

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

SHOW - ME FUND; THE

ADDRESS (number and street) 10 Sentry Parkway Suite 200 Blue Bell PA 19422

2. FEC IDENTIFICATION NUMBER C00381194 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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, Convention, Special (d) 30-Day Post-Election Report for the: General, Runoff, Special

5. Covering Period 10 01 2008 through 10 15 2008

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 Scott M Badami

Signature of Treasurer Electronically Filed by Scott M Badami Date 12 19 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  
SHOW - ME FUND; THE

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	0

D	D
1	5

Y	Y	Y	Y
2	0	0	8

	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>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		23161.09
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	23927.09									
(c) Total Receipts (from Line 19) .....	46931.96	75536.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	70859.05	98697.09								
7. Total Disbursements (from Line 31) .....	37753.65	65591.69								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	33105.40	33105.40								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> 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  
SHOW - ME FUND; THE

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	0

D	D
1	5

Y	Y	Y	Y
2	0	0	8

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	536.00
(i) Itemized (use Schedule A) .....	0.00	0.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	536.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	46931.96	75000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	46931.96	75536.00
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)) .....	46931.96	75536.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	46931.96	75536.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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.....	33000.00	53000.00
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) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	4753.65	12591.69
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))..	37753.65	65591.69
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	37753.65	65591.69

**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 .....	46931.96	75536.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	46931.96	75536.00
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 A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 19  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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)  
SHOW - ME FUND; THE

**A.**

Full Name (Last, First, Middle Initial)  
ALLIANT TECHSYSTEMS INC. EMPLOYEE CITIZENSHIP FUND

Mailing Address 1215 South Clark St.  
Suite 1510

City Arlington State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00250209

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** SA11C.4279

Amount of Each Receipt this Period  
1931.96

**B.**

Full Name (Last, First, Middle Initial)  
Aloha PAC

Mailing Address P.O. Box 30457

City Bethesda State MD Zip Code 20824

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** SA11C.4280

Amount of Each Receipt this Period  
2000.00

**C.**

Full Name (Last, First, Middle Initial)  
American Association for Justice PAC

Mailing Address 777 6th Street, N.W.  
Suite 200

City Washington State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** SA11C.4277

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 8931.96

**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 7 / 19  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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)  
SHOW - ME FUND; THE

**A.** Full Name (Last, First, Middle Initial)  
Anheuser Busch PAC

Mailing Address 1401 F Street, N.W.  
Suite 200

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** SA11C.4284

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Babcock & Wilcox PAC

Mailing Address 511 2nd Street, NE

City State Zip Code  
Washington DC 20002

FEC ID number of contributing federal political committee. C c00063461

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** SA11C.4286

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Emerson Electric Good Government Fund

Mailing Address 808 W. Florissant

City State Zip Code  
St. Louis MO 63136

FEC ID number of contributing federal political committee. C c00080515

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** SA11C.4288

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... 15000.00

**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 8 / 19  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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)  
SHOW - ME FUND; THE

**A.** Full Name (Last, First, Middle Initial)  
General Electric Company Political Action Committee

Mailing Address 1299 Pennsylvania Ave, NW  
Suite 900

City State Zip Code  
Washington DC 20004

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** SA11C.4275

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Honeywell International Political Action Committee

Mailing Address 101 Constitution Ave, N.W.  
Suite 500 West

City State Zip Code  
Washington DC 20001

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** SA11C.4273

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
National Rural Letter Carriers Assn PAC

Mailing Address 1630 Duke Street  
2nd Floor

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** c00072025

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 2 / 2 0 0 8

**Transaction ID:** SA11C.4290

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **15000.00**

**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: <span style="float: right;">PAGE 9 / 19</span>
	(check only one)
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input checked="" 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	

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)  
SHOW - ME FUND; THE

**A.**

Full Name (Last, First, Middle Initial) Peabody PAC		Date of Receipt
Mailing Address 701 Market Street Suite 700		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
City	State	Zip Code
St. Louis	MO	63101
FEC ID number of contributing federal political committee.		Transaction ID: SA11C.4282
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="3000.00"/>
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="3000.00"/>

**B.**

Full Name (Last, First, Middle Initial) SAIC Voluntary Political Action Committee		Date of Receipt
Mailing Address 1919 Pennsylvania Ave NW Suite 650		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
City	State	Zip Code
Washington	DC	20006
FEC ID number of contributing federal political committee.		Transaction ID: SA11C.4271
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="5000.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="8000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="46931.96"/>

# 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 / 19

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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 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)  
SHOW - ME FUND; THE

<p><b>A.</b> Full Name (Last, First, Middle Initial) ADLER, JOHN H</p> <p>Mailing Address 51 CAMEO DRIVE</p> <p>City CHERRY HILL State NJ Zip Code 08003</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name ADLER FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 03</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.4487</p> <p>Date of Disbursement 10 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/Type <input type="text"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Judy Baker</p> <p>Mailing Address 201 N. 10th Street, Suite 102</p> <p>City Columbia State MO Zip Code 65102</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name BAKER FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 09</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.4489</p> <p>Date of Disbursement 10 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/Type <input type="text"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) John Bocchieri</p> <p>Mailing Address 601 Cleveland Avenue</p> <p>City Canton State OH Zip Code 44702</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name JOHN A BOCCIERI</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 16</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.4491</p> <p>Date of Disbursement 10 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/Type <input type="text"/></p>

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

3000.00

**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 checked="" 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 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)  
SHOW - ME FUND; THE

A.

Full Name (Last, First, Middle Initial)  
David Boswell

Transaction ID: SB23.4493  
Date of Disbursement

Mailing Address 5591 Panther Creek Park Drive

/   /

City Owensboro State KY Zip Code 42301

Amount of Each Disbursement this Period

Purpose of Disbursement

Candidate Name  
BOSWELL FOR CONGRESS

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: IA District: 03

B.

Full Name (Last, First, Middle Initial)  
Nancy Boyda

Transaction ID: SB23.4495  
Date of Disbursement

Mailing Address 720 SW Jackson Street, Suite 202

/   /

City Topeka State KS Zip Code 66603

Amount of Each Disbursement this Period

Purpose of Disbursement

Candidate Name  
NANCY E E BOYDA

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: KS District: 02

C.

Full Name (Last, First, Middle Initial)  
BOBBY NEAL SR BRIGHT

Transaction ID: SB23.4497  
Date of Disbursement

Mailing Address 246 NORTH COURT STREET UNIT G

/   /

City MONTGOMERY State AL Zip Code 36104

Amount of Each Disbursement this Period

Purpose of Disbursement

Candidate Name  
BRIGHT FOR CONGRESS.COM

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: AL District: 02

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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 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)  
SHOW - ME FUND; THE

A.

Full Name (Last, First, Middle Initial)  
Paul CARMOUCHE

Transaction ID: SB23.4499  
Date of Disbursement

Mailing Address 912 KINGS HIGHWAY

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

City SHREVEPORT State LA Zip Code 71104

Amount of Each Disbursement this Period

Purpose of Disbursement

1000.00
---------

Candidate Name  
CARMOUCHE FOR CONGRESS INC

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼  
State: LA District: 04

B.

Full Name (Last, First, Middle Initial)  
Don Cazayoux

Transaction ID: SB23.4502  
Date of Disbursement

Mailing Address P.O. Box 3172

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

City Baton Rouge State LA Zip Code 70802

Amount of Each Disbursement this Period

Purpose of Disbursement

2000.00
---------

Candidate Name  
CAZAYOUX FOR CONGRESS

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼  
State: LA District: 06

C.

Full Name (Last, First, Middle Initial)  
CONNOLLY, GERRY

Transaction ID: SB23.4504  
Date of Disbursement

Mailing Address PO BOX 563

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

City MERRIFIELD State VA Zip Code 22116

Amount of Each Disbursement this Period

Purpose of Disbursement

1000.00
---------

Candidate Name  
GERRY CONNOLLY

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼  
State: VA District: 11

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

4000.00
---------

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 checked="" 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 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)  
SHOW - ME FUND; THE

**A.** Full Name (Last, First, Middle Initial)  
DEBORAH 'DEBBIE' HALVORSON

Mailing Address 565 Aberdeen Dr

City State Zip Code  
Crete IL 60417

Purpose of Disbursement

Candidate Name  
HALVORSON FOR CONGRESS

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: IL District: 11

**Transaction ID:** SB23.4506

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
HEINRICH, MARTIN

Mailing Address 2118 CENTRAL AVENUE SE #71

City State Zip Code  
ALBUQUERQUE NM 87106

Purpose of Disbursement

Candidate Name  
MARTIN HEINRICH

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: NM District: 01

**Transaction ID:** SB23.4508

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
MARY JO KILROY

Mailing Address 3100 Midgard Road

City State Zip Code  
Columbus OH 43202

Purpose of Disbursement

Candidate Name  
KILROY FOR CONGRESS

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: OH District: 15

**Transaction ID:** SB23.4510

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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 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)  
SHOW - ME FUND; THE

A.

Full Name (Last, First, Middle Initial)  
KIRKPATRICK, ANN

Transaction ID: SB23.4512  
Date of Disbursement

Mailing Address PO BOX G

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

City FLAGSTAFF State AZ Zip Code 86002

Amount of Each Disbursement this Period

Purpose of Disbursement

1000.00
---------

Candidate Name  
KIRKPATRICK FOR ARIZONA

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: AZ District: 01

B.

Full Name (Last, First, Middle Initial)  
KRATOVIL FOR CONGRESS

Transaction ID: SB23.4218  
Date of Disbursement

Mailing Address 222 Main Sail Drive  
PO Box 518

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

City Stevensville State MD Zip Code 21666

Amount of Each Disbursement this Period

Purpose of Disbursement

1000.00
---------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: MD District: 01

C.

Full Name (Last, First, Middle Initial)  
Alice KRYZAN

Transaction ID: SB23.4515  
Date of Disbursement

Mailing Address P.O. Box 317

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

City Amherst State NY Zip Code 14226

Amount of Each Disbursement this Period

Purpose of Disbursement

1000.00
---------

Candidate Name  
KRYZAN FOR CONGRESS

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: NY District: 26

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

3000.00
---------

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 checked="" 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 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)  
SHOW - ME FUND; THE

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>MADIA, JIGAR ASHWIN</b>	<b>Transaction ID:</b> SB23.4517 Date of Disbursement 10 / 02 / 2008	
	Mailing Address 3660 LANCASTER LANE N APT 15		
	City PLYMOUTH State MN Zip Code 55441	Amount of Each Disbursement this Period	1000.00
	Purpose of Disbursement		
	Candidate Name MADIA FOR U S CONGRESS	Category/ Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 03	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>MAFFEI, DANIEL B MR.</b>	<b>Transaction ID:</b> SB23.4519 Date of Disbursement 10 / 02 / 2008	
	Mailing Address 15 Pebble Hill N		
	City DeWitt State NY Zip Code 13214	Amount of Each Disbursement this Period	1000.00
	Purpose of Disbursement		
	Candidate Name DANIEL B MR. MAFFEI	Category/ Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>Eric Massa</b>	<b>Transaction ID:</b> SB23.4521 Date of Disbursement 10 / 08 / 2008	
	Mailing Address 60 E. Market Street, Suite 244		
	City Corning State NY Zip Code 14830	Amount of Each Disbursement this Period	1000.00
	Purpose of Disbursement		
	Candidate Name MASSA FOR CONGRESS	Category/ Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 29	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3000.00
<b>TOTAL</b> 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 checked="" 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 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)  
SHOW - ME FUND; THE

A.	Full Name (Last, First, Middle Initial) MICHAEL E. MR. MCMAHON	Transaction ID: SB23.4523 Date of Disbursement 10 / 02 / 2008
	Mailing Address 66 Arnold Street	Amount of Each Disbursement this Period 1000.00
	City Staten Island State NY Zip Code 10301	
	Purpose of Disbursement	Category/Type
	Candidate Name MICHAEL E. MR. MCMAHON	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 13	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Jerry McNerney	Transaction ID: SB23.4525 Date of Disbursement 10 / 01 / 2008
	Mailing Address 6250 Village Parkway, Floor 2	Amount of Each Disbursement this Period 2000.00
	City Dublin State CA Zip Code 94568	
	Purpose of Disbursement	Category/Type
	Candidate Name MCNERNEY FOR CONGRESS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 11	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Harry Mitchell	Transaction ID: SB23.4527 Date of Disbursement 10 / 01 / 2008
	Mailing Address P.O. Box 23748	Amount of Each Disbursement this Period 2000.00
	City Tempe State AZ Zip Code 85285	
	Purpose of Disbursement	Category/Type
	Candidate Name HARRY E MITCHELL	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 05	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	5000.00
<b>TOTAL</b> 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 checked="" 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 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)  
SHOW - ME FUND; THE

<b>A.</b> Full Name (Last, First, Middle Initial) Sharen Neuhardt <hr/> Mailing Address P.O. Box 2430 <hr/> City Springfield State OH Zip Code 45501 <hr/> Purpose of Disbursement <hr/> Candidate Name NEUHARDT FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 07 <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.4529 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Ciro Rodriguez <hr/> Mailing Address P.O. Box 14528 <hr/> City San Antonio State TX Zip Code 48214 <hr/> Purpose of Disbursement <hr/> Candidate Name CIRO D. RODRIGUEZ <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 23 <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.4531 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 8
	Amount of Each Disbursement this Period 2000.00
	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Mark Schauer <hr/> Mailing Address P.O. Box 100 <hr/> City Battle Creek State MI Zip Code 49016 <hr/> Purpose of Disbursement <hr/> Candidate Name SCHAUER FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 07 <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.4533 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 8 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4000.00
<b>TOTAL</b> 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)

PAGE 18 / 19

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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 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)  
SHOW - ME FUND; THE

A.	Full Name (Last, First, Middle Initial) Carol Shea-Porter	Transaction ID: SB23.4535 Date of Disbursement 10 / 01 / 2008
	Mailing Address 23 Boston Harbor Road	Amount of Each Disbursement this Period 2000.00
	City Dover State NH Zip Code 03820	
	Purpose of Disbursement	Category/Type
	Candidate Name CAROL SHEA-PORTER	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 01	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) STENDER, LINDA MRS.	Transaction ID: SB23.4537 Date of Disbursement 10 / 02 / 2008
	Mailing Address 154 Herbert Avenue	Amount of Each Disbursement this Period 1000.00
	City Fanwood State NJ Zip Code 07023	
	Purpose of Disbursement	Category/Type
	Candidate Name LINDA MRS. STENDER	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 07	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Gary Trauner	Transaction ID: SB23.4539 Date of Disbursement 10 / 02 / 2008
	Mailing Address P.O. Box 1154	Amount of Each Disbursement this Period 1000.00
	City Wilson State NY Zip Code 83014	
	Purpose of Disbursement	Category/Type
	Candidate Name TRAUNER FOR CONGRESS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WY District: 01	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	4000.00
<b>TOTAL</b> This Period (last page this line number only) .....	33000.00

# 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

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)  
SHOW - ME FUND; THE

A.	Full Name (Last, First, Middle Initial) King Creole Catering  Mailing Address 762 Walker Road  City State Zip Code Great Falls VA 22066  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: SB29.4266 Date of Disbursement 10 / 07 / 2008  Amount of Each Disbursement this Period 2871.75
B.	Full Name (Last, First, Middle Initial) Fraioli & Associates  Mailing Address 80 F Street, N.W. Suite 804  City State Zip Code Washington DC 20001  Purpose of Disbursement Fundraising Expenses  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: SB29.4265 Date of Disbursement 10 / 07 / 2008  Amount of Each Disbursement this Period 1301.90
C.	Full Name (Last, First, Middle Initial) Sequoia Presidential Yacht Group LLC  Mailing Address 2600 Virginia Avenue, N.W. #606  City State Zip Code Washington DC 20037  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: SB29.4268 Date of Disbursement 10 / 07 / 2008  Amount of Each Disbursement this Period 580.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>4753.65</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<b>4753.65</b>