

RECEIVED
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2009 NOV 23 PM 12:49



Commerce Bancshares, Inc., PAC

1000 Walnut Street
Post Office Box 419248
Kansas City Missouri 64141-6248
(816) 234-2000

November 17, 2009

Federal Election Commission
999 E. Street, NW
Washington, DC 20463

Re: October 2009 Federal Election Report (Due 11-20-09)

Please find enclosed for filing the above mentioned report.

Yours truly,

Robert K Lay

Robert K. Lay
Treasurer

Enclosure

29030192690

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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
C o m m e r c e B a n c s h a r e s I n c P A C

ADDRESS (number and street) 1000 Walnut Suite 700
P O B o x 4 1 9 2 4 8
K a n s a s C i t y M O 6 4 1 4 1 - 6 2 4 8
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE
C 0 0 0 7 2 9 6 7 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on [] / [] / [] in the State of []
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on [] / [] / [] in the State of []

5. Covering Period 10 / 01 / 2009 through 10 / 31 / 2009

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 Robert K. Lay

Signature of Treasurer Robert K Lay Date 11 / 17 / 2009

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

29030192691

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Commerce Bancshares, Inc., PAC

Report Covering the Period: From:

10 / 01 / 2009

To:

10 / 31 / 2009

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1,	2 0 0 9	2 8 0 0 6 9 6
(b) Cash on Hand at Beginning of Reporting Period.....	3 1 9 2 2 2 9	
(c) Total Receipts (from Line 19).....	2 8 4 1 5 7	2 3 4 1 6 9 0
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	3 4 7 6 3 8 6	5 1 4 2 3 8 6
7. Total Disbursements (from Line 31).....	4 2 5 0 0 0	2 0 9 1 0 0 0
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	3 0 5 1 3 8 6	3 0 5 1 3 8 6
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0 0 0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0 0 0	

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

29030192692

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Commerce Bancshares, Inc., PAC

Report Covering the Period: From: **10** / **01** / **2009** To: **10** / **31** / **2009**

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).....	4 0 4 1 7	3 4 5 4 2 1
(ii) Unitemized.....	2 4 3 7 4 0	1 9 9 6 2 6 9
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	2 8 4 1 5 7	2 3 4 1 6 9 0
(b) Political Party Committees.....	0 0 0	0 0 0
(c) Other Political Committees (such as PACs).....	0 0 0	0 0 0
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	2 8 4 1 5 7	2 3 4 1 6 9 0
12. Transfers From Affiliated/Other Party Committees.....	0 0 0	0 0 0
13. All Loans Received.....	0 0 0	0 0 0
14. Loan Repayments Received.....	0 0 0	0 0 0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0 0 0	0 0 0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0 0 0	0 0 0
17. Other Federal Receipts (Dividends, Interest, etc.).....	0 0 0	0 0 0
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0 0 0	0 0 0
(b) Levin Funds (from Schedule H5).....	0 0 0	0 0 0
(c) Total Transfers (add 18(a) and 18(b))..	0 0 0	0 0 0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	2 8 4 1 5 7	2 0 5 7 5 3 3
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	2 8 4 1 5 7	2 0 5 7 5 3 3

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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) Allocated Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share		0 0 0	0 0 0
(ii) Non-Federal Share		0 0 0	0 0 0
(b) Other Federal Operating Expenditures		0 0 0	0 0 0
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	▶	0 0 0	0 0 0
22. Transfers to Affiliated/Other Party Committees		0 0 0	0 0 0
23. Contributions to Federal Candidates/Committees and Other Political Committees		2 5 0 0 0	8 2 5 0 0 0
24. Independent Expenditures (use Schedule E)		0 0 0	0 0 0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)		0 0 0	0 0 0
26. Loan Repayments Made		0 0 0	0 0 0
27. Loans Made		0 0 0	0 0 0
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees		0 0 0	0 0 0
(b) Political Party Committees		0 0 0	0 0 0
(c) Other Political Committees (such as PACs)		0 0 0	0 0 0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	▶	0 0 0	0 0 0
29. Other Disbursements		4 0 0 0 0 0	1 2 6 0 0 0 0
30. Federal Election Activity (2 U.S.C. §431(20))			
(a) Allocated Federal Election Activity (from Schedule H6)			
(i) Federal Share		0 0 0	0 0 0
(ii) "Levin" Share		0 0 0	0 0 0
(b) Federal Election Activity Paid Entirely With Federal Funds		0 0 0	0 0 0
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	▶	0 0 0	0 0 0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..		4 2 5 0 0 0	2 0 9 1 0 0 0
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	▶	4 2 5 0 0 0	2 0 9 1 0 0 0

29030192694

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	2 8 4 1 5 7	2 3 4 1 6 9 0
34. Total Contribution Refunds (from Line 28(d))	0 0 0	0 0 0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2 8 4 1 5 7	2 3 4 1 6 9 0
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0 0 0	0 0 0
37. Offsets to Operating Expenditures (from Line 15, page 3)	0 0 0	0 0 0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0 0 0	0 0 0

29030192695

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

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

FOR LINE NUMBER: PAGE 1 OF 4

(check only one)

<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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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)

Commerce Bancshares, Inc., PAC

Full Name (Last, First, Middle Initial)

A. Kemper, David W.

Mailing Address

2101 S. Warson Road

City

St. Louis

State

MO

Zip Code

63124

FEC ID number of contributing federal political committee.

C

Name of Employer

Commerce Bancshares, Inc. Chairman & CEO

Occupation

Chairman & CEO

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

4 1 6 7 0

Date of Receipt

1 0 / 2 2 / 2 0 0 9

Amount of Each Receipt this Period

4 1 6 7

Full Name (Last, First, Middle Initial)

B. Foster, Sara E.

Mailing Address

18 Wheatley

City

Chesterfield

State

MO

Zip Code

63005

FEC ID number of contributing federal political committee.

C

Name of Employer

Commerce Bancshares, Inc. Sr. Vice President

Occupation

Sr. Vice President

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1 0 0 0 0 0

Date of Receipt

1 0 / 2 2 / 2 0 0 9

Amount of Each Receipt this Period

1 0 0 0 0

Full Name (Last, First, Middle Initial)

C. Joyner, Dee A.

Mailing Address

6240 Clayton Rd., Unit 302

City

St. Louis

State

MO

Zip Code

63117

FEC ID number of contributing federal political committee.

C

Name of Employer

Commerce Bancshares, Inc. Sr. Vice President

Occupation

Sr. Vice President

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

4 1 6 7 0

Date of Receipt

1 0 / 2 2 / 2 0 0 9

Amount of Each Receipt this Period

4 1 6 7

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

1 8 3 3 4

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

29030192696

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

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

FOR LINE NUMBER: PAGE 2 OF 4

(check only one)

<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)
Commerce Bancshares, Inc., PAC

A. Full Name (Last, First, Middle Initial) Gossen, Ronald H.		Date of Receipt 10 / 22 / 2009
Mailing Address P O Box 50402		Amount of Each Receipt this Period 3333
City Clayton	State Zip Code MO 63105	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 33330
Name of Employer Commerce Bancshares, Inc.	Occupation Vice President	
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 33330	

B. Full Name (Last, First, Middle Initial) Steinhouse, Eric		Date of Receipt 10 / 22 / 2009
Mailing Address 1090 Bristol Manor Drive		Amount of Each Receipt this Period 2500
City Ballwin	State Zip Code MO 63011	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25000
Name of Employer Commerce Bancshares, Inc.	Occupation Exec. Vice President	
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25000	

C. Full Name (Last, First, Middle Initial) Barth, Kevin G.		Date of Receipt 10 / 22 / 2009
Mailing Address 13217 Granada		Amount of Each Receipt this Period 4167
City Leawood	State Zip Code KS 66209	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 41670
Name of Employer Commerce Bank, N.A.	Occupation President	
Receipt For: (Missouri) <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 41670	

SUBTOTAL of Receipts This Page (optional).....▶	10000
TOTAL This Period (last page this line number only).....▶	

29030192697

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 3 OF 4			
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
Commerce Bancshares, Inc., PAC

A. Full Name (Last, First, Middle Initial) Cook, Monte A.		Date of Receipt 1 0 / 2 2 / 2 0 0 9
Mailing Address 9107 E. Elm		Amount of Each Receipt this Period 2 0 8 3
City Wichita	State KS	
Zip Code 67206		Amount of Each Receipt this Period 2 0 8 3
FEC ID number of contributing federal political committee. C		
Name of Employer Commerce Bank, N.A.	Occupation Exec. Vice President	Amount of Each Receipt this Period 2 0 8 3 0
Receipt For: (Missouri) <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2 0 8 3 0	

B. Full Name (Last, First, Middle Initial) Ferguson, William B.		Date of Receipt 1 0 / 2 2 / 2 0 0 9
Mailing Address 14618 Grant Lane		Amount of Each Receipt this Period 2 5 0 0
City Overland Park	State KS	
Zip Code 66221		Amount of Each Receipt this Period 2 5 0 0 0
FEC ID number of contributing federal political committee. C		
Name of Employer Commerce Bank, N.A.	Occupation Exec. Vice President	Amount of Each Receipt this Period 2 5 0 0 0
Receipt For: (Missouri) <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2 5 0 0 0	

C. Full Name (Last, First, Middle Initial) Ferry, Harlan H.		Date of Receipt 1 0 / 2 2 / 2 0 0 9
Mailing Address 418 Tupelo Drive		Amount of Each Receipt this Period 2 5 0 0
City Belleville	State IL	
Zip Code 62220		Amount of Each Receipt this Period 2 5 0 0 0
FEC ID number of contributing federal political committee. C		
Name of Employer Commerce Bank, N.A.	Occupation Officer	Amount of Each Receipt this Period 2 5 0 0 0
Receipt For: (Missouri) <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2 5 0 0 0	

SUBTOTAL of Receipts This Page (optional).....▶	7 0 8 3
TOTAL This Period (last page this line number only).....▶	

29030192698

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 4 OF 4	
	(check only one)	
<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15
<input type="checkbox"/> 12 16	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Commerce Bancshares, Inc., PAC

A. Full Name (Last, First, Middle Initial)
Hutchins, Sue A.

Mailing Address
754 Kraffel Lane

City **Town & Country** State **MO** Zip Code **63017**

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

Name of Employer **Commerce Bank, N.A.** Occupation **Exec. Vice President**

Receipt For: **(Missouri)**
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2 2 9 1 5

Date of Receipt
1 0 / 2 2 / 2 0 0 9

Amount of Each Receipt this Period
2 5 0 0

B. Full Name (Last, First, Middle Initial)
Rigdon, Ronald W.

Mailing Address
1116 Ward Parkway

City **Kansas City** State **MO** Zip Code **64112**

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

Name of Employer **Commerce Bank, N.A.** Occupation **Vice President**

Receipt For: **(Missouri)**
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2 5 0 0 0

Date of Receipt
1 0 / 2 2 / 2 0 0 9

Amount of Each Receipt this Period
2 5 0 0

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶ **5 0 0 0**

TOTAL This Period (last page this line number only).....▶ **4 0 4 1 7**

29030192699

**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 1 OF 1

<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. Ike Skelton for Congress

Date of Disbursement

MM	DD	YYYY
10	14	2009

Mailing Address

P O Box A

City

Harrisonville

State

MO

Zip Code

64701

Purpose of Disbursement

U.S. House from MO-Dist.4 (250.00)

0	1	1
Category/Type		

Amount of Each Disbursement this Period

2	5	0	0	0
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Candidate Name

Ike Skelton

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: MO

District: 4

B.

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM	DD	YYYY

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/Type		

Amount of Each Disbursement this Period

--	--	--	--	--

Candidate Name

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM	DD	YYYY

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/Type		

Amount of Each Disbursement this Period

--	--	--	--	--

Candidate Name

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

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

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

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2	5	0	0	0
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29030192700

**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 1 OF 2				
	<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 checked="" type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Commerce Bancshares, Inc., PAC

Full Name (Last, First, Middle Initial) A. Adams for Senate		Date of Disbursement 10 / 06 / 2009
Mailing Address P O Box 300587		Amount of Each Disbursement this Period 25000
City University City	State MO	
Zip Code 63130		Amount of Each Disbursement this Period 25000
Purpose of Disbursement MO State Senate-Dist.14 (250.00)		
Candidate Name Joseph Adams		Category/Type 011
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Friends of Peter Kinder		Date of Disbursement 10 / 14 / 2009
Mailing Address P O Box 712		Amount of Each Disbursement this Period 250000
City Jefferson City	State MO	
Zip Code 65102		Amount of Each Disbursement this Period 250000
Purpose of Disbursement MO Lieutenant Governor (2,500.00)		
Candidate Name Peter Kinder		Category/Type 011
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Friends of Shane Schoeller		Date of Disbursement 10 / 22 / 2009
Mailing Address P O Box 746		Amount of Each Disbursement this Period 25000
City Willard	State MO	
Zip Code 65781		Amount of Each Disbursement this Period 25000
Purpose of Disbursement MO State Rep.-Dist.139 (500.00)		
Candidate Name Shane Schoeller		Category/Type 011
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	300000
TOTAL This Period (last page this line number only).....▶	

29030192701

**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 2 OF 2

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

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NAME OF COMMITTEE (In Full)

Commerce Bancshares, Inc., PAC

Full Name (Last, First, Middle Initial)

A. Friends of Bobby Jindal

Mailing Address
5523 Parkview Church Rd., Unit A

City Baton Rouge State LA Zip Code 70816

Purpose of Disbursement
Louisiana Governor (1,000.00)

Candidate Name
Bobby Jindal

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

Date of Disbursement

1 0 / 3 0 / 2 0 0 9

Amount of Each Disbursement this Period

1 0 0 0 0 0

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

Date of Disbursement

 / /

Amount of Each Disbursement this Period

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

Date of Disbursement

 / /

Amount of Each Disbursement this Period

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

1 0 0 0 0 0

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

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