

**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

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NAME OF COMMITTEE (In Full)
COMMERCE BANCSHARES, INC., PAC

Full Name (Last, First, Middle Initial)

A. Ann Wagner For Congress

Mailing Address 150 Long Road, Suite 50

City Chesterfield State MO Zip Code 63005

Purpose of Disbursement
U.S. House from MO - Dist. 2 (2,000.00)

011

Candidate Name
Ann Wagner

Category/
Type

Office Sought: House
 Senate
 President
State: MO District: 02

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2014

Transaction ID : **SB23.4649**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Donnelly for Indiana

Mailing Address 3701 Porter Street, NW

City Washington State DC Zip Code 20016

Purpose of Disbursement
U.S. Senate from Indiana (500.00)

011

Candidate Name
Joe Donnelly

Category/
Type

Office Sought: House
 Senate
 President
State: IN District: 00

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 17 / 2014

Transaction ID : **SB23.4648**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Duffy for Congress

Mailing Address P.O. Box 538

City Wausau State WI Zip Code 54402

Purpose of Disbursement
U.S. House from WI - Dist. 7 (500.00)

011

Candidate Name
Sean Duffy

Category/
Type

Office Sought: House
 Senate
 President
State: WI District: 07

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 17 / 2014

Transaction ID : **SB23.4647**

Amount of Each Disbursement this Period

500.00

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

2000.00

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