

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

STATE OF MISSOURI

CG FDC - 1 AM 10: 31

Office Use Only

1. NAME OF COMMITTEE (in full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines

Talent for Senate, Inc.

ADDRESS (number and street)

147 N. Meramec, Suite 100

Check if different than previously reported. (ACC)

Saint Louis

MO

63105

2. FEC IDENTIFICATION NUMBER

C00368183

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT

X

NEW (N)

OR

AMENDED (A)

MO

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

X January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

in the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

10

01

2004

through

12

31

2004

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

Garrett M. Lott

Signature of Treasurer

Electronically Filed by

Garrett M. Lott

01

19

2005

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 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Talent for Senate, Inc.

Report Covering the Period: From: M M D D Y Y Y Y To: M M D D Y Y Y Y  
10 01 2004 12 31 2004

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))	49615.00	641789.33
(b) Total Contribution Refunds (from Line 20(d))	0.00	16067.50
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	49615.00	625731.83
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17)	50154.12	1302706.20
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	44587.70
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	50154.12	1258118.50
<b>8. Cash on Hand at Close of Reporting Period (from Line 27)</b>	245398.05	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)</b>	0.00	

**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

FEC Form 3 (Revised 02/2003)

Page 3

Write or Type Committee Name  
Talent for Senate, Inc.

Report Covering the Period: From: Y M D D Y Y Y Y To: M M D D Y Y Y Y  
1 0 0 1 2 0 0 4 1 2 3 1 2 0 0 4

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	15350.00	
(ii) Unitemized.....	265.00	
(iii) TOTAL of contributions from individuals..... ▶	15615.00	536231.63
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACS) .....	34000.00	105557.50
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	49615.00	641789.33
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0.00	131500.00
13. LOANS		
(a) Made or Guaranteed by the Candidate .....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	0.00	44587.70
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	1622.17	4134.74
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	51237.17	822011.77

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

**II. DISBURSEMENTS**

	<b>COLUMN A</b> <b>Total This Period</b>	<b>COLUMN B</b> <b>Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES.....	50154.12	1302708.20
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	13800.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	2267.50
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	16067.50
21. OTHER DISBURSEMENTS.....	70082.50	98768.78
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	120236.62	1417530.46

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	314397.50
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	51237.17
25. SUBTOTAL (add Line 23 and Line 24).....	365634.67
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	120236.62
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	245398.05

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

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

FOR LINE NUMBER: PAGE 5 / 39  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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) Talent for Senate, Inc.	
Full Name (Last, First, Middle Initial) A. American Lighting Assn. PAC	
Mailing Address P.O. Box 420288	
City Dallas	State Zip Code TX 75342
FEC ID number of contributing federal political committee. C	
Name of Employer	Occupation
Receipt For: X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00
Date of Receipt M M / D D / Y Y Y Y 10 / 10 / 2004	
Transaction ID: 50118.C54729	
Amount of Each Receipt this Period 2000.00	
Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)	
Full Name (Last, First, Middle Initial) B. American Optometric PAC	
Mailing Address 1505 Prince Street	
City Alexandria	State Zip Code VA 22314
FEC ID number of contributing federal political committee. C	
Name of Employer	Occupation
Receipt For: X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00
Date of Receipt M M / D D / Y Y Y Y 10 / 10 / 2004	
Transaction ID: 50118.C54730	
Amount of Each Receipt this Period 1000.00	
Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)	
Full Name (Last, First, Middle Initial) C. Bluegrass Committee PAC	
Mailing Address P.O. Box 3932	
City Louisville	State Zip Code KY 40201
FEC ID number of contributing federal political committee. C	
Name of Employer	Occupation
Receipt For: Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00
Date of Receipt M M / D D / Y Y Y Y 12 / 01 / 2004	
Transaction ID: 50118.C54749	
Amount of Each Receipt this Period 5000.00	
Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)	

SUBTOTAL of Receipts This Page (optional) .....	8000.00
TOTAL This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 6 / 39  
(check only one)

11a	11b	<input checked="" type="checkbox"/> 11c	11d		
12	13a	13b	14	15	

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NAME OF COMMITTEE (In Full) Talent for Senate, Inc.		Date of Receipt M M / D D / Y Y Y Y 12 / 01 / 2004	
Full Name (Last, First, Middle Initial) A. Bluegrass Committee PAC		Transaction ID: 50118.C54748	
Mailing Address P.O. Box 3932		Amount of Each Receipt this Period 5000.00	
City Louisville	State KY	Zip Code 40201-	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10000.00	
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)	
Receipt For: X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 10000.00		
Full Name (Last, First, Middle Initial) B. Garcia Health Inc. PAC		Date of Receipt M M / D D / Y Y Y Y 12 / 05 / 2004	
Mailing Address 7000 Cardinal Place		Transaction ID: 50118.C54747	
City Dublin		State OH	Zip Code 43017-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)	
Receipt For: X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		
Full Name (Last, First, Middle Initial) C. Hudson Valley PAC		Date of Receipt M M / D D / Y Y Y Y 10 / 10 / 2004	
Mailing Address 900 Route 45		Transaction ID: 50118.C54727	
City New City		State NY	Zip Code 10958-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00	
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)	
Receipt For: X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00		
<b>SUBTOTAL of Receipts This Page (optional)</b> .....		<b>11000.00</b>	
<b>TOTAL This Period (last page this line number only)</b> .....			

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

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

FOR LINE NUMBER: PAGE 7 / 39  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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<b>NAME OF COMMITTEE (In Full)</b> Talent for Senate, Inc.	
<b>Full Name (Last, First, Middle Initial)</b> A. Interventional Pain Physicians PAC	
<b>Mailing Address</b> 2831 Lone Oak Road	
<b>City</b> Paducah	<b>State</b> KY <b>Zip Code</b> 42003-
<b>FEC ID number of contributing federal political committee.</b> C	
<b>Name of Employer</b>	<b>Occupation</b>
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Election Cycle-to-Date</b> ▼ 2000.00
<b>Date of Receipt</b> M M / D D / Y Y Y Y 10 / 10 / 2004	
<b>Transaction ID:</b> 50118.C54731 <b>Amount of Each Receipt this Period</b> 2000.00	
<b>Receipt</b> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)/441a-1)	
<b>Full Name (Last, First, Middle Initial)</b> B. Nestle USA Inc PAC	
<b>Mailing Address</b> 30003 Bainbridge Road	
<b>City</b> Solon	<b>State</b> OH <b>Zip Code</b> 44139-
<b>FEC ID number of contributing federal political committee.</b> C	
<b>Name of Employer</b>	<b>Occupation</b>
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Election Cycle-to-Date</b> ▼ 1000.00
<b>Date of Receipt</b> M M / D D / Y Y Y Y 12 / 05 / 2004	
<b>Transaction ID:</b> 50118.C54746 <b>Amount of Each Receipt this Period</b> 1000.00	
<b>Receipt</b> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)/441a-1)	
<b>Full Name (Last, First, Middle Initial)</b> C. Property Casual Insurers PAC	
<b>Mailing Address</b> 2500 South River Road	
<b>City</b> Des Plaines	<b>State</b> IL <b>Zip Code</b> 60018-
<b>FEC ID number of contributing federal political committee.</b> C	
<b>Name of Employer</b>	<b>Occupation</b>
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Election Cycle-to-Date</b> ▼ 1000.00
<b>Date of Receipt</b> M M / D D / Y Y Y Y 12 / 01 / 2004	
<b>Transaction ID:</b> 50118.C54743 <b>Amount of Each Receipt this Period</b> 1000.00	
<b>Receipt</b> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)/441a-1)	

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

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

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

FOR LINE NUMBER: PAGE a / 39  
(check only one)

11a	<input type="checkbox"/>	11b	<input checked="" type="checkbox"/>	11c	<input type="checkbox"/>	11d	<input type="checkbox"/>
12	<input type="checkbox"/>	13a	<input type="checkbox"/>	13b	<input type="checkbox"/>	14	<input type="checkbox"/>
						15	<input type="checkbox"/>

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NAME OF COMMITTEE (in Full) Talent for Senate, Inc.	
Full Name (Last, First, Middle Initial) A. UBS Paine Webber, Inc. PAC	
Mailing Address 1285 Avenue of the Americas, 14th	Date of Receipt M M / D D / Y Y Y Y 10 / 10 / 2004
City State Zip Code New York NY 10019	Transaction ID: 50118.C54728
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00
Name of Employer Occupation Receipt For: X Primary General Other (specify) ▼	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(A-1))
Election Cycle-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) B. Volunteer PAC	
Mailing Address P.O. Box 158552	Date of Receipt M M / D D / Y Y Y Y 11 / 15 / 2004
City State Zip Code Nashville TN 37215	Transaction ID: 50118.C54736
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 5000.00
Name of Employer Occupation Receipt For: X Primary General Other (specify) ▼	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(A-1))
Election Cycle-to-Date ▼ 5000.00	
Full Name (Last, First, Middle Initial) C. Volunteer PAC	
Mailing Address P.O. Box 158552	Date of Receipt M M / D D / Y Y Y Y 11 / 15 / 2004
City State Zip Code Nashville TN 37215	Transaction ID: 50118.C54736
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 5000.00
Name of Employer Occupation Receipt For: Primary X General Other (specify) ▼	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(A-1))
Election Cycle-to-Date ▼ 10000.00	
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	
	11000.00
	34000.00



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

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

FOR LINE NUMBER: PAGE 9 / 39  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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<b>NAME OF COMMITTEE (In Full)</b> Talent for Senate, Inc.		
<b>Full Name (Last, First, Middle Initial)</b> A. Rahim Ardavani <b>Mailing Address</b> 700 NW 5th Street  <b>City</b> Blue Springs <b>State</b> MO <b>Zip Code</b> 64014-  <b>FEC ID number of contributing federal political committee.</b> C  <b>Name of Employer</b> Rati Automation <b>Occupation</b> President <b>Receipt For:</b> X Primary General Election Cycle-to-Date ▼ Other (specify) ▼ 1000.00		<b>Date of Receipt</b> M M / D D / Y Y Y Y 12 / 05 / 2004  <b>Transaction ID:</b> 50118.C54755  <b>Amount of Each Receipt this Period</b>  1000.00  <b>Receipt</b>  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)
<b>Full Name (Last, First, Middle Initial)</b> B. Nireza Altaran <b>Mailing Address</b> 1535 Hummingbird Hill Lane  <b>City</b> Ellisville <b>State</b> MO <b>Zip Code</b> 63011-  <b>FEC ID number of contributing federal political committee.</b> C  <b>Name of Employer</b> University Of Missouri. <b>Occupation</b> Student <b>Receipt For:</b> X Primary General Election Cycle-to-Date ▼ Other (specify) ▼ 500.00		<b>Date of Receipt</b> M M / D D / Y Y Y Y 12 / 05 / 2004  <b>Transaction ID:</b> 50118.C54752  <b>Amount of Each Receipt this Period</b>  500.00  <b>Receipt</b>  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)
<b>Full Name (Last, First, Middle Initial)</b> C. Jong Chen <b>Mailing Address</b> 4100 American River Drive  <b>City</b> Sacramento <b>State</b> CA <b>Zip Code</b> 95864-  <b>FEC ID number of contributing federal political committee.</b> C  <b>Name of Employer</b> Mercy Medical Plaza <b>Occupation</b> Physician <b>Receipt For:</b> Primary X General Election Cycle-to-Date ▼ Other (specify) ▼ 2000.00		<b>Date of Receipt</b> M M / D D / Y Y Y Y 11 / 15 / 2004  <b>Transaction ID:</b> 50118.C54733  <b>Amount of Each Receipt this Period</b>  1500.00  <b>Receipt</b>  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

<b>SUBTOTAL of Receipts This Page (optional)</b> .....	<b>3000.00</b>
<b>TOTAL This Period (last page this line number only)</b> .....	

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 30  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Talent for Senate, Inc.

Full Name (Last, First, Middle Initial) A. Jung Chen		Date of Receipt M M / D D / Y Y Y Y 11 / 15 / 2004	
Mailing Address 4100 American River Drive		Transaction ID: 50118.C54732	
City Sacramento	State CA	Zip Code 95864	Amount of Each Receipt this Period 1500.00
FEC ID number of contributing federal political committee. C		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)	
Name of Employer Mercy Medical Plaza	Occupation Physician		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 3500.00		

Full Name (Last, First, Middle Initial) B. T.R. Elliott		Date of Receipt M M / D D / Y Y Y Y 11 / 15 / 2004	
Mailing Address 1244 Cottagemill Drive		Transaction ID: 50118.C54738	
City Manchester	State MD	Zip Code 21021	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)	
Name of Employer None	Occupation Retired		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 325.00		

Full Name (Last, First, Middle Initial) C. T.R. Elliott		Date of Receipt M M / D D / Y Y Y Y 11 / 15 / 2004	
Mailing Address 1244 Cottagemill Drive		Transaction ID: 50118.C54741	
City Manchester	State MD	Zip Code 21021	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)	
Name of Employer None	Occupation Retired		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 350.00		

SUBTOTAL of Receipts This Page (optional) ..... ▶	1550.00
TOTAL This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 11 of 39  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full) Talent for Senate, Inc.	
Full Name (Last, First, Middle Initial) A. In Engelhardt	
Mailing Address 901 Kent Road	Date of Receipt M M / D D / Y Y Y Y 10 / 10 / 2004
City State Zip Code Ladue MD 63124	Transaction ID: 50118.C54725 Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee C	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)
Name of Employer Occupation Receipt For: X Primary General Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00	
Full Name (Last, First, Middle Initial) B. Lawrence Finner	
Mailing Address 4918 Williams Court Lane	Date of Receipt M M / D D / Y Y Y Y 10 / 10 / 2004
City State Zip Code Houston TX 77081	Transaction ID: 50118.C54725 Amount of Each Receipt this Period 350.00
FEC ID number of contributing federal political committee C	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)
Name of Employer Occupation Hayes & Boone Partner Receipt For: X Primary General Other (specify) ▼ Election Cycle-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) C. Shanab Khatam	
Mailing Address 705 Falls Landing Ct.	Date of Receipt M M / D D / Y Y Y Y 12 / 05 / 2004
City State Zip Code Alpharetta GA 30022	Transaction ID: 50118.C54758 Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee C	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)
Name of Employer Occupation Structural Design, Inc. President Receipt For: X Primary General Other (specify) ▼ Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) .....	2850.00
TOTAL This Period (last page this line number only) .....	

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 39  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full) Talent for Senate, Inc.	
Full Name (Last, First, Middle Initial) A. Kasra Nejat	
Mailing Address 903 Clela Drive	
City Manchester	State Zip Code MO 63021-
FEC ID number of contributing federal political committee C	
Name of Employer St. Johns Mercy	Occupation Nurse
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00
Date of Receipt M M / D D / Y Y Y Y 12 / 05 / 2004	
Transaction ID: 50118.C54754	
Amount of Each Receipt this Period 1000.00	
Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)1a-1)	
Full Name (Last, First, Middle Initial) B. Kasra Nejat	
Mailing Address 903 Clela Drive	
City Manchester	State Zip Code MO 63021-
FEC ID number of contributing federal political committee C	
Name of Employer St. Johns Mercy	Occupation Nurse
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00
Date of Receipt M M / D D / Y Y Y Y 12 / 05 / 2004	
Transaction ID: 50118.C54753	
Amount of Each Receipt this Period 500.00	
Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)1a-1)	
Full Name (Last, First, Middle Initial) C. Thomas Oakley	
Mailing Address P.O. Box 909	
City Quincy	State Zip Code IL 62305-
FEC ID number of contributing federal political committee C	
Name of Employer Quincy Newspapers Inc	Occupation President
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00
Date of Receipt M M / D D / Y Y Y Y 12 / 01 / 2004	
Transaction ID: 50118.C54745	
Amount of Each Receipt this Period 250.00	
Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)1a-1)	
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶ <b>1750.00</b>	
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER: PAGE 13 / 39  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Talent for Senate, Inc.

Full Name (Last, First, Middle Initial) <b>A. John Rude</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 10 / 2004	
Mailing Address 7350 Huckleberry Lane		Transaction ID: 50118.C54724	
City State Zip Code Cincinnati OH 45242	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(l)(4)41a-1)	
Name of Employer Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 550.00		

Full Name (Last, First, Middle Initial) <b>B. Majid Saideghpour</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 01 / 2004	
Mailing Address 500 Kendall Street		Transaction ID: 50118.C54750	
City State Zip Code Cambridge MA 02142	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(l)(4)41a-1)	
Name of Employer Genzyme Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Specialist Election Cycle-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>C. Saied Sejad</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 05 / 2004	
Mailing Address P.O. Box 3888		Transaction ID: 50118.C54757	
City State Zip Code Kansas City KS 66103	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(l)(4)41a-1)	
Name of Employer Self Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Physician Election Cycle-to-Date ▼ 2000.00		

SUBTOTAL of Receipts This Page (optional) ..... ▶	<b>3200.00</b>
TOTAL This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER: PAGE 14 / 30  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full) Talent for Senata, Inc.	
Full Name (Last, First, Middle Initial) Azari Shahmary	
Mailing Address 1535 Hummingbird Hill	
City Ellisville	State Zip Code MO 63011-
FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Biotech Biologica	Occupation Microbiologist
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00
Date of Receipt M / D / Y Y Y Y 12 / 05 / 2004	
Transaction ID: 50118.C54756	
Amount of Each Receipt this Period 1000.00	
Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1a-1))	
Full Name (Last, First, Middle Initial) Zohreh Talebizadeh	
Mailing Address 2401 Gilham Road	
City Kansas City	State Zip Code MO 64108-
FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Children's Mercy	Occupation Physician
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00
Date of Receipt M / D / Y Y Y Y 12 / 05 / 2004	
Transaction ID: 50118.C54751	
Amount of Each Receipt this Period 1000.00	
Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1a-1))	
Full Name (Last, First, Middle Initial) Peter Yeh	
Mailing Address 3131 Riviera Drive	
City Burlingame	State Zip Code CA 94010-
FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer	Occupation
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00
Date of Receipt M / D / Y Y Y Y 11 / 15 / 2004	
Transaction ID: 50118.C54737	
Amount of Each Receipt this Period 1000.00	
Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1a-1))	
<b>SUBTOTAL</b> of Receipts This Page (optional) ▶ <b>3000.00</b>	
<b>TOTAL</b> This Period (last page this line number only) ▶ <b>15350.00</b>	

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

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

FOR LINE NUMBER: PAGE 15 / 39  
(check only one)  
11a  11b  11c  11d   
12  13a  13b  14  15

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NAME OF COMMITTEE (In Full) Talent for Senate, Inc.			
Full Name (Last, First, Middle Initial) A. Commerce Bank		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2004	
Mailing Address 8000 Forsyth Blvd.		Transaction ID: 50118.C54753	
City Saint Louis	State MO	Zip Code 63105-	Amount of Each Receipt this Period 1.47
FEC ID number of contributing federal political committee C		Other Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer	Occupation	953.81	
Receipt For: X Primary General Other (specify) ▼	Election Cycle-to-Date ▼		
Full Name (Last, First, Middle Initial) B. The Business Bank Of St. Louis		Date of Receipt M M / D D / Y Y Y Y 10 / 01 / 2004	
Mailing Address 8000 Maryland Avenue, Suite 100		Transaction ID: 50118.C54759	
City Clayton	State MO	Zip Code 63105-	Amount of Each Receipt this Period 434.20
FEC ID number of contributing federal political committee C		Other Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer	Occupation	1994.43	
Receipt For: X Primary General Other (specify) ▼	Election Cycle-to-Date ▼		
Full Name (Last, First, Middle Initial) C. The Business Bank Of St. Louis		Date of Receipt M M / D D / Y Y Y Y 10 / 29 / 2004	
Mailing Address 8000 Maryland Avenue, Suite 100		Transaction ID: 50118.C54760	
City Clayton	State MO	Zip Code 63105-	Amount of Each Receipt this Period 420.45
FEC ID number of contributing federal political committee C		Other Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer	Occupation	2414.88	
Receipt For: X Primary General Other (specify) ▼	Election Cycle-to-Date ▼		
<b>SUBTOTAL of Receipts This Page (optional)</b> .....		<b>856.12</b>	
<b>TOTAL This Period (last page this line number only)</b> .....			

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

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

FOR LINE NUMBER: PAGE 16 / 39  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full) Talent for Senate, Inc.	
Full Name (Last, First, Middle Initial) A. The Business Bank Of St. Louis	
Mailing Address 8000 Maryland Avenue, Suite 100	
City Clayton	State Zip Code MO 63105-
FEC ID number of contributing federal political committee <b>C</b>	
Name of Employer	Occupation
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2819.19
Date of Receipt M M / D D / Y Y Y Y 11 30 2004	
Transaction ID: 50118.C54761	
Amount of Each Receipt this Period 404.31	
Other Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1a-1))	
Full Name (Last, First, Middle Initial) B. The Business Bank Of St. Louis	
Mailing Address 8000 Maryland Avenue, Suite 100	
City Clayton	State Zip Code MO 63105-
FEC ID number of contributing federal political committee <b>C</b>	
Name of Employer	Occupation
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 3180.83
Date of Receipt M M / D D / Y Y Y Y 12 31 2004	
Transaction ID: 50118.C54762	
Amount of Each Receipt this Period 361.74	
Other Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1a-1))	

SUBTOTAL of Receipts This Page (optional)	766.05
TOTAL This Period (last page this line number only)	1622.17



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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)  
Talent for Senate, Inc.

**A.** Full Name (Last, First, Middle Initial)  
A S & M Transcription Service

Transaction ID: 50118.E2180  
Date of Disbursement  
11 / 08 / 2004

Mailing Address 7903 Lytle Lane

City Dittmer State MO Zip Code 63023-  
Amount of Each Disbursement this Period 162.98

Purpose of Disbursement  
TRANSCRIPTION SERVICE  
Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought: House Senate President  
Disbursement For: Primary General Other (specify) ▼  
Category/Type: TRANSCRIPTION SERVICE

State: District:

**B.** Full Name (Last, First, Middle Initial)  
A S & M Transcription Service

Transaction ID: 50118.E2198  
Date of Disbursement  
11 / 22 / 2004

Mailing Address 7903 Lytle Lane

City Dittmer State MO Zip Code 63023-  
Amount of Each Disbursement this Period 49.14

Purpose of Disbursement  
TRANSCRIPTION SERVICE  
Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought: House Senate President  
Disbursement For: Primary General Other (specify) ▼  
Category/Type: TRANSCRIPTION SERVICE

State: District:

**C.** Full Name (Last, First, Middle Initial)  
Accent Press, Inc.

Transaction ID: 50118.E2202  
Date of Disbursement  
12 / 06 / 2004

Mailing Address 318 Tiger Lane

City Columbia State MO Zip Code 65203-  
Amount of Each Disbursement this Period 300.69

Purpose of Disbursement  
PRINTING  
Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought: House Senate President  
Disbursement For: Primary General Other (specify) ▼  
Category/Type: PRINTING

State: District:

**SUBTOTAL** of Disbursements This Page (optional) ..... **512.79**

**TOTAL** This Period (last page this line number only) ..... **512.79**

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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)  
Talent for Senate, Inc.

Full Name (Last, First, Middle Initial)

**A. Capital Campaigns**

Mailing Address 11150 Santa Monica Blvd., #250

City Los Angeles State CA Zip Code 90025-

Purpose of Disbursement  
FUNDRAISING CONSULTANT  
Candidate Name

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

State District: Full Name (Last, First, Middle Initial)

**B. Capital Campaigns**

Mailing Address 11150 Santa Monica Blvd., #250

City Los Angeles State CA Zip Code 90025-

Purpose of Disbursement  
FUNDRAISING CONSULTANT  
Candidate Name

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

State District: Full Name (Last, First, Middle Initial)

**C. Cingular Wireless**

Mailing Address P.O. Box 830069

City Dallas State TX Zip Code 75263-

Purpose of Disbursement  
MOBILE PHONE  
Candidate Name

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

State District: Full Name (Last, First, Middle Initial)

Transaction ID: 50118.E2167

Date of Disbursement  
M D Y 10 06 2004

Amount of Each Disbursement this Period

124.58

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Category/  
Type

FUNDRAISING CONSULTANT

Transaction ID: 50118.E2200

Date of Disbursement  
M D Y 12 06 2004

Amount of Each Disbursement this Period

514.58

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Category/  
Type

FUNDRAISING CONSULTANT

Transaction ID: 50118.E2172

Date of Disbursement  
M D Y 10 22 2004

Amount of Each Disbursement this Period

321.38

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Category/  
Type

MOBILE PHONE

SUBTOTAL of Disbursements This Page (optional) ▶

960.52

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (if Full)  
Talent for Senate, Inc.

Full Name (Last, First, Middle Initial)  
**A. Cingular Wireless**

Transaction ID: 50118.E2189  
Date of Disbursement  
11 / 18 / 2004

Mailing Address P.O. Box 830069  
City Dallas State TX Zip Code 75263-  
Purpose of Disbursement MOBILE PHONE  
Candidate Name  
Amount of Each Disbursement this Period 323.16  
Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  
Category/Type MOBILE PHONE  
Office Sought: House Senate President Disbursement For: Primary General Other (specify) ▼  
State: District:

Full Name (Last, First, Middle Initial)  
**B. Collector of Revenue**

Transaction ID: 50118.E2204  
Date of Disbursement  
12 / 06 / 2004

Mailing Address  
City Saint Louis State MO Zip Code 63105-  
Purpose of Disbursement TAXES  
Candidate Name  
Amount of Each Disbursement this Period 114.75  
Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  
Category/Type TAXES  
Office Sought: House Senate President Disbursement For: Primary General Other (specify) ▼  
State: District:

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

Transaction ID: 50118.E2208  
Date of Disbursement  
12 / 21 / 2004

Mailing Address 8064 Watson Road  
City Saint Louis State MO Zip Code 63119-  
Purpose of Disbursement POSTAGE  
Candidate Name  
Amount of Each Disbursement this Period 4200.00  
Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  
Category/Type POSTAGE  
Office Sought: House Senate President Disbursement For: Primary General Other (specify) ▼  
State: District:

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ 4637.91

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)  
Talent for Senate, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Jefferson City Flying Service

Mailing Address 501 Airport Road

City Jefferson City State MO Zip Code 65101-

Purpose of Disbursement CHARTER AIRFARE

Candidate Name

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

State: District:

Transaction ID: 50118.E2185  
Date of Disbursement 11 18 2004

Amount of Each Disbursement this Period 4028.03

Category/Type CHARTER AIRFARE

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**B.** Full Name (Last, First, Middle Initial)  
American Group Tours

Mailing Address 1001 Sibley Memorial Highway, Suit

City Saint Paul State MN Zip Code 55118-

Purpose of Disbursement AIRFARE

Candidate Name

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

State: District:

Transaction ID: 50118.E2185  
Date of Disbursement 10 01 2004

Amount of Each Disbursement this Period 380.70

Category/Type AIRFARE

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**C.** Full Name (Last, First, Middle Initial)  
American Group Tours

Mailing Address 1001 Sibley Memorial Highway, Suit

City Saint Paul State MN Zip Code 55118-

Purpose of Disbursement AIRFARE

Candidate Name

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

State: District:

Transaction ID: 50118.E2181  
Date of Disbursement 11 08 2004

Amount of Each Disbursement this Period 532.20

Category/Type AIRFARE

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ **4950.93**

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)  
Talent for Senate, Inc.

**A. American Group Tours**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address 1001 Sibley Memorial Highway, Suit \_\_\_\_\_

City Saint Paul State MN Zip Code 55118-

Purpose of Disbursement AIRFARE

Candidate Name \_\_\_\_\_

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District: \_\_\_\_\_

Transaction ID: 50118.E2186  
Date of Disbursement 11 18 2004

Amount of Each Disbursement this Period 1017.58

Category/Type AIRFARE

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**B. Jo Keatley**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address 811 W. 81st Terrace \_\_\_\_\_

City Kansas City State MO Zip Code 64113-

Purpose of Disbursement TRAVEL

Candidate Name \_\_\_\_\_

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District: \_\_\_\_\_

Transaction ID: 50118.E2177  
Date of Disbursement 11 08 2004

Amount of Each Disbursement this Period 37.50

Category/Type TRAVEL

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**C. R. Gregg Keller**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address 705 Westwood, Apt. 2B \_\_\_\_\_

City Saint Louis State MO Zip Code 63105-

Purpose of Disbursement PAYROLL

Candidate Name \_\_\_\_\_

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District: \_\_\_\_\_

Transaction ID: 50118.E2209  
Date of Disbursement 12 22 2004

Amount of Each Disbursement this Period 2469.58

Category/Type PAYROLL

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL of Disbursements This Page (optional) 3524.66**

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

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

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

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(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)  
Talent for Senate, Inc.

**A.** Full Name (Last, First, Middle Initial)  
R. Gregg Keller

Mailing Address 705 Westwood, Apt. 2B

City Saint Louis State MO Zip Code 63105-

Purpose of Disbursement: PAYROLL

Candidate Name

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

State District:

Transaction ID: 50118.E2217  
Date of Disbursement: 12 / 31 / 2004

Amount of Each Disbursement this Period: 923.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Category/Type: PAYROLL

**B.** Full Name (Last, First, Middle Initial)  
La Colline Restaurant

Mailing Address 400 North Capitol Street, NW Suite 175

City Washington State DC Zip Code 20001-

Purpose of Disbursement: FOOD/BEVERAGE

Candidate Name

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

State District:

Transaction ID: 50118.E2168  
Date of Disbursement: 10 / 01 / 2004

Amount of Each Disbursement this Period: 1950.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Category/Type: FOOD/BEVERAGE

**C.** Full Name (Last, First, Middle Initial)  
La Colline Restaurant

Mailing Address 400 North Capitol Street, NW Suite 175

City Washington State DC Zip Code 20001-

Purpose of Disbursement: FOOD/BEVERAGE

Candidate Name

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

State District:

Transaction ID: 50118.E2182  
Date of Disbursement: 11 / 08 / 2004

Amount of Each Disbursement this Period: 117.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Category/Type: FOOD/BEVERAGE

SUBTOTAL of Disbursements This Page (optional) ..... 2990.50

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)  
Talent for Senate, Inc

**A. La Colline Restaurant**

Full Name (Last, First, Middle Initial) \_\_\_\_\_  
Transaction ID: 50118.E2201  
Date of Disbursement \_\_\_\_\_  
M M / D D / Y Y Y Y  
12 / 05 / 2004

Mailing Address 400 North Capitol Street, NW  
Suite 175

City Washington State DC Zip Code 20001-

Purpose of Disbursement FOOD/BEVERAGE  
Candidate Name \_\_\_\_\_

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

State: District: \_\_\_\_\_

Amount of Each Disbursement this Period 494.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Category/ Type FOOD/BEVERAGE

**B. Mason Enterprises, LLC**

Full Name (Last, First, Middle Initial) \_\_\_\_\_  
Transaction ID: 50118.E2154  
Date of Disbursement \_\_\_\_\_  
M M / D D / Y Y Y Y  
10 / 15 / 2004

Mailing Address 9378 Olive Blvd., Suite 206

City Saint Louis State MO Zip Code 63132-

Purpose of Disbursement COMPLIANCE  
Candidate Name \_\_\_\_\_

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

State: District: \_\_\_\_\_

Amount of Each Disbursement this Period 1250.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Category/ Type COMPLIANCE

**C. Mason Enterprises, LLC**

Full Name (Last, First, Middle Initial) \_\_\_\_\_  
Transaction ID: 50118.E2184  
Date of Disbursement \_\_\_\_\_  
M M / D D / Y Y Y Y  
11 / 11 / 2004

Mailing Address 9378 Olive Blvd., Suite 206

City Saint Louis State MO Zip Code 63132-

Purpose of Disbursement COMPLIANCE  
Candidate Name \_\_\_\_\_

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

State: District: \_\_\_\_\_

Amount of Each Disbursement this Period 1250.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Category/ Type COMPLIANCE

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ **2994.00**

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Talent for Senate, Inc.

Full Name (Last, First, Middle Initial) <b>A. Mason Enterprises, LLC</b> Mailing Address 8378 Olive Blvd., Suite 208 City Saint Louis State MO Zip Code 63132 Purpose of Disbursement COMPLIANCE Candidate Name Office Sought: House Senate President State District:	Disbursement For: Primary General Other (specify) ▼	Transaction ID: 50118.E2207 Date of Disbursement M / D / Y 12 / 13 / 2004 Amount of Each Disbursement this Period 1250.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 COMPLIANCE
--	---	--

Full Name (Last, First, Middle Initial) <b>B. MBNA Bank</b> Mailing Address City State Zip Code Purpose of Disbursement TRAVEL Candidate Name Office Sought: House Senate President State District:	Disbursement For: Primary General Other (specify) ▼	Transaction ID: 50118.E2194 Date of Disbursement M / D / Y 11 / 19 / 2004 Amount of Each Disbursement this Period 337.40 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 TRAVEL
--	---	---

Full Name (Last, First, Middle Initial) <b>C. Daniel Pfeifer</b> Mailing Address 8 Connemara Rd. City Saint Peters State MO Zip Code 63375 Purpose of Disbursement PAYROLL Candidate Name Office Sought: House Senate President State District:	Disbursement For: Primary General Other (specify) ▼	Transaction ID: 50118.E2218 Date of Disbursement M / D / Y 12 / 31 / 2004 Amount of Each Disbursement this Period 888.17 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PAYROLL
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**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ **2475.57**

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



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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)  
Talent for Senate, Inc.

Full Name (Last, First, Middle Initial)  
A. Postmaster

Mailing Address Olivette Branch

City State Zip Code  
Saint Louis MO 63132-

Purpose of Disbursement  
POSTAGE

Candidate Name

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

State: District:

Transaction ID: 50118.E2197

Date of Disbursement  
M D Y Y Y Y  
12 01 2004

Amount of Each Disbursement this Period

74.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

POSTAGE

Full Name (Last, First, Middle Initial)  
B. Automatic Data Processing

Mailing Address 12200 Weber Hill Road

City State Zip Code  
Saint Louis MO 63127-

Purpose of Disbursement  
PROCESSING FEE

Candidate Name

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

State: District:

Transaction ID: 50118.E2223

Date of Disbursement  
M D Y Y Y Y  
10 27 2004

Amount of Each Disbursement this Period

68.70

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PROCESSING FEE

Full Name (Last, First, Middle Initial)  
C. Automatic Data Processing

Mailing Address 12200 Weber Hill Road

City State Zip Code  
Saint Louis MO 63127-

Purpose of Disbursement  
PROCESSING FEE

Candidate Name

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

State: District:

Transaction ID: 50118.E2224

Date of Disbursement  
M D Y Y Y Y  
11 30 2004

Amount of Each Disbursement this Period

60.70

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PROCESSING FEE

SUBTOTAL of Disbursements This Page (optional) ▶

203.40

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

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

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

FOR LINE NUMBER:  
(check only one)

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17     18     19a     19b  
 20a     20b     20c     21

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)  
Talent for Senate, Inc.

Full Name (Last, First, Middle Initial)

A. Internal Revenue Service

Mailing Address

City Ogden State UT Zip Code 84201-

Purpose of Disbursement

TAXES

Candidate Name

Office Sought: House Senate President

State: District

Full Name (Last, First, Middle Initial)

B. Internal Revenue Service

Mailing Address

City Ogden State UT Zip Code 84201-

Purpose of Disbursement

TAXES

Candidate Name

Office Sought: House Senate President

State: District

Full Name (Last, First, Middle Initial)

C. Internal Revenue Service

Mailing Address

City Ogden State UT Zip Code 84201-

Purpose of Disbursement

TAXES

Candidate Name

Office Sought: House Senate President

State: District

Transaction ID: 50118.E2213

Date of Disbursement

10 / 31 / 2004

Amount of Each Disbursement this Period

161.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Category/  
Type

TAXES

Transaction ID: 50118.E2214

Date of Disbursement

11 / 30 / 2004

Amount of Each Disbursement this Period

161.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Category/  
Type

TAXES

Transaction ID: 50118.E2221

Date of Disbursement

12 / 31 / 2004

Amount of Each Disbursement this Period

516.33

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Category/  
Type

TAXES

SUBTOTAL of Disbursements This Page (optional) ▶

838.33

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Talent for Senate, Inc.

**A.** Full Name (Last, First, Middle Initial) Southwestern Bell  
 Mailing Address P.O. Box 630059  
 City Dallas State TX Zip Code 75263-  
 Purpose of Disbursement TELEPHONE SERVICE  
 Candidate Name  
 Office Sought: House Senate President Disbursement For: Primary General Other (specify) ▼  
 State: District

Transaction ID: 50118.E2171  
 Date of Disbursement 10 / 22 / 2004  
 Amount of Each Disbursement this Period 7.13  
 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  
 Category/Type TELEPHONE SERVICE

**B.** Full Name (Last, First, Middle Initial) Southwestern Bell  
 Mailing Address P.O. Box 630059  
 City Dallas State TX Zip Code 75263-  
 Purpose of Disbursement TELEPHONE SERVICE  
 Candidate Name  
 Office Sought: House Senate President Disbursement For: Primary General Other (specify) ▼  
 State: District

Transaction ID: 50118.E2178  
 Date of Disbursement 11 / 08 / 2004  
 Amount of Each Disbursement this Period 132.71  
 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  
 Category/Type TELEPHONE SERVICE

**C.** Full Name (Last, First, Middle Initial) Southwestern Bell  
 Mailing Address P.O. Box 630059  
 City Dallas State TX Zip Code 75263-  
 Purpose of Disbursement TELEPHONE SERVICE  
 Candidate Name  
 Office Sought: House Senate President Disbursement For: Primary General Other (specify) ▼  
 State: District

Transaction ID: 50118.E2193  
 Date of Disbursement 11 / 18 / 2004  
 Amount of Each Disbursement this Period 21.74  
 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  
 Category/Type TELEPHONE SERVICE

**SUBTOTAL** of Disbursements This Page (optional) **161.58**  
**TOTAL** This Period (last page this line number only)

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

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

FDR LINE NUMBER.  
(check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)  
Talent for Senate, Inc.

**A. Southwestern Bell**

Full Name (Last, First, Middle Initial) \_\_\_\_\_  
Transaction ID: 50118.E2205  
Date of Disbursement \_\_\_\_\_  
Mailing Address P.O. Box 630059  
City Dallas State TX Zip Code 75263-  
Purpose of Disbursement TELEPHONE SERVICE  
Candidate Name \_\_\_\_\_  
Amount of Each Disbursement this Period 164.49  
Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  
Office Sought: House Senate President Disbursement For: Primary General Other (specify) ▼  
State: District: TELEPHONE SERVICE

**B. Steve Gordon & Assoc.**

Full Name (Last, First, Middle Initial) \_\_\_\_\_  
Transaction ID: 50118.E2189  
Date of Disbursement \_\_\_\_\_  
Mailing Address 507 Capitol Court NE, #100  
City Washington State DC Zip Code 20002-  
Purpose of Disbursement FUNDRAISING CONSULTANT  
Candidate Name \_\_\_\_\_  
Amount of Each Disbursement this Period 4000.00  
Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  
Office Sought: House Senate President Disbursement For: Primary General Other (specify) ▼  
State: District: FUNDRAISING CONSULTANT

**C. Steve Gordon & Assoc.**

Full Name (Last, First, Middle Initial) \_\_\_\_\_  
Transaction ID: 50118.E2188  
Date of Disbursement \_\_\_\_\_  
Mailing Address 507 Capitol Court NE, #100  
City Washington State DC Zip Code 20002-  
Purpose of Disbursement FUNDRAISING CONSULTANT  
Candidate Name \_\_\_\_\_  
Amount of Each Disbursement this Period 881.89  
Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  
Office Sought: House Senate President Disbursement For: Primary General Other (specify) ▼  
State: District: FUNDRAISING CONSULTANT

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 5046.38  
TOTAL This Period (last page this line number only) ..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)  
Talent for Senate, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Steve Gordon & Assoc.

Mailing Address 507 Capitol Court NE, #100

City Washington State DC Zip Code 20002-

Purpose of Disbursement FUNDRAISING CONSULTANT

Candidate Name

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

State: District

Transaction ID: 50118.E2176  
Date of Disbursement 11 / 08 / 2004

Amount of Each Disbursement this Period 70.00

Category/Type Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  
FUNDRAISING CONSULTANT

**B.** Full Name (Last, First, Middle Initial)  
Steve Gordon & Assoc.

Mailing Address 507 Capitol Court NE, #100

City Washington State DC Zip Code 20002-

Purpose of Disbursement FUNDRAISING CONSULTANT

Candidate Name

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

State: District

Transaction ID: 50118.E2179  
Date of Disbursement 11 / 08 / 2004

Amount of Each Disbursement this Period 921.98

Category/Type Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  
FUNDRAISING CONSULTANT

**C.** Full Name (Last, First, Middle Initial)  
Steve Gordon & Assoc.

Mailing Address 507 Capitol Court NE, #100

City Washington State DC Zip Code 20002-

Purpose of Disbursement FUNDRAISING CONSULTANT

Candidate Name

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

State: District

Transaction ID: 50118.E2175  
Date of Disbursement 11 / 08 / 2004

Amount of Each Disbursement this Period 4000.00

Category/Type Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  
FUNDRAISING CONSULTANT

**SUBTOTAL** of Disbursements This Page (optional) ..... **4991.98**

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)  
Talent for Senate, Inc.

**A.** Steve Gordon & Assoc.

Transaction ID: 50118.E2188  
Date of Disbursement: 11 / 18 / 2004

Mailing Address: 507 Capitol Court NE, #100  
City: Washington, State: DC, Zip Code: 20002-  
Amount of Each Disbursement this Period: 502.88

Purpose of Disbursement: FUNDRAISING CONSULTANT  
Candidate Name: \_\_\_\_\_  
Category/Type: Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House / Senate / President  
Disbursement For: Primary / General / Other (specify) ▼  
State: \_\_\_\_\_ District: \_\_\_\_\_  
FUNDRAISING CONSULTANT

**B.** Steve Gordon & Assoc.

Transaction ID: 50118.E2198  
Date of Disbursement: 12 / 06 / 2004

Mailing Address: 507 Capitol Court NE, #100  
City: Washington, State: DC, Zip Code: 20002-  
Amount of Each Disbursement this Period: 4000.00

Purpose of Disbursement: FUNDRAISING CONSULTANT  
Candidate Name: \_\_\_\_\_  
Category/Type: Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House / Senate / President  
Disbursement For: Primary / General / Other (specify) ▼  
State: \_\_\_\_\_ District: \_\_\_\_\_  
FUNDRAISING CONSULTANT

**C.** Steve Gordon & Assoc.

Transaction ID: 50118.E2199  
Date of Disbursement: 12 / 06 / 2004

Mailing Address: 507 Capitol Court NE, #100  
City: Washington, State: DC, Zip Code: 20002-  
Amount of Each Disbursement this Period: 1758.99

Purpose of Disbursement: FUNDRAISING CONSULTANT  
Candidate Name: \_\_\_\_\_  
Category/Type: Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House / Senate / President  
Disbursement For: Primary / General / Other (specify) ▼  
State: \_\_\_\_\_ District: \_\_\_\_\_  
FUNDRAISING CONSULTANT

**SUBTOTAL** of Disbursements This Page (optional) ..... **6261.67**

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)  
Talent for Senate, Inc.

A. Full Name (Last, First, Middle Initial)  
Telecommunication Systems, Inc.

Transaction ID: 50118.E2170  
Date of Disbursement

Mailing Address Dept. AT 49927

M N D Y Y Y  
1 0 2 1 2 0 0 4

City State Zip Code  
Atlanta GA 31192-

Amount of Each Disbursement this Period

Purpose of Disbursement  
MOBILE PHONE  
Candidate Name

46.95  
Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Office Sought: House Senate President  
State District

Disbursement For: Primary General  
Other (specify) ▼

Category/  
Type

MOBILE PHONE

B. Full Name (Last, First, Middle Initial)  
Telecommunication Systems, Inc.

Transaction ID: 50118.E2190  
Date of Disbursement

Mailing Address Dept. AT 49927

M N D Y Y Y  
1 1 1 8 2 0 0 4

City State Zip Code  
Atlanta GA 31192-

Amount of Each Disbursement this Period

Purpose of Disbursement  
MOBILE PHONE  
Candidate Name

46.95  
Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Office Sought: House Senate President  
State District

Disbursement For: Primary General  
Other (specify) ▼

Category/  
Type

MOBILE PHONE

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

Transaction ID: 50118.E2218  
Date of Disbursement

Mailing Address 831 Simmons Ave.

M N D Y Y Y  
1 0 3 1 2 0 0 4

City State Zip Code  
Saint Louis MO 63122-

Amount of Each Disbursement this Period

Purpose of Disbursement  
PAYROLL  
Candidate Name

923.50  
Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Office Sought: House Senate President  
State District

Disbursement For: Primary General  
Other (specify) ▼

Category/  
Type

PAYROLL

SUBTOTAL of Disbursements This Page (optional) ▶

1017.40

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

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

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

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(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)  
Talent for Senate, Inc.

Full Name (Last, First, Middle Initial) <b>A. Brett Thompson</b>		Transaction ID: 50118.E2219	
Mailing Address 831 Simmons Ave.		Date of Disbursement	
City Saint Louis State MO Zip Code 63122-		11 / 30 / 2004	
Purpose of Disbursement PAYROLL		Amount of Each Disbursement this Period 923.50	
Candidate Name		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	Category/ Type PAYROLL	
State: District			

Full Name (Last, First, Middle Initial) <b>B. Brett Thompson</b>		Transaction ID: 50118.E2220	
Mailing Address 831 Simmons Ave.		Date of Disbursement	
City Saint Louis State MO Zip Code 63122-		12 / 31 / 2004	
Purpose of Disbursement PAYROLL		Amount of Each Disbursement this Period 923.50	
Candidate Name		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	Category/ Type PAYROLL	
State: District			

Full Name (Last, First, Middle Initial) <b>C. TriCAL, Inc.</b>		Transaction ID: 50118.E2187	
Mailing Address P.O. Box 1327		Date of Disbursement	
City Hollister State CA Zip Code 95024-		11 / 18 / 2004	
Purpose of Disbursement CHARTER AIRFARE		Amount of Each Disbursement this Period 364.70	
Candidate Name		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	Category/ Type CHARTER AIRFARE	
State: District			

**SUBTOTAL of Disbursements This Page (optional) 2211.70**

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



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

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

FOR LINE NUMBER:  
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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (in full)  
Talent for Senale, Inc.

Full Name (Last, First, Middle Initial) A. U.S. Senate Restaurant		Transaction ID: 50118.E2192
Mailing Address United States Capitol		Date of Disbursement M N / D D / Y Y Y Y 11 / 18 / 2004
City Washington	State DC	Zip Code 20510-
Purpose of Disbursement FOOD/BEVERAGE	Candidate Name	Amount of Each Disbursement this Period 38.46
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FOOD/BEVERAGE
State: District:		

Full Name (Last, First, Middle Initial) B. U.S. Senate Restaurant		Transaction ID: 50118.E2206
Mailing Address United States Capitol		Date of Disbursement M N / D D / Y Y Y Y 12 / 08 / 2004
City Washington	State DC	Zip Code 20510-
Purpose of Disbursement FOOD/BEVERAGE	Candidate Name	Amount of Each Disbursement this Period 59.19
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FOOD/BEVERAGE
State: District:		

Full Name (Last, First, Middle Initial) C. Visa Businesscard		Transaction ID: 50118.E2153
Mailing Address P.O. Box 13607		Date of Disbursement M N / D D / Y Y Y Y 10 / 12 / 2004
City Kansas City	State MO	Zip Code 64189-
Purpose of Disbursement SEE MEMO	Candidate Name	Amount of Each Disbursement this Period 3419.94
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SEE MEMO
State: District:		

**SUBTOTAL** of Disbursements This Page (optional) ..... **3518.59**

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

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

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

FOR LINE NUMBER  
(check only one)

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17  
20a  18  
20b  19a  
20c  19b  
21

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NAME OF COMMITTEE (In Full)  
Talent for Senate, Inc.

Full Name (Last, First, Middle Initial)  
**A. Visa Businesscard**  
Transaction ID: 50118.E2183  
Date of Disbursement  
M / D / Y 11 / 06 / 2004  
Mailing Address P.O. Box 13607  
City Kansas City State MO Zip Code 64199-  
Purpose of Disbursement SEE MEMO  
Candidate Name  
Amount of Each Disbursement this Period 1214.58  
Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  
Office Sought: House Senate President  
Disbursement For: Primary General Other (specify) ▼  
State: District: SEE MEMO

Full Name (Last, First, Middle Initial)  
**B. Visa Businesscard**  
Transaction ID: 50118.E2203  
Date of Disbursement  
M / D / Y 12 / 06 / 2004  
Mailing Address P.O. Box 13607  
City Kansas City State MO Zip Code 64199-  
Purpose of Disbursement SEE MEMO  
Candidate Name  
Amount of Each Disbursement this Period 1511.29  
Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  
Office Sought: House Senate President  
Disbursement For: Primary General Other (specify) ▼  
State: District: SEE MEMO

**SUBTOTAL** of Disbursements This Page (optional) ..... ► **2725.85**  
**TOTAL** This Period (last page this line number only) ..... ► **50023.76**

Travel for Senate, Inc.		VISA Memo Schedule				
Date	Amount	Vendor	Purpose	Address	City, State, Zip	Amount
10/12/2004	\$3,419.94	American Airlines New York	Travel Lodging	4205 Arica Carter Blvd. 270 West 43rd Street	Fort Worth, TX 76155 New York, NY 10036	\$1,005.40 \$2,074.20
11/18/2004	\$1,214.68	Southwest Airlines The Fairmont Hotel	Travel Lodging	2412 WINSHIP LN 170 South Market Street	San Diego, CA 92101 San Jose, CA 95113	\$506.10 \$205.39
12/6/2004	\$1,511.29	Northwest Airlines Cingular Wireless Westin Hotels	Travel Mobile Phone Lodging	7500 Airline Drive P.O. Box 830665 Crowll Center	Minneapolis, MN 55453 Dallas, TX 75263 Kansas City, MO 64116	\$385.39 \$320.81 \$829.20

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21
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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)  
Talent for Senate, Inc.

Full Name (Last, First, Middle Initial)

A. Commerce Bank

Mailing Address 8000 Forayth Blvd.

City State Zip Code  
Saint Louis MO 63105

Purpose of Disbursement  
ACCOUNT FEE  
Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For:  
 Primary  General  
Other (specify) ▼

Transaction ID: 50118.E2212

Date of Disbursement

12 / 31 / 2004

Amount of Each Disbursement this Period

82.50

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. The Richard Burr Committee

Mailing Address P.O. Box 5928

City State Zip Code  
Winston Salem NC 27113

Purpose of Disbursement  
CONTRIBUTION  
Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For:  
 Primary  General  
Other (specify) ▼

Transaction ID: 50118.E2158

Date of Disbursement

10 / 01 / 2004

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Mel Martinez For Senate

Mailing Address P.O. Box 536176

City State Zip Code  
Orlando FL 32853

Purpose of Disbursement  
CONTRIBUTION TO U.S. SENATE (FL)  
Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For:  
 Primary  General  
Other (specify) ▼

Transaction ID: 50118.E2163

Date of Disbursement

10 / 01 / 2004

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

2082.50

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input checked="" type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Talent for Senate, Inc.

**A. Pele Coors For Senate**

Full Name (Last, First, Middle Initial) \_\_\_\_\_  
Mailing Address 300 W. Plaza Drive, #175  
City Highland Ranch State CO Zip Code 80129-  
Purpose of Disbursement CONTRIBUTION TO U.S. SENATE (CO)  
Candidate Name \_\_\_\_\_  
Office Sought: House Senate President  
State: District: \_\_\_\_\_  
Disbursement For: Primary X General Other (specify) ▼

Transaction ID: 50118.E2155  
Date of Disbursement 10 / 01 / 2004  
Amount of Each Disbursement this Period 1000.00  
Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**B. John Thune For U.S. Senate**

Full Name (Last, First, Middle Initial) \_\_\_\_\_  
Mailing Address 2908 W. 11th Street  
City Sioux Falls State SD Zip Code 57104-  
Purpose of Disbursement CONTRIBUTION TO U.S. SENATE (SD)  
Candidate Name \_\_\_\_\_  
Office Sought: House Senate President  
State: District: \_\_\_\_\_  
Disbursement For: Primary X General Other (specify) ▼

Transaction ID: 50118.E2162  
Date of Disbursement 10 / 01 / 2004  
Amount of Each Disbursement this Period 1000.00  
Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**C. Lisa Murkowski For U.S. Senate**

Full Name (Last, First, Middle Initial) \_\_\_\_\_  
Mailing Address P.O. Box 100847  
City Anchorage State AK Zip Code 99510-  
Purpose of Disbursement CONTRIBUTION TO U.S. SENATE (AK)  
Candidate Name \_\_\_\_\_  
Office Sought: House Senate President  
State: District: \_\_\_\_\_  
Disbursement For: Primary X General Other (specify) ▼

Transaction ID: 50118.E2164  
Date of Disbursement 10 / 01 / 2004  
Amount of Each Disbursement this Period 1000.00  
Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input checked="" type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Talent for Senate, Inc.

**A. Georgians For Johnny Isakson**

Full Name (Last, First, Middle Initial):  
Mailing Address: 8000 Lake Forrest Drive, #108  
City: Atlanta State: GA Zip Code: 30328-  
Purpose of Disbursement: CONTRIBUTION TO U.S. SENATE (GA)  
Candidate Name:  
Office Sought: House Senate President  
State: District:  
Full Name (Last, First, Middle Initial):  
Disbursement For: Primary X General Other (specify) ▼

Transaction ID: 50118.E2157  
Date of Disbursement: 10 / 01 / 2004  
Amount of Each Disbursement this Period: 1000.00  
Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**B. Missouri Republican Party**

Full Name (Last, First, Middle Initial):  
Mailing Address: 204 E. Dunklin  
City: Jefferson City State: MO Zip Code: 65102-  
Purpose of Disbursement: POLITICAL CONTRIBUTION - EXCESS FUN  
Candidate Name:  
Office Sought: House Senate President  
State: District:  
Full Name (Last, First, Middle Initial):  
Disbursement For: X Primary General Other (specify) ▼

Transaction ID: 50118.E2173  
Date of Disbursement: 10 / 21 / 2004  
Amount of Each Disbursement this Period: 35000.00  
Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**C. Missouri Republican Party**

Full Name (Last, First, Middle Initial):  
Mailing Address: 204 E. Dunklin  
City: Jefferson City State: MO Zip Code: 65102-  
Purpose of Disbursement: POLITICAL CONTRIBUTION - EXCESS FUN  
Candidate Name:  
Office Sought: House Senate President  
State: District:  
Full Name (Last, First, Middle Initial):  
Disbursement For: X Primary General Other (specify) ▼

Transaction ID: 50118.E2174  
Date of Disbursement: 10 / 29 / 2004  
Amount of Each Disbursement this Period: 25000.00  
Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ **61000.00**

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 38 / 39

<input type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input checked="" type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)

Talent for Senate, Inc.

A. Full Name (Last, First, Middle Initial)  
George Nethercutt For Senate

Mailing Address 330 112th Ave, NE #101

City Bellevue State WA Zip Code 98004-

Purpose of Disbursement  
CONTRIBUTION TO U.S. SENATE (WA)  
Candidate Name

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

Transaction ID: 50118.E2158  
Date of Disbursement

M M / D D / Y Y Y Y  
1 0 / 0 1 / 2 0 0 4

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)  
Jim DeMint for Senate Committee

Mailing Address 701 Gervais Street, #150

City Columbia State SC Zip Code 29201-

Purpose of Disbursement  
CONTRIBUTION TO U.S. SENATE (SC)  
Candidate Name

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

Transaction ID: 50118.E2161  
Date of Disbursement

M M / D D / Y Y Y Y  
1 0 / 0 1 / 2 0 0 4

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)  
Tom Coburn For U.S. Senate

Mailing Address 3300 W. Okmulgee  
P.O. Box 977

City Muskogee State OK Zip Code 74401-

Purpose of Disbursement  
CONTRIBUTION TO U.S. SENATE (OK)  
Candidate Name

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

Transaction ID: 50118.E2159  
Date of Disbursement

M M / D D / Y Y Y Y  
1 0 / 0 1 / 2 0 0 4

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	18a	<input type="checkbox"/>	18b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input checked="" type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Talent for Senate, Inc.

Full Name (Last, First, Middle Initial)

A. David Vitter for Senate

Transaction ID: 50118.E2160  
Date of Disbursement

Mailing Address P.O. Box 8175

M / D / Y  
10 / 01 / 2004

City Metairie State LA Zip Code 70011

Amount of Each Disbursement this Period

Purpose of Disbursement:  
CONTRIBUTION TO U.S. SENATE (LA)

1000.00

Candidate Name

Category/  
Type

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 401.53

Office Sought: House  
Senate  
President

Disbursement For:  
Primary X General  
Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

1000.00

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

70082.50





EMILY J. REYNOLDS  
SECRETARY

PAVELA B. GAVIN  
SUPERINTENDENT

HART SENATE OFFICE BUILDING  
SUITE 232  
WASHINGTON, DC 20510-2110  
PHONE: (202) 574-0722

# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

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FEDERAL EXPRESS  
UPS  
DHL  
AIRBORNE EXPRESS  
Postmark

PRIORITY MAIL (NO CONFIRMATION)  
Date of Receipt

FIRST CLASS MAIL  
Date of Receipt

FAX  
Date of Receipt

NO POSTMARK      POSTMARK ILLEGIBLE

OTHER  
Date of Receipt

RD  
Preparer      02-01-05  
Date Prepared

25020060865  
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