

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines AQUILA INC. EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE (FORMERLY UTILICORP UNI-TED)

ADDRESS (number and street) 20 W 9th St Check if different than previously reported. (ACC) Kansas City MO 64105

2. FEC IDENTIFICATION NUMBER C00211615 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 12 01 2007 through 12 31 2007

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 Renee Parsons

Signature of Treasurer Electronically Filed by Renee Parsons Date 07 08 2008

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

Office Use Only FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

AQUILA INC. EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE (FORMERLY UTILICORP UN-
TED)

Report Covering the Period: From:

M	M
1	2

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		67009.14
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	22086.06									
(c) Total Receipts (from Line 19)	0.00	29897.92								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	22086.06	96907.06								
7. Total Disbursements (from Line 31)	14400.00	89221.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	7686.06	7686.06								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

**AQUILA INC. EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE (FORMERLY UTILICORP UN-
TED)**

Report Covering the Period: From:

M	M
1	2

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	0.00	11950.00
(i) Itemized (use Schedule A)	0.00	17947.92
(ii) Unitemized	0.00	29897.92
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5)	0.00	29897.92
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	0.00	29897.92
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	0.00	29897.92

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	2000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	50.00	50.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	50.00	50.00
29. Other Disbursements.....	14350.00	87171.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	14400.00	89221.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	14400.00	89221.00

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	0.00	29897.92
34. Total Contribution Refunds (from Line 28(d))	50.00	50.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	-50.00	29847.92
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 6 / 24

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

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NAME OF COMMITTEE (In Full)

AQUILA INC. EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE (FORMERLY UTILICORP UNITED)

A.

Full Name (Last, First, Middle Initial)

Roy Olson

Transaction ID: SB28C.7600

Date of Disbursement

Mailing Address 19050 W 161st Street

^M 1	^M 2	/	^D 3	^D 1	/	^Y 2	^Y 0	^Y 7	^Y 7
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City	State	Zip Code
Olathe	KS	66062

Amount of Each Disbursement this Period

50.00

Purpose of Disbursement

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

50.00

TOTAL This Period (last page this line number only)

50.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

AQUILA INC. EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE (FORMERLY UTILICORP UNI-
TED)

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Amanda Ragan for Iowa Senate</p> <p>Mailing Address 20 Granite Court SE</p> <p>City Mason City, State IA Zip Code 50401</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>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) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB29.7539</p> <p>Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>0</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">200.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	0	3	/	2	0	0	7	200.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	2	/	0	3	/	2	0	0	7													
200.00																						
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Bailey for State House</p> <p>Mailing Address PO Box 64</p> <p>City Webster City, State IA Zip Code 50595</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>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) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB29.7498</p> <p>Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>0</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">200.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	0	3	/	2	0	0	7	200.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	2	/	0	3	/	2	0	0	7													
200.00																						
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Behn for Senate</p> <p>Mailing Address 1313 Quill Avenue</p> <p>City Boone, State IA Zip Code 50036</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>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) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB29.7560</p> <p>Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>0</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">300.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	0	3	/	2	0	0	7	300.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	2	/	0	3	/	2	0	0	7													
300.00																						

SUBTOTAL of Disbursements This Page (optional) ►

700.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)

AQUILA INC. EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE (FORMERLY UTILICORP UNITE D)

A.	Full Name (Last, First, Middle Initial) Brian Quirk for State Rep <hr/> Mailing Address 1011 Sunset <hr/> City New Hampton State IA Zip Code 50659 <hr/> Purpose of Disbursement <input type="checkbox"/> <hr/> Candidate Name <input type="checkbox"/> <hr/> 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: SB29.7578 Date of Disbursement 12 / 03 / 2007 <hr/> Amount of Each Disbursement this Period 200.00
B.	Full Name (Last, First, Middle Initial) Dorothy Butcher <hr/> Mailing Address 101 Encino Drive <hr/> City Pueblo State CO Zip Code 81005 <hr/> Purpose of Disbursement <input type="checkbox"/> <hr/> Candidate Name <input type="checkbox"/> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.7491 Date of Disbursement 12 / 20 / 2007 <hr/> Amount of Each Disbursement this Period 200.00
C.	Full Name (Last, First, Middle Initial) Citizens for Anderson <hr/> Mailing Address PO Box 157 <hr/> City Clarinda State IA Zip Code 51632 <hr/> Purpose of Disbursement <input type="checkbox"/> <hr/> Candidate Name <input type="checkbox"/> <hr/> 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: SB29.7496 Date of Disbursement 12 / 03 / 2007 <hr/> Amount of Each Disbursement this Period 200.00

SUBTOTAL of Disbursements This Page (optional) ▶

600.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AQUILA INC. EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE (FORMERLY UTILICORP UNITE-
TED)

A. Full Name (Last, First, Middle Initial) Citizens for Gronstal	Transaction ID: SB29.7525 Date of Disbursement																				
Mailing Address 220 Bennett Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	3		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	3		2	0	0	7												
City Council Bluffs State IA Zip Code 51503	Amount of Each Disbursement this Period																				
Purpose of Disbursement	<table border="1"> <tr> <td>700.00</td> </tr> </table>	700.00																			
700.00																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:																					
B. Full Name (Last, First, Middle Initial) Citizens for Rob Hogg	Transaction ID: SB29.7558 Date of Disbursement																				
Mailing Address 2750 Otis Road SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	3		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	3		2	0	0	7												
City Cedar Rapids State IA Zip Code 52403	Amount of Each Disbursement this Period																				
Purpose of Disbursement	<table border="1"> <tr> <td>200.00</td> </tr> </table>	200.00																			
200.00																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:																					
C. Full Name (Last, First, Middle Initial) Citizens for Schoenjahn	Transaction ID: SB29.7543 Date of Disbursement																				
Mailing Address 221 Park Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	3		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	3		2	0	0	7												
City Arlington State IA Zip Code 50606-0132	Amount of Each Disbursement this Period																				
Purpose of Disbursement	<table border="1"> <tr> <td>300.00</td> </tr> </table>	300.00																			
300.00																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:																					

SUBTOTAL of Disbursements This Page (optional) ▶	<table border="1"> <tr> <td>1200.00</td> </tr> </table>	1200.00
1200.00		
TOTAL This Period (last page this line number only) ▶	<table border="1"> <tr> <td></td> </tr> </table>	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 10 / 24

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

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NAME OF COMMITTEE (In Full)

AQUILA INC. EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE (FORMERLY UTILICORP UNI-
TED)

A. Full Name (Last, First, Middle Initial) citizens for Schueller <hr/> Mailing Address 503 W Platt St <hr/> City Maquoketa State IA Zip Code 52060 <hr/> Purpose of Disbursement <hr/> Candidate Name <hr/> 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: SB29.7583 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 3 / 2 0 0 7
	Amount of Each Disbursement this Period 200.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Citizens for Stewart <hr/> Mailing Address 3936 317th Ave <hr/> City Preston State IA Zip Code 52069 <hr/> Purpose of Disbursement <hr/> Candidate Name <hr/> 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: SB29.7549 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 3 / 2 0 0 7
	Amount of Each Disbursement this Period 400.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Citizens for Struyk <hr/> Mailing Address 219 Carson Ave <hr/> City Council Bluffs State IA Zip Code 51503 <hr/> Purpose of Disbursement <hr/> Candidate Name <hr/> 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: SB29.7592 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 3 / 2 0 0 7
	Amount of Each Disbursement this Period 200.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

800.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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)

AQUILA INC. EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE (FORMERLY UTILICORP UNI-
TED)

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Citizens to elect Andrew Wenthe</p> <p>Mailing Address 101 East Main St.</p> <p>City State Zip Code Hawkeye IA 52147</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.7588</p> <p>Date of Disbursement 12 / 03 / 2007</p> <p>Amount of Each Disbursement this Period 200.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Committee to Elect Greg Forristall</p> <p>Mailing Address 11917 370th st</p> <p>City State Zip Code Macedonia IA 51549</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.7505</p> <p>Date of Disbursement 12 / 03 / 2007</p> <p>Amount of Each Disbursement this Period 150.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Committee to Elect Steve Lukan</p> <p>Mailing Address 7365 Columbus Street</p> <p>City State Zip Code New Vienna IA 52065</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.7515</p> <p>Date of Disbursement 12 / 03 / 2007</p> <p>Amount of Each Disbursement this Period 200.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

550.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
AQUILA INC. EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE (FORMERLY UTILICORP UNITE D)

A.	Full Name (Last, First, Middle Initial) Deyoe for House	Transaction ID: SB29.7501 Date of Disbursement
	Mailing Address 911 Shagbark Dr	<input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/>
	City Nevada State IA Zip Code 50201	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="200.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Frevert for the House	Transaction ID: SB29.7507 Date of Disbursement
	Mailing Address P.O. Box 324	<input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/>
	City Emmetsburg State IA Zip Code 50536	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="200.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Hancock for Senate	Transaction ID: SB29.7562 Date of Disbursement
	Mailing Address 310 E. Main Street	<input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/>
	City Epworth State IA Zip Code 52045	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="300.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="700.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 13 / 24

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

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NAME OF COMMITTEE (In Full)
AQUILA INC. EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE (FORMERLY UTILICORP UNI-
TED)

A.	Full Name (Last, First, Middle Initial) Heckroth for Senate	Transaction ID: SB29.7556 Date of Disbursement 12 / 03 / 2007
	Mailing Address 415 West Bremer Avenue	Amount of Each Disbursement this Period 200.00
City Waverly State IA Zip Code 50677	Purpose of Disbursement Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		State: District:

B.	Full Name (Last, First, Middle Initial) Horbach for House of Rep.	Transaction ID: SB29.7509 Date of Disbursement 12 / 03 / 2007
	Mailing Address 1014 Oakland Drive	Amount of Each Disbursement this Period 200.00
City Tama State IA Zip Code 52339	Purpose of Disbursement Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		State: District:

C.	Full Name (Last, First, Middle Initial) Iowans for Van Fossen	Transaction ID: SB29.7595 Date of Disbursement 12 / 03 / 2007
	Mailing Address 2802 Middle Rd	Amount of Each Disbursement this Period 200.00
City Davenport State IA Zip Code 52803	Purpose of Disbursement Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		State: District:

SUBTOTAL of Disbursements This Page (optional)	▶	600.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

AQUILA INC. EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE (FORMERLY UTILICORP UNITE-D)

A.	Full Name (Last, First, Middle Initial) Jack Drake for State Rep <hr/> Mailing Address 52462 Juniper RD <hr/> City State Zip Code lewis IA 51544 <hr/> Purpose of Disbursement <input type="text"/> <hr/> Candidate Name <input type="text"/> Category/Type <hr/> 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:	Transaction ID: SB29.7503 Date of Disbursement 12 / 03 / 2007 <hr/> Amount of Each Disbursement this Period 200.00
B.	Full Name (Last, First, Middle Initial) Jacoby for House <hr/> Mailing Address 2308 Northridge Drive <hr/> City State Zip Code Coralville IA 52241 <hr/> Purpose of Disbursement <input type="text"/> <hr/> Candidate Name <input type="text"/> Category/Type <hr/> 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:	Transaction ID: SB29.7511 Date of Disbursement 12 / 03 / 2007 <hr/> Amount of Each Disbursement this Period 200.00
C.	Full Name (Last, First, Middle Initial) Jeff Kaufmann for State Rep. <hr/> Mailing Address 2125 Old Muscatine Road <hr/> City State Zip Code Wilton IA 52778 <hr/> Purpose of Disbursement <input type="text"/> <hr/> Candidate Name <input type="text"/> Category/Type <hr/> 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:	Transaction ID: SB29.7513 Date of Disbursement 12 / 03 / 2007 <hr/> Amount of Each Disbursement this Period 200.00

SUBTOTAL of Disbursements This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶	<input type="text"/>

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

AQUILA INC. EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE (FORMERLY UTILICORP UNI-
TED)

A.	Full Name (Last, First, Middle Initial) Johnson for Senate District 3 Mailing Address P.O. Box 279 City Ocheyedan State IA Zip Code 51354 Purpose of Disbursement 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: SB29.7530 Date of Disbursement 12 / 03 / 2007 Amount of Each Disbursement this Period 300.00
B.	Full Name (Last, First, Middle Initial) Julia Lynn for Senate Mailing Address 18837 W 115th Terr City Olathe State KS Zip Code 66061 Purpose of Disbursement 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: SB29.7494 Date of Disbursement 12 / 27 / 2007 Amount of Each Disbursement this Period 300.00
C.	Full Name (Last, First, Middle Initial) Kettering Campaign Mailing Address 275 Crescent Park Drive City Lake View State IA Zip Code 51450-0428 Purpose of Disbursement 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: SB29.7532 Date of Disbursement 12 / 03 / 2007 Amount of Each Disbursement this Period 300.00

SUBTOTAL of Disbursements This Page (optional) ▶

900.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

AQUILA INC. EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE (FORMERLY UTILICORP UNI-
TED)

A. Full Name (Last, First, Middle Initial) Kibble for Senate <hr/> Mailing Address P.O. Box 190 <hr/> City Emmetsburg State IA Zip Code 50536 <hr/> Purpose of Disbursement <input type="text"/> Candidate Name <input type="text"/> Category/Type <input type="text"/> <hr/> 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:	Transaction ID: SB29.7534 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 3 / 2 0 0 7	
	Amount of Each Disbursement this Period <input type="text"/> 500.00	
	Full Name (Last, First, Middle Initial) Mark Ziemann for Senate Committee <hr/> Mailing Address 284 Luana Road <hr/> City Postville State IA Zip Code 52162 <hr/> Purpose of Disbursement <input type="text"/> Candidate Name <input type="text"/> Category/Type <input type="text"/> <hr/> 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:	Transaction ID: SB29.7554 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 3 / 2 0 0 7
	Amount of Each Disbursement this Period <input type="text"/> 300.00	
C. Full Name (Last, First, Middle Initial) May for Iowa House <hr/> Mailing Address 17024 255th Avenue <hr/> City Spirit Lake State IA Zip Code 51360 <hr/> Purpose of Disbursement <input type="text"/> Candidate Name <input type="text"/> Category/Type <input type="text"/> <hr/> 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:	Transaction ID: SB29.7517 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 3 / 2 0 0 7	
	Amount of Each Disbursement this Period <input type="text"/> 200.00	

SUBTOTAL of Disbursements This Page (optional) ▶

1000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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PAGE 17 / 24

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

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NAME OF COMMITTEE (In Full)

AQUILA INC. EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE (FORMERLY UTILICORP UNITE D)

A.	Full Name (Last, First, Middle Initial) McCarthy for state rep		Transaction ID: SB29.7487																					
	Mailing Address 5220 SE 31st Ct		Date of Disbursement <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td>/</td><td>1</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	9	/	2	0	0	7
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	2	/	1	9	/	2	0	0	7														
City Des Moines	State IA	Zip Code 50320	Amount of Each Disbursement this Period <table border="1"><tr><td>2</td><td>0</td><td>0</td><td>0</td></tr></table>		2	0	0	0																
2	0	0	0																					
Purpose of Disbursement		Category/ Type																						
Candidate Name McCarthy for state rep																								
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:																								
B.	Full Name (Last, First, Middle Initial) McKibben for Senate Committee		Transaction ID: SB29.7536																					
	Mailing Address P.O. Box 618		Date of Disbursement <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td>/</td><td>0</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	0	3	/	2	0	0	7
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	2	/	0	3	/	2	0	0	7														
City Marshalltown	State IA	Zip Code 50158	Amount of Each Disbursement this Period <table border="1"><tr><td>3</td><td>0</td><td>0</td><td>0</td></tr></table>		3	0	0	0																
3	0	0	0																					
Purpose of Disbursement		Category/ Type																						
Candidate Name																								
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																							
State: District:																								
C.	Full Name (Last, First, Middle Initial) Murphy for State Rep.		Transaction ID: SB29.7519																					
	Mailing Address 155 North Grandview Avenue		Date of Disbursement <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td>/</td><td>0</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	0	3	/	2	0	0	7
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	2	/	0	3	/	2	0	0	7														
City Dubuque	State IA	Zip Code 52201-6325	Amount of Each Disbursement this Period <table border="1"><tr><td>6</td><td>0</td><td>0</td><td>0</td></tr></table>		6	0	0	0																
6	0	0	0																					
Purpose of Disbursement		Category/ Type																						
Candidate Name																								
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																							
State: District:																								

SUBTOTAL of Disbursements This Page (optional) ▶

1100.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

AQUILA INC. EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE (FORMERLY UTILICORP UNI-
TED)

A.	Full Name (Last, First, Middle Initial) Olive the Supporters of Rich for Senate	Transaction ID: SB29.7538 Date of Disbursement 12 / 03 / 2007
	Mailing Address 1264 Northridge Road	Amount of Each Disbursement this Period 300.00
	City Story City State IA Zip Code 50248	
	Purpose of Disbursement	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Olson for State Rep. Committee	Transaction ID: SB29.7521 Date of Disbursement 12 / 03 / 2007
	Mailing Address 2103 Greene Street	Amount of Each Disbursement this Period 200.00
	City Boone State IA Zip Code 50036	
	Purpose of Disbursement	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Paul Belll for State Rep	Transaction ID: SB29.7499 Date of Disbursement 12 / 03 / 2007
	Mailing Address 611 E 17th St. N	Amount of Each Disbursement this Period 200.00
	City Newton State IA Zip Code 50208	
	Purpose of Disbursement	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

700.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)

AQUILA INC. EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE (FORMERLY UTILICORP UNITE D)

<p>A. Full Name (Last, First, Middle Initial) Paulson for State House Committee</p> <p>Mailing Address PO BOX 250</p> <p>City Hiawatha State IA Zip Code 52233</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>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) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB29.7572</p> <p>Date of Disbursement <input type="text"/> ^M <input type="text"/> ^M / <input type="text"/> ^D <input type="text"/> ^D / <input type="text"/> ^Y <input type="text"/> ^Y <input type="text"/> ^Y <input type="text"/> ^Y 1 2 / 0 3 / 2 0 0 7</p> <p>Amount of Each Disbursement this Period <input type="text"/> 300.00</p>
<p>B. Full Name (Last, First, Middle Initial) People for Houser</p> <p>Mailing Address 34697 Beechnut Road</p> <p>City Carson State IA Zip Code 51525</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>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) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB29.7563</p> <p>Date of Disbursement <input type="text"/> ^M <input type="text"/> ^M / <input type="text"/> ^D <input type="text"/> ^D / <input type="text"/> ^Y <input type="text"/> ^Y <input type="text"/> ^Y <input type="text"/> ^Y 1 2 / 0 3 / 2 0 0 7</p> <p>Amount of Each Disbursement this Period <input type="text"/> 300.00</p>
<p>C. Full Name (Last, First, Middle Initial) People for Thomas</p> <p>Mailing Address 17658 domino Rd.</p> <p>City Elkader State IA Zip Code 52043</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>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) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB29.7587</p> <p>Date of Disbursement <input type="text"/> ^M <input type="text"/> ^M / <input type="text"/> ^D <input type="text"/> ^D / <input type="text"/> ^Y <input type="text"/> ^Y <input type="text"/> ^Y <input type="text"/> ^Y 1 2 / 0 3 / 2 0 0 7</p> <p>Amount of Each Disbursement this Period <input type="text"/> 300.00</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text"/> 900.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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

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

FOR LINE NUMBER:
(check only one)

PAGE 20 / 24

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

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NAME OF COMMITTEE (In Full)

AQUILA INC. EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE (FORMERLY UTILICORP UNI-
TED)

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Peterson for State Rep</p> <p>Mailing Address 4300Beaver Hills Dr</p> <p>City Des Moines State IA Zip Code 50310</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>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) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB29.7574</p> <p>Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 3 / 2 0 0 7</p> <p>Amount of Each Disbursement this Period <input type="text" value="400.00"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Pettengill for Iowans</p> <p>Mailing Address PO box 76</p> <p>City Mt. Auburn State IA Zip Code 52313</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>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) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB29.7576</p> <p>Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 3 / 2 0 0 7</p> <p>Amount of Each Disbursement this Period <input type="text" value="200.00"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Rants for State House Committee</p> <p>Mailing Address 2740 S. Glass</p> <p>City Sioux City State IA Zip Code 51106</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>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) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB29.7580</p> <p>Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 3 / 2 0 0 7</p> <p>Amount of Each Disbursement this Period <input type="text" value="400.00"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

AQUILA INC. EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE (FORMERLY UTILICORP UNITE D)

A.	Full Name (Last, First, Middle Initial) Gene Rardin <hr/> Mailing Address 10900 West 104th St. <hr/> City Overland Park State KS Zip Code 66214 <hr/> Purpose of Disbursement <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <hr/> Candidate Name <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <hr/> 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: SB29.7492 Date of Disbursement 12 / 27 / 2007 <hr/> Amount of Each Disbursement this Period 200.00
B.	Full Name (Last, First, Middle Initial) Reasoner for State Rep <hr/> Mailing Address 702 New York Ave <hr/> City Creston State IA Zip Code 50801 <hr/> Purpose of Disbursement <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <hr/> Candidate Name <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <hr/> 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: SB29.7597 Date of Disbursement 12 / 03 / 2007 <hr/> Amount of Each Disbursement this Period 200.00
C.	Full Name (Last, First, Middle Initial) Rielly for Senate <hr/> Mailing Address 113 North Market Street <hr/> City Oskaloosa State IA Zip Code 52577 <hr/> Purpose of Disbursement <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <hr/> Candidate Name <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <hr/> 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: SB29.7541 Date of Disbursement 12 / 03 / 2007 <hr/> Amount of Each Disbursement this Period 200.00

SUBTOTAL of Disbursements This Page (optional) ▶

600.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

AQUILA INC. EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE (FORMERLY UTILICORP UNI-
TED)

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Sands for State House</p> <p>Mailing Address 134 Orchard lane</p> <p>City Columbus Junction State IA Zip Code 52738</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>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) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB29.7581</p> <p>Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>0</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>200.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	0	3	/	2	0	0	7	200.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	2	/	0	3	/	2	0	0	7													
200.00																						
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Seymour for Senate</p> <p>Mailing Address 901 White Street</p> <p>City Woodbine State IA Zip Code 51579</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>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) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB29.7545</p> <p>Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>0</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>200.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	0	3	/	2	0	0	7	200.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	2	/	0	3	/	2	0	0	7													
200.00																						
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Shomshor for Iowa House</p> <p>Mailing Address 3018 Avenue M</p> <p>City Council Bluffs State IA Zip Code 51501</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>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) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB29.7590</p> <p>Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>0</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>300.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	0	3	/	2	0	0	7	300.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	2	/	0	3	/	2	0	0	7													
300.00																						

SUBTOTAL of Disbursements This Page (optional) ►

700.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

AQUILA INC. EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE (FORMERLY UTILICORP UNITE D)

A. Full Name (Last, First, Middle Initial) Soderberg for House <hr/> Mailing Address 800 2nd St. S.E. <hr/> City LeMars State IA Zip Code 51031 <hr/> Purpose of Disbursement <input type="text"/> <hr/> Candidate Name <input type="text"/> Category/Type <input type="text"/> <hr/> 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:	Transaction ID: SB29.7585 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 3 / 2 0 0 7	
	Amount of Each Disbursement this Period <input type="text" value="300.00"/>	
	Full Name (Last, First, Middle Initial) Upmeyer for House <hr/> Mailing Address 2175 Pine Avenue <hr/> City Garner State IA Zip Code 50438 <hr/> Purpose of Disbursement <input type="text"/> <hr/> Candidate Name <input type="text"/> Category/Type <input type="text"/> <hr/> 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:	Transaction ID: SB29.7593 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 3 / 2 0 0 7
	Amount of Each Disbursement this Period <input type="text" value="200.00"/>	
C. Full Name (Last, First, Middle Initial) Ward for Senate <hr/> Mailing Address 4205 Oakwood Lane <hr/> City West Des Moines State IA Zip Code 50265 <hr/> Purpose of Disbursement <input type="text"/> <hr/> Candidate Name <input type="text"/> Category/Type <input type="text"/> <hr/> 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:	Transaction ID: SB29.7547 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 3 / 2 0 0 7	
	Amount of Each Disbursement this Period <input type="text" value="200.00"/>	

SUBTOTAL of Disbursements This Page (optional) ▶	<input type="text" value="700.00"/>
TOTAL This Period (last page this line number only) ▶	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

AQUILA INC. EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE (FORMERLY UTILICORP UNI-
TED)

A. Full Name (Last, First, Middle Initial) Warnstadt for Senate Committee <hr/> Mailing Address 3301 Chambers Street <hr/> City Sioux City State IA Zip Code 51104 <hr/> Purpose of Disbursement <input type="checkbox"/> <hr/> Candidate Name <input type="checkbox"/> Category/Type <hr/> 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:	Transaction ID: SB29.7550 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 3 / 2 0 0 7	
	Amount of Each Disbursement this Period 400.00	
	Full Name (Last, First, Middle Initial) Watts for House <hr/> Mailing Address 2824 Prospect Avenue <hr/> City Adel State IA Zip Code 50003 <hr/> Purpose of Disbursement <input type="checkbox"/> <hr/> Candidate Name <input type="checkbox"/> Category/Type <hr/> 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:	Transaction ID: SB29.7599 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 3 / 2 0 0 7
	Amount of Each Disbursement this Period 200.00	
C. Full Name (Last, First, Middle Initial) Wieck for Iowa Senate <hr/> Mailing Address 4362 Old Lakeport Road <hr/> City Sioux City State IA Zip Code 51106 <hr/> Purpose of Disbursement <input type="checkbox"/> <hr/> Candidate Name <input type="checkbox"/> Category/Type <hr/> 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:	Transaction ID: SB29.7552 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 3 / 2 0 0 7	
	Amount of Each Disbursement this Period 400.00	

SUBTOTAL of Disbursements This Page (optional) ▶

1000.00

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

14350.00