

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 MISSOURI RISING ACTION

ADDRESS (number and street) 131 EAST HIGH ST. Check if different than previously reported. (ACC) JEFFERSON CITY MO 65101

2. FEC IDENTIFICATION NUMBER C C00652875 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X] NEW (N) [] AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, 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 04 / 01 / 2018 through 06 / 30 / 2018

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

Type or Print Name of Treasurer

Signature of Treasurer Hayes, Deanna, , , [Electronically Filed] Date 07 / 15 / 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

MISSOURI RISING ACTION

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>	<input type="text" value="0.12"/>	<input type="text" value="0.12"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="157985.88"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="1373690.00"/>	<input type="text" value="1563692.76"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="1531675.88"/>	<input type="text" value="1563692.88"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="116657.14"/>	<input type="text" value="148674.14"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="1415018.74"/>	<input type="text" value="1415018.74"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

MISSOURI RISING ACTION

Report Covering the Period: From: / / To: / /

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		
(i) Itemized (use Schedule A).....	1373690.00	1563690.00
(ii) Unitemized	0.00	2.76
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	1373690.00	1563692.76
(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)	1373690.00	1563692.76
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 Transfers (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)).....▶	1373690.00	1563692.76
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	1373690.00	1563692.76

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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	56657.14	88674.14
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	56657.14	88674.14
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	60000.00	60000.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated 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)) ..	116657.14	148674.14
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	116657.14	148674.14

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

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)	1373690.00	1563692.76
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1373690.00	1563692.76
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	56657.14	88674.14
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	56657.14	88674.14

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 15
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
MISSOURI RISING ACTION

A. Busch, August, , , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 Mid Rivers Mall Dr.

City St. Peters	State MO	Zip Code 63376
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
160000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 14 / 2018

Transaction ID : SA11AI.4141

Amount of Each Receipt this Period
60000.00

Memo Item Contribution

B. Cornell, Harry, M, , Jr.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 757

City Carthage	State OH	Zip Code 64836
------------------	-------------	-------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2018

Transaction ID : SA11AI.4145

Amount of Each Receipt this Period
5000.00

Memo Item Contribution

C. Cushman, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 900 Wilshire Blvd #2400

City Los Angeles	State CA	Zip Code 90017
---------------------	-------------	-------------------

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

Name of Employer (for Individual) Cushman & Wakefield	Occupation (for Individual) Chairman
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
12500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2018

Transaction ID : SA11AI.4181

Amount of Each Receipt this Period
12500.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....▶	77500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 15
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MISSOURI RISING ACTION

A. Herschend, Peter, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 538 Oak Bluff Road
 City Branson State MO Zip Code 65616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Herschend Family Entertainment Occupation (for Individual) Co-Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 30000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2018
Transaction ID : SA11AI.4147
 Amount of Each Receipt this Period
 10000.00
 Memo Item Contribution

B. Herschend, Peter, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 538 Oak Bluff Road
 City Branson State MO Zip Code 65616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Herschend Family Entertainment Occupation (for Individual) Co-Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 40000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2018
Transaction ID : SA11AI.4184
 Amount of Each Receipt this Period
 10000.00
 Memo Item Contribution

C. Humphreys, David, Craig, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 4050
 City Joplin State MO Zip Code 64803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TAMKO Building Products, Inc. Occupation (for Individual) President and Chief Executive Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1168190.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2018
Transaction ID : SA11AI.4143
 Amount of Each Receipt this Period
 1168190.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....▶	1188190.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 15
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MISSOURI RISING ACTION

A. McInerney, Thomas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 Manitou Court
 City Westport State CT Zip Code 06880
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Bluff Point Associates Corp Occupation (for Individual) Venture Capital Investor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 05 / 01 / 2018
Transaction ID : SA11AI.4152
 Amount of Each Receipt this Period 100000.00
 Memo Item Contribution

B. Orscheln, Robert, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5938 Screaming Eagle Lane
 City Columbia State MO Zip Code 65201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Orscheln Products LLC Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 22 / 2018
Transaction ID : SA11AI.4150
 Amount of Each Receipt this Period 2500.00
 Memo Item Contribution

C. Orscheln, William, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 280
 City Moberly State MO Zip Code 65270
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Orscheln Management Co. Occupation (for Individual) Chairman & CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 22 / 2018
Transaction ID : SA11AI.4154
 Amount of Each Receipt this Period 2500.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....▶ 105000.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 9 OF 15	
(check only one)			
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>	15	<input type="checkbox"/>	12
<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
MISSOURI RISING ACTION

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Richardson, Frank, , ,

Mailing Address 245 Park Avenue
41st Floor

City New York State NY Zip Code 10167

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

Name of Employer (for Individual) Self Employed Occupation (for Individual) Private Investor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
MM / DD / YYYY
06 / 28 / 2018

Transaction ID : SA11AI.4183

Amount of Each Receipt this Period
3000.00

Memo Item Contribution

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	3000.00
TOTAL This Period (last page this line number only).....▶	1373690.00

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

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NAME OF COMMITTEE (In Full)
MISSOURI RISING ACTION

Full Name (Last, First, Middle Initial)

A. Mack Brook Co.

Mailing Address 6059 Kenwood Avenue

City Dallas State TX Zip Code 75205

Purpose of Disbursement Fundraising Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 01 / 2018

FEC Identification Number

C

Transaction ID : SB21B.4172

Amount of Each Disbursement this Period

3750.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Stratagem LLC

Mailing Address 1830 Forest Pointe Ct.

City Columbia State MO Zip Code 65201

Purpose of Disbursement Management Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 10 / 2018

FEC Identification Number

C

Transaction ID : SB21B.4157

Amount of Each Disbursement this Period

8000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Stratagem LLC

Mailing Address 1830 Forest Pointe Ct.

City Columbia State MO Zip Code 65201

Purpose of Disbursement Management Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 31 / 2018

FEC Identification Number

C

Transaction ID : SB21B.4159

Amount of Each Disbursement this Period

8000.00

Memo Item

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

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

19750.00

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

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NAME OF COMMITTEE (In Full)
MISSOURI RISING ACTION

A. Targeted Victory

Full Name (Last, First, Middle Initial)

Mailing Address 1100 Wilson Blvd, 10th Floor

City Arlington State VA Zip Code 22209

Purpose of Disbursement Credit Card Processing Fess

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 29 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4185

Amount of Each Disbursement this Period: 512.20

Memo Item

B. The KAM Co.

Full Name (Last, First, Middle Initial)

Mailing Address 233 W. 53rd Ter

City Kansas City State MO Zip Code 64112

Purpose of Disbursement Fundraising Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 10 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4160

Amount of Each Disbursement this Period: 78.21

Memo Item

C. The KAM Co.

Full Name (Last, First, Middle Initial)

Mailing Address 233 W. 53rd Ter

City Kansas City State MO Zip Code 64112

Purpose of Disbursement Fundraising Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 10 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4161

Amount of Each Disbursement this Period: 104.23

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 694.64

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

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NAME OF COMMITTEE (In Full)
MISSOURI RISING ACTION

Full Name (Last, First, Middle Initial)
A. The KAM Co.

Mailing Address 233 W. 53rd Ter

City Kansas City State MO Zip Code 64112

Purpose of Disbursement Fundraising Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 10 / 2018

FEC Identification Number: C

Transaction ID : **SB21B.4162**

Amount of Each Disbursement this Period: 7500.00

Memo Item

Full Name (Last, First, Middle Initial)
B. The KAM Co.

Mailing Address 233 W. 53rd Ter

City Kansas City State MO Zip Code 64112

Purpose of Disbursement Fundraising Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 04 / 2018

FEC Identification Number: C

Transaction ID : **SB21B.4163**

Amount of Each Disbursement this Period: 3750.00

Memo Item

Full Name (Last, First, Middle Initial)
C. The Morning Group

Mailing Address 5918 4th Street NW

City Washington State DC Zip Code 20011

Purpose of Disbursement Fundraising Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 10 / 2018

FEC Identification Number: C

Transaction ID : **SB21B.4156**

Amount of Each Disbursement this Period: 7500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 18750.00

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

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NAME OF COMMITTEE (In Full)
MISSOURI RISING ACTION

Full Name (Last, First, Middle Initial)

A. The Morning Group

Mailing Address 5918 4th Street NW

City
Washington

State
DC

Zip Code
20011

Purpose of Disbursement
Fundraising Consulting

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 04 / 2018

FEC Identification Number

C
Transaction ID : SB21B.4164
Amount of Each Disbursement this Period
3750.00

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y Y Y

FEC Identification Number

C
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

FEC Identification Number

C
Amount of Each Disbursement this Period

Memo Item

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

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

3750.00
56617.14

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) MISSOURI RISING ACTION
FEC IDENTIFICATION NUMBER C C00652875

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee IMG E LLC
Mailing Address 108 South Washington St 3rd Floor
City Alexandria State VA Zip Code 22314
Purpose of Expenditure Digital Ad Placement and Production
Category/Type 004
Date of Public Distribution/Dissemination 06/15/2018
Amount 60000.00
Transaction ID: SE.4135
Date of Disbursement or Obligation 06/14/2018

Name of Federal Candidate: MCCASKILL, CLAIRE, ,
Support Oppose
Office Sought: House Senate State: MO
Disbursement For: Primary General
2018 Other (specify)

Full Name of Payee
Mailing Address
City State Zip Code
Purpose of Expenditure
Category/Type
Date of Public Distribution/Dissemination
Amount
Date of Disbursement or Obligation

Name of Federal Candidate:
Support Oppose
Office Sought: House Senate State:
Disbursement For: Primary General
Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 60000.00, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures 60000.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hayes, Deanna, ,

[Electronically Filed]

Date 07/15/2018

Signature