAC for the American Society of Cataract		Date of Receipt M M / D D / Y Y Y Y 07 / 10 / 2006
Mailing Address & Refractive Surgery 4000 Legato Road		Transaction ID: 60712.C24712
City Fairfax State VA Zip Code 22033	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00171504		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation	Election Cycle-to-Date ▼ 2500.00	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) Cisco Systems E-PAC		Date of Receipt M M / D D / Y Y Y Y 07 / 03 / 2006
Mailing Address 20 Park Road Suite E		Transaction ID: 60707.C24687
City Burlingame State CA Zip Code 94010-4443	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C C00362707		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation	Election Cycle-to-Date ▼ 2000.00	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	6000.00
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 30 / 59
	<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)
Friends of Roy Blunt

A. Full Name (Last, First, Middle Initial)
Dominos Pizza LLC PAC

Mailing Address 30 Frank Loyd Wright Drive

City Ann Arbor State MI Zip Code 48106

FEC ID number of contributing federal political committee. **C** C00366088

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 03 / 2006

Transaction ID: 60707.C24686

Amount of Each Receipt this Period
2500.00

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

B. Full Name (Last, First, Middle Initial)
Road to Victory PAC

Mailing Address 1306 Bellview Blvd. Unit A2

City Alexandria State VA Zip Code 22307

FEC ID number of contributing federal political committee. **C** C00385377

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 10 / 2006

Transaction ID: 60720.C24780

Amount of Each Receipt this Period
2000.00

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

C. Full Name (Last, First, Middle Initial)
Road to Victory PAC

Mailing Address 1306 Bellview Blvd. Unit A2

City Alexandria State VA Zip Code 22307

FEC ID number of contributing federal political committee. **C** C00385377

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 7000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 10 / 2006

Transaction ID: 60720.C24779

Amount of Each Receipt this Period
3000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	7500.00
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 31 / 59
	<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)
Friends of Roy Blunt

A. Full Name (Last, First, Middle Initial)
Caremark Rx Inc. Employees PAC

Mailing Address 2211 Sanders Rd

City Northbrook State IL Zip Code 60062-6150

FEC ID number of contributing federal political committee. **C** C00384818

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 19 / 2006

Transaction ID: 60721.C24797

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Texas Instruments PAC

Mailing Address PO Box 742496

City Dallas State TX Zip Code 75374-2496

FEC ID number of contributing federal political committee. **C** C00007070

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 19 / 2006

Transaction ID: 60721.C24799

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Friends of Bob Livingston PAC

Mailing Address 228 S Washington St Ste 115

City Alexandria State VA Zip Code 22314-5404

FEC ID number of contributing federal political committee. **C** C00053751

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 19 / 2006

Transaction ID: 60721.C24800

Amount of Each Receipt this Period
1500.00

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

SUBTOTAL of Receipts This Page (optional)	▶	3500.00
TOTAL This Period (last page this line number only)	▶	7550.00

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 32 / 59
	<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) Friends of Roy Blunt

A. Full Name (Last, First, Middle Initial) Roy Blunt	
Mailing Address PO Box 50100	
City Springfield	State Zip Code MO 65805-
FEC ID number of contributing federal political committee. C	
Name of Employer US Federal Government	Occupation Congressman
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1167.75

Date of Receipt MM / DD / YYYY 07 / 14 / 2006
Transaction ID: 60715.C24765
Amount of Each Receipt this Period 18.23
Offsets to Operating Expenditure <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
NOTE: Mileage Reimbursement

SUBTOTAL of Receipts This Page (optional)	▶	18.23
TOTAL This Period (last page this line number only)	▶	18.23

**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)
Friends of Roy Blunt

A. Target Full Name (Last, First, Middle Initial) Mailing Address 1000 Nicollet Mall TPS 3275 City Minneapolis State MN Zip Code 55403- Purpose of Disbursement AIRFARE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60712.E10221 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 1 / 2 0 0 6 Amount of Each Disbursement this Period 1038.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 AIRFARE
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B. Verizon Full Name (Last, First, Middle Initial) Mailing Address PO Box 17577 City Baltimore State MD Zip Code 21297-0513 Purpose of Disbursement PHONE EXPENSE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60712.E10237 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 2 / 2 0 0 6 Amount of Each Disbursement this Period 49.07 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PHONE EXPENSE
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C. The UPS Store Full Name (Last, First, Middle Initial) Mailing Address 1926 S Glenstone City Springfield State MO Zip Code 65804- Purpose of Disbursement SHIPPNG CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60712.E10250 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 2 / 2 0 0 6 Amount of Each Disbursement this Period 7.87 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SHIPPNG CHARGES
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SUBTOTAL of Disbursements This Page (optional) ▶	1094.94
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)
Friends of Roy Blunt

Full Name (Last, First, Middle Initial) A. McKenna Long & Aldridge		Transaction ID: 60712.E10248 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 2 / 2 0 0 6
Mailing Address 303 Peachtree Street NE Suite 5300		Amount of Each Disbursement this Period 806.70
City Atlanta State GA Zip Code 30308-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement LEGAL SERVICES	Candidate Name	LEGAL SERVICES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Chesapeake Valley		Transaction ID: 60712.E10230 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 1 / 2 0 0 6
Mailing Address PO Box 10841		Amount of Each Disbursement this Period 41.66
City Springfield State MO Zip Code 65808-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement OFFICE WATER	Candidate Name	OFFICE WATER
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Empire Bank		Transaction ID: 60721.E10298 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 5 / 2 0 0 6
Mailing Address 1800 S. Glenstone Ave.		Amount of Each Disbursement this Period 5.00
City Springfield State MO Zip Code 65804-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement AM EXPRESS FEE	Candidate Name	AM EXPRESS FEE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	853.36
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)
Friends of Roy Blunt

Full Name (Last, First, Middle Initial) A. The Lukens Company		Transaction ID: 60712.E10224 Date of Disbursement
Mailing Address 2800 Shirlington Road 9th Floor		<input type="text" value="07"/> / <input type="text" value="11"/> / <input type="text" value="2006"/>
City Arlington	State VA	Zip Code 22206-3601
Purpose of Disbursement DIRECT MAIL EXPENSE	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="750.00"/>
Candidate Name	Category/ Type	<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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	DIRECT MAIL EXPENSE
State: District:		

Full Name (Last, First, Middle Initial) B. Addington Aviation		Transaction ID: 60712.E10251 Date of Disbursement
Mailing Address 1500 N. Big Run Road		<input type="text" value="07"/> / <input type="text" value="12"/> / <input type="text" value="2006"/>
City Ashland	State KY	Zip Code 41102-
Purpose of Disbursement AIRFARE	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="1684.80"/>
Candidate Name	Category/ Type	<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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	AIRFARE
State: District:		

Full Name (Last, First, Middle Initial) C. Visa		Transaction ID: 60712.E10239 Date of Disbursement
Mailing Address PO Box 77042		<input type="text" value="07"/> / <input type="text" value="12"/> / <input type="text" value="2006"/>
City Madison	State WI	Zip Code 53707-1042
Purpose of Disbursement CREDIT CARD: SEE BELOW	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="4467.40"/>
Candidate Name	Category/ Type	<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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	CREDIT CARD: SEE BELOW
State: District:		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="6902.20"/>
TOTAL 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)

<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)
Friends of Roy Blunt

Full Name (Last, First, Middle Initial) A. Bistro Bis		Transaction ID: 60718.E10264 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 6
Mailing Address 15 E Street, NW		Amount of Each Disbursement this Period 526.00
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 EVENT EXPENSE/FOOD & BEVERAGE		[MEMO ITEM] MEMO: EVENT EXPENSE/FOOD & BEVERAGE
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Hotel George		Transaction ID: 60718.E10260 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address 15 E Street, NW		Amount of Each Disbursement this Period 2638.35
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 ROOM RENTAL/CATERING		[MEMO ITEM] MEMO: ROOM RENTAL/CATERING
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Northwest Airlines		Transaction ID: 60718.E10261 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address 901 15th St NW		Amount of Each Disbursement this Period 1211.71
City Washington State DC Zip Code 20005-2301	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement AIRFARE		[MEMO ITEM] MEMO: AIRFARE
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 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)
Friends of Roy Blunt

Full Name (Last, First, Middle Initial) A. SCI Stamps.com		Transaction ID: 60718.E10259 Date of Disbursement 05 / 28 / 2006
Mailing Address 12959 Coral Tree Pl		Amount of Each Disbursement this Period 15.99
City Los Angeles State CA Zip Code 90066-7020	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement POSTAGE	Candidate Name	[MEMO ITEM] MEMO: POSTAGE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. SCI Stamps.com		Transaction ID: 60718.E10263 Date of Disbursement 06 / 07 / 2006
Mailing Address 12959 Coral Tree Pl		Amount of Each Disbursement this Period 15.99
City Los Angeles State CA Zip Code 90066-7020	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement POSTAGE	Candidate Name	[MEMO ITEM] MEMO: POSTAGE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Empire Bank		Transaction ID: 60721.E10299 Date of Disbursement 07 / 10 / 2006
Mailing Address 1800 S. Glenstone Ave.		Amount of Each Disbursement this Period 4.50
City Springfield State MO Zip Code 65804-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement AM EXPRESS FEE	Candidate Name	AM EXPRESS FEE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4.50
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)
Friends of Roy Blunt

Full Name (Last, First, Middle Initial) A. Dan Williams Office Complex, Inc.		Transaction ID: 60712.E10218 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 1 / 2 0 0 6
Mailing Address 209 Pennsylvania Ave. SE Suite 900		Amount of Each Disbursement this Period 1844.59 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Washington State DC Zip Code 20003-	Category/Type	
Purpose of Disbursement RENT/DSL/CABLE	Candidate Name	RENT/DSL/CABLE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Cingular Wireless		Transaction ID: 60712.E10226 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 1 / 2 0 0 6
Mailing Address PO Box 8229		Amount of Each Disbursement this Period 156.94 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Aurora State IL Zip Code 60572-8229	Category/Type	
Purpose of Disbursement PHONE EXPENSE	Candidate Name	PHONE EXPENSE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Moseleys Office Products		Transaction ID: 60712.E10231 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 1 / 2 0 0 6
Mailing Address 431 South Ave		Amount of Each Disbursement this Period 35.17 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Springfield State MO Zip Code 65806-2132	Category/Type	
Purpose of Disbursement OFFICE SUPPLIES	Candidate Name	OFFICE SUPPLIES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2036.70
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)
Friends of Roy Blunt

Full Name (Last, First, Middle Initial) A. McKenna Long & Aldridge		Transaction ID: 60712.E10249 Date of Disbursement 07 / 12 / 2006
Mailing Address 303 Peachtree Street NE Suite 5300		Amount of Each Disbursement this Period 883.30
City Atlanta State GA Zip Code 30308-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement LEGAL SERVICES	Category/Type	LEGAL SERVICES
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) B. McKenna Long & Aldridge		Transaction ID: 60712.E10253 Date of Disbursement 07 / 12 / 2006
Mailing Address 303 Peachtree Street NE Suite 5300		Amount of Each Disbursement this Period -883.30
City Atlanta State GA Zip Code 30308-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement VOIDED 4/26/06 DISB. & REISSUE	Category/Type	VOIDED 4/26/06 DISB. & REISSUE
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) C. digital print, ink		Transaction ID: 60712.E10236 Date of Disbursement 07 / 11 / 2006
Mailing Address 3464 S Campbell Ave		Amount of Each Disbursement this Period 239.85
City Springfield State MO Zip Code 65807-5102	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement PRINTING	Category/Type	PRINTING
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	239.85
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)
Friends of Roy Blunt

Full Name (Last, First, Middle Initial) A. Verizon		Transaction ID: 60712.E10229 Date of Disbursement MM / DD / YYYY 07 / 11 / 2006
Mailing Address PO Box 17577		Amount of Each Disbursement this Period 33.96
City Baltimore State MD Zip Code 21297-0513	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement PHONE EXPENSE	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PHONE EXPENSE

Full Name (Last, First, Middle Initial) B. United Parcel Service		Transaction ID: 60712.E10234 Date of Disbursement MM / DD / YYYY 07 / 11 / 2006
Mailing Address Lockbox 577		Amount of Each Disbursement this Period 109.02
City Carol Stream State IL Zip Code 60132-0577	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement SHIPPING CHARGES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SHIPPING CHARGES

Full Name (Last, First, Middle Initial) C. A1 NetWorks Plus		Transaction ID: 60712.E10247 Date of Disbursement MM / DD / YYYY 07 / 12 / 2006
Mailing Address 333 Park Central East Suite 428		Amount of Each Disbursement this Period 54.95
City Springfield State MO Zip Code 65806-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement COMPUTER SERVICES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	COMPUTER SERVICES

SUBTOTAL of Disbursements This Page (optional) ▶	197.93
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s)
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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)
Friends of Roy Blunt

A. Roy Blunt Full Name (Last, First, Middle Initial) Roy Blunt Mailing Address PO Box 50100 City Springfield State MO Zip Code 65805- Purpose of Disbursement REIMBURSEMENT: SEE BELOW Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60712.E10252 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 2 / 2 0 0 6 Amount of Each Disbursement this Period 77.18 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 REIMBURSEMENT: SEE BELOW
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B. Verizon Full Name (Last, First, Middle Initial) Verizon Mailing Address PO Box 17577 City Baltimore State MD Zip Code 21297-0513 Purpose of Disbursement PHONE EXPENSE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60720.E10296 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6 Amount of Each Disbursement this Period 55.76 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: PHONE EXPENSE
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C. Cingular Wireless Full Name (Last, First, Middle Initial) Cingular Wireless Mailing Address PO Box 8229 City Aurora State IL Zip Code 60572-8229 Purpose of Disbursement PHONE EXPENSE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60712.E10227 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 1 / 2 0 0 6 Amount of Each Disbursement this Period 75.84 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PHONE EXPENSE
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SUBTOTAL of Disbursements This Page (optional) ▶	153.02
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)
Friends of Roy Blunt

Full Name (Last, First, Middle Initial) A. Koch & Hoos, LLC		Transaction ID: 60712.E10217 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 1 / 2 0 0 6
Mailing Address 901 N Washington St Ste 102		Amount of Each Disbursement this Period 3475.79 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Alexandria State VA Zip Code 22314-1535	Category/Type ACCOUNTING CONSULTING	
Purpose of Disbursement ACCOUNTING CONSULTING	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	ACCOUNTING CONSULTING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Candidate Name	

Full Name (Last, First, Middle Initial) B. Interface Holding		Transaction ID: 60712.E10216 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 0 / 2 0 0 6
Mailing Address Venetian Government Relations 3900 Paradise Road		Amount of Each Disbursement this Period 5052.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Las Vegas State NV Zip Code 89109-	Category/Type AIRFARE	
Purpose of Disbursement AIRFARE	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	AIRFARE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Candidate Name	

Full Name (Last, First, Middle Initial) C. Dan Williams Office Complex, Inc.		Transaction ID: 60712.E10219 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 1 / 2 0 0 6
Mailing Address 209 Pennsylvania Ave. SE Suite 900		Amount of Each Disbursement this Period 164.03 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Washington State DC Zip Code 20003-	Category/Type PHONE EXPENSE	
Purpose of Disbursement PHONE EXPENSE	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PHONE EXPENSE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Candidate Name	

SUBTOTAL of Disbursements This Page (optional) ▶	8691.82
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)
Friends of Roy Blunt

Full Name (Last, First, Middle Initial) A. United Parcel Service		Transaction ID: 60712.E10233 Date of Disbursement 07 / 11 / 2006
Mailing Address Lockbox 577		Amount of Each Disbursement this Period 40.56
City Carol Stream	State Zip Code IL 60132-0577	
Purpose of Disbursement SHIPPING CHARGES		<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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SHIPPING CHARGES
State: District:		

Full Name (Last, First, Middle Initial) B. Monsanto Company		Transaction ID: 60712.E10220 Date of Disbursement 07 / 11 / 2006
Mailing Address 1300 I Street NW Suite 450 East		Amount of Each Disbursement this Period 1978.00
City Washington	State Zip Code DC 20005-	
Purpose of Disbursement AIRFARE		<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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	AIRFARE
State: District:		

Full Name (Last, First, Middle Initial) C. Visa		Transaction ID: 60712.E10243 Date of Disbursement 07 / 12 / 2006
Mailing Address PO Box 77042		Amount of Each Disbursement this Period 646.91
City Madison	State Zip Code WI 53707-1042	
Purpose of Disbursement CREDIT CARD: SEE BELOW		<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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	CREDIT CARD: SEE BELOW
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	2665.47
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)
Friends of Roy Blunt

Full Name (Last, First, Middle Initial) A. Dancing Deer Baking Co.		Transaction ID: 60718.E10286 Date of Disbursement 05 / 20 / 2006	
Mailing Address 77 Shirley St		Amount of Each Disbursement this Period 55.45	
City Boston State MA Zip Code 02119-3035	Purpose of Disbursement FOOD	<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 State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: FOOD	

Full Name (Last, First, Middle Initial) B. Dancing Deer Baking Co.		Transaction ID: 60718.E10287 Date of Disbursement 06 / 10 / 2006	
Mailing Address 77 Shirley St		Amount of Each Disbursement this Period 37.90	
City Boston State MA Zip Code 02119-3035	Purpose of Disbursement FOOD	<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 State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: FOOD	

Full Name (Last, First, Middle Initial) C. Hunan Dynasty Restaurant		Transaction ID: 60718.E10288 Date of Disbursement 06 / 15 / 2006	
Mailing Address 215 Pennsylvania Ave. SE		Amount of Each Disbursement this Period 46.00	
City Washington State DC Zip Code 20003-	Purpose of Disbursement FOOD & BEVERAGE	<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 State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: FOOD & BEVERAGE	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)

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<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)
Friends of Roy Blunt

A. Staples Full Name (Last, First, Middle Initial) Staples Mailing Address 500 Staples Dr City Framingham State MA Zip Code 01702-4478 Purpose of Disbursement OFFICE SUPPLIES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60718.E10283 Date of Disbursement 05 / 17 / 2006 Amount of Each Disbursement this Period 256.65 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: OFFICE SUPPLIES
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B. Staples Full Name (Last, First, Middle Initial) Staples Mailing Address 500 Staples Dr City Framingham State MA Zip Code 01702-4478 Purpose of Disbursement OFFICE SUPPLIES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60718.E10284 Date of Disbursement 05 / 18 / 2006 Amount of Each Disbursement this Period 200.91 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: OFFICE SUPPLIES
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C. BNSF Full Name (Last, First, Middle Initial) BNSF Mailing Address 700 13th Street, NW Suite 220 City Washington State DC Zip Code 20005- Purpose of Disbursement AIRFARE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60712.E10215 Date of Disbursement 07 / 10 / 2006 Amount of Each Disbursement this Period 2106.40 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 AIRFARE
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SUBTOTAL of Disbursements This Page (optional) ▶	2106.40
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)
Friends of Roy Blunt

Full Name (Last, First, Middle Initial) A. United Parcel Service		Transaction ID: 60712.E10244 Date of Disbursement 07 / 12 / 2006	
Mailing Address Lockbox 577		Amount of Each Disbursement this Period 61.26	
City Carol Stream State IL Zip Code 60132-0577	Purpose of Disbursement SHIPPING CHARGES	<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 State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SHIPPING CHARGES	

Full Name (Last, First, Middle Initial) B. Visa		Transaction ID: 60712.E10241 Date of Disbursement 07 / 12 / 2006	
Mailing Address PO Box 77042		Amount of Each Disbursement this Period 696.94	
City Madison State WI Zip Code 53707-1042	Purpose of Disbursement CREDIT CARD: SEE BELOW	<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 State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	CREDIT CARD: SEE BELOW	

Full Name (Last, First, Middle Initial) C. Cingular Wireless		Transaction ID: 60718.E10270 Date of Disbursement 06 / 14 / 2006	
Mailing Address PO Box 8229		Amount of Each Disbursement this Period 303.99	
City Aurora State IL Zip Code 60572-8229	Purpose of Disbursement PHONE EXPENSE	<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 State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: PHONE EXPENSE	

SUBTOTAL of Disbursements This Page (optional) ▶	758.20
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)
Friends of Roy Blunt

Full Name (Last, First, Middle Initial) A. Touch of Class		Transaction ID: 60718.E10269 Date of Disbursement 06 / 06 / 2006
Mailing Address 709 W 12th St		Amount of Each Disbursement this Period 288.00
City Huntingburg	State IN	
Zip Code 47542-		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement OFFICE SUPPLIES		
Candidate Name		<input type="checkbox"/> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	[MEMO ITEM] MEMO: OFFICE SUPPLIES	

Full Name (Last, First, Middle Initial) B. Visa		Transaction ID: 60712.E10240 Date of Disbursement 07 / 12 / 2006
Mailing Address PO Box 77042		Amount of Each Disbursement this Period 112.73
City Madison	State WI	
Zip Code 53707-1042		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement CREDIT CARD: SEE BELOW		
Candidate Name		<input type="checkbox"/> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	CREDIT CARD: SEE BELOW	

Full Name (Last, First, Middle Initial) C. Exxonmobil		Transaction ID: 60718.E10265 Date of Disbursement 05 / 26 / 2006
Mailing Address 4th & Pennsylvania		Amount of Each Disbursement this Period 55.29
City Washington	State DC	
Zip Code 20003-		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement TRAVEL EXPENSE/FUEL		
Candidate Name		<input type="checkbox"/> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	[MEMO ITEM] MEMO: TRAVEL EXPENSE/FUEL	

SUBTOTAL of Disbursements This Page (optional) ▶	112.73
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)
Friends of Roy Blunt

A. Empire Bank Full Name (Last, First, Middle Initial) Mailing Address 1800 S. Glenstone Ave. City Springfield State MO Zip Code 65804- Purpose of Disbursement BPS CONCORD FEE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60721.E10300 Date of Disbursement: M M / D D / Y Y Y Y 0 7 / 1 9 / 2 0 0 6 Amount of Each Disbursement this Period 167.83 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 BPS CONCORD FEE
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B. Addington Aviation Full Name (Last, First, Middle Initial) Mailing Address 1500 N. Big Run Road City Ashland State KY Zip Code 41102- Purpose of Disbursement AIRFARE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60712.E10245 Date of Disbursement: M M / D D / Y Y Y Y 0 7 / 1 2 / 2 0 0 6 Amount of Each Disbursement this Period 737.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 AIRFARE
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C. A1 NetWorks Plus Full Name (Last, First, Middle Initial) Mailing Address 333 Park Central East Suite 428 City Springfield State MO Zip Code 65806- Purpose of Disbursement COMPUTER SERVICES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60712.E10246 Date of Disbursement: M M / D D / Y Y Y Y 0 7 / 1 2 / 2 0 0 6 Amount of Each Disbursement this Period 296.35 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 COMPUTER SERVICES
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SUBTOTAL of Disbursements This Page (optional) ▶	1201.18
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)
Friends of Roy Blunt

Full Name (Last, First, Middle Initial) A. Homestead Pickers		Transaction ID: 60707.E10213 Date of Disbursement MM / DD / YYYY 07 / 07 / 2006
Mailing Address 565 Max Creek Road		Amount of Each Disbursement this Period 1000.00
City Taneyville State MO Zip Code 65759-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement EVENT EXPENSE/ENTERTAINMENT		EVENT EXPENSE/ENTERTAINMENT
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Foley & Lardner LLP		Transaction ID: 60712.E10222 Date of Disbursement MM / DD / YYYY 07 / 11 / 2006
Mailing Address 3000 K Street, N.W. Suite 500		Amount of Each Disbursement this Period 783.00
City Washington State DC Zip Code 20007-5101	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement LEGAL SERVICES		LEGAL SERVICES
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. The Lukens Company		Transaction ID: 60712.E10223 Date of Disbursement MM / DD / YYYY 07 / 11 / 2006
Mailing Address 2800 Shirlington Road 9th Floor		Amount of Each Disbursement this Period 7111.57
City Arlington State VA Zip Code 22206-3601	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement DIRECT MAIL EXPENSE		DIRECT MAIL EXPENSE
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	8894.57
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)
Friends of Roy Blunt

Full Name (Last, First, Middle Initial) A. AT&T		Transaction ID: 60712.E10235 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 1 / 2 0 0 6
Mailing Address P.O. Box 650661		Amount of Each Disbursement this Period 301.76
City Dallas State TX Zip Code 75265-0661	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement PHONE EXPENSE	Candidate Name	PHONE EXPENSE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. United Parcel Service		Transaction ID: 60712.E10232 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 1 / 2 0 0 6
Mailing Address Lockbox 577		Amount of Each Disbursement this Period 145.44
City Carol Stream State IL Zip Code 60132-0577	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement SHIPPING CHARGES	Candidate Name	SHIPPING CHARGES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Visa		Transaction ID: 60712.E10242 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 2 / 2 0 0 6
Mailing Address PO Box 77042		Amount of Each Disbursement this Period 2224.19
City Madison State WI Zip Code 53707-1042	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CREDIT CARD: SEE BELOW	Candidate Name	CREDIT CARD: SEE BELOW
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2671.39
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)
Friends of Roy Blunt

A. Best Storage Full Name (Last, First, Middle Initial) Mailing Address BC & Sons LLC 1950 S. Bedford Avenue City Springfield State MO Zip Code 65809- Purpose of Disbursement CAMPAIGN STORAGE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60718.E10281 Date of Disbursement: M M / D D / Y Y Y Y 0 6 / 1 0 / 2 0 0 6 Amount of Each Disbursement this Period 20.66 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: CAMPAIGN STORAGE
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B. Cingular Wireless Full Name (Last, First, Middle Initial) Mailing Address PO Box 8229 City Aurora State IL Zip Code 60572-8229 Purpose of Disbursement PHONE EXPENSE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60718.E10275 Date of Disbursement: M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 6 Amount of Each Disbursement this Period 453.04 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: PHONE EXPENSE
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C. Dillons Full Name (Last, First, Middle Initial) Mailing Address 2483 E Sunshine St City Springfield State MO Zip Code 65804-1822 Purpose of Disbursement FOOD FOR VOLUNTEERS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 60718.E10282 Date of Disbursement: M M / D D / Y Y Y Y 0 6 / 1 9 / 2 0 0 6 Amount of Each Disbursement this Period 11.47 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: FOOD FOR VOLUNTEERS
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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 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

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)
Friends of Roy Blunt

Full Name (Last, First, Middle Initial) A. Hammers Auto Works		Transaction ID: 60718.E10274 Date of Disbursement 06 / 07 / 2006
Mailing Address 2921 W Chestnut Expy		Amount of Each Disbursement this Period 1397.23
City Springfield State MO Zip Code 65802-4668	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement VEHICLE MAINTENANCE	Candidate Name	[MEMO ITEM] MEMO: VEHICLE MAINTENANCE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Hobby-Lobby		Transaction ID: 60718.E10272 Date of Disbursement 05 / 30 / 2006
Mailing Address 1717 W Kearney		Amount of Each Disbursement this Period 124.78
City Springfield State MO Zip Code 65803-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CAMPAIGN SUPPLIES	Candidate Name	[MEMO ITEM] MEMO: CAMPAIGN SUPPLIES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Staples		Transaction ID: 60718.E10276 Date of Disbursement 06 / 08 / 2006
Mailing Address 2135 E. Independence		Amount of Each Disbursement this Period 106.58
City Springfield State MO Zip Code 65804-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement OFFICE SUPPLIES	Candidate Name	[MEMO ITEM] MEMO: OFFICE SUPPLIES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)

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<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)
Friends of Roy Blunt

A. Full Name (Last, First, Middle Initial)
The Joplin Globe

Mailing Address 117 E 4th St

City Joplin State MO Zip Code 64801-2302

Purpose of Disbursement
SUBSCRIPTION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 60718.E10273

Date of Disbursement

^M	^M	/	^D	^D	/	^Y	^Y	^Y	^Y
0	6		0	6		2	0	0	6

Amount of Each Disbursement this Period

19.38

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

[MEMO ITEM]

MEMO: SUBSCRIPTION

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

38584.26

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 54 / 59

<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)
Friends of Roy Blunt

Full Name (Last, First, Middle Initial) A. Blasdel for Congress		Transaction ID: 60718.E10289 Date of Disbursement 07 / 06 / 2006
Mailing Address PO Box 479		Amount of Each Disbursement this Period 567.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO:In-Kind: Airfare
City Lisbon State OH Zip Code 44432-0479		
Purpose of Disbursement IN-KIND: AIRFARE Candidate Name CHUCK BLASDEL	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 06 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Chris Wakim for Congress		Transaction ID: 60718.E10291 Date of Disbursement 07 / 05 / 2006
Mailing Address PO Box 2176		Amount of Each Disbursement this Period 535.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO:In-Kind: Airfare
City Wheeling State WV Zip Code 26003-0263		
Purpose of Disbursement IN-KIND: AIRFARE Candidate Name CHRIS WAKIM	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 01 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Geoff Davis for Congress		Transaction ID: 60718.E10290 Date of Disbursement 07 / 06 / 2006
Mailing Address 3161 Dixie Hwy Suite F		Amount of Each Disbursement this Period 674.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO:In-Kind: Airfare
City Erlanger State KY Zip Code 41018-		
Purpose of Disbursement IN-KIND: AIRFARE Candidate Name GEOFFREY C DAVIS	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 04 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)

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<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)
Friends of Roy Blunt

Full Name (Last, First, Middle Initial) A. Jim Jordan For Congress		Transaction ID: 60718.E10292 Date of Disbursement 07 / 06 / 2006
Mailing Address 1709 S State Route 560		Amount of Each Disbursement this Period 842.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Urbana State OH Zip Code 43078-9637	Purpose of Disbursement IN-KIND: AIRFARE/LODGING Candidate Name JAMES D JORDAN Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 04 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type		[MEMO ITEM] MEMO:In-Kind: Airfare/Lodging

Full Name (Last, First, Middle Initial) B. Keller for Congress		Transaction ID: 60718.E10293 Date of Disbursement 07 / 05 / 2006
Mailing Address PO Box 1453		Amount of Each Disbursement this Period 856.69 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Orlando State FL Zip Code 32802-1453	Purpose of Disbursement IN-KIND: AIRFARE/LODGING Candidate Name RICHARD ANTHONY KELLER Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type		[MEMO ITEM] MEMO:In-Kind: Airfare/Lodging

Full Name (Last, First, Middle Initial) C. NRCC		Transaction ID: 60707.E10208 Date of Disbursement 07 / 01 / 2006
Mailing Address 320 1st St SE		Amount of Each Disbursement this Period 500000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Washington State DC Zip Code 20003-1838	Purpose of Disbursement TRANSFER OF FUNDS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 Annual	
Category/Type		

SUBTOTAL of Disbursements This Page (optional)	500000.00
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)

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<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)
Friends of Roy Blunt

Full Name (Last, First, Middle Initial) A. NRCC		Transaction ID: 60720.E10297 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 8 / 2 0 0 6	
Mailing Address 320 1st St SE		Amount of Each Disbursement this Period 43000.00	
City Washington State DC Zip Code 20003-1838	Purpose of Disbursement TRANSFER OF FUNDS	<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 State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 Annual	Category/ Type	

SUBTOTAL of Disbursements This Page (optional)	43000.00
TOTAL This Period (last page this line number only)	543000.00

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Friends of Roy Blunt

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Downtown Springfield Properties	Nature of Debt (Purpose): Rent/Parking
Mailing Address PO Box 50306 Suite 818	
City State ZIP Code Springfield MO 65805-	

Outstanding Balance Beginning This Period 0.00	Transaction ID: LS60725.E10301	
Amount Incurred This Period 846.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 846.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor American Viewpoint, Inc.	Nature of Debt (Purpose): Campaign Survey
Mailing Address 300 N. Lee St. Suite 400	
City State ZIP Code Alexandria VA 22302-	

Outstanding Balance Beginning This Period 0.00	Transaction ID: LS60725.E10308	
Amount Incurred This Period 14000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 14000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Lukens Company	Nature of Debt (Purpose): Direct Mail expense
Mailing Address 2800 Shirlington Road 9th Floor	
City State ZIP Code Arlington VA 22206-3601	

Outstanding Balance Beginning This Period 7111.57	Transaction ID: LS60712.E10223	
Amount Incurred This Period 0.00	Payment This Period 7111.57	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional).....	▶	14846.00
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 58 / 59
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
 Friends of Roy Blunt

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Lukens Company	Nature of Debt (Purpose): Direct Mail Expense
Mailing Address 2800 Shirlington Road 9th Floor	
City State ZIP Code Arlington VA 22206-3601	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID: LS60725.E10309	
Amount Incurred This Period <input type="text" value="750.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="750.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Oasis Inn & Convention Center	Nature of Debt (Purpose): Event Expense/Food & Beverage
Mailing Address 2610 N. Glenstone	
City State ZIP Code Springfield MO 65803-	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID: LS60725.E10310	
Amount Incurred This Period <input type="text" value="6406.37"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="6406.37"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor McKenna Long & Aldridge	Nature of Debt (Purpose): Legal services
Mailing Address 303 Peachtree Street NE Suite 5300	
City State ZIP Code Atlanta GA 30308-	

Outstanding Balance Beginning This Period <input type="text" value="806.70"/>	Transaction ID: LS60712.E10248	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="806.70"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="7156.37"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
 Friends of Roy Blunt

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Koch & Hoos, LLC	Nature of Debt (Purpose): Accounting Consulting
Mailing Address 901 N Washington St Ste 102	
City State ZIP Code Alexandria VA 22314-1535	

Outstanding Balance Beginning This Period 3475.79	Transaction ID: LS60712.E10217	
Amount Incurred This Period 0.00	Payment This Period 3475.79	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Foley & Lardner LLP	Nature of Debt (Purpose): Legal services
Mailing Address 3000 K Street, N.W. Suite 500	
City State ZIP Code Washington DC 20007-5101	

Outstanding Balance Beginning This Period 783.00	Transaction ID: LS60712.E10222	
Amount Incurred This Period 0.00	Payment This Period 783.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ford Credit	Nature of Debt (Purpose): Campaign Vehicle
Mailing Address P.O. Box 152271	
City State ZIP Code Irving TX 75015-2271	

Outstanding Balance Beginning This Period 0.00	Transaction ID: LS60725.E10302	
Amount Incurred This Period 1557.60	Payment This Period 0.00	Outstanding Balance at Close of This Period 1557.60

1) SUBTOTALS This Period This Page (optional).....	1557.60
2) TOTALS This Period (last page this line number only).....	23559.97
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	