



Missouri Ethics Commission  
**COMMITTEE DISCLOSURE REPORT COVER PAGE**

M.E.C. ID NO. C081049

1. DATE OF REPORT  12/3/2008	OFFICE USE ONLY
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INSTRUCTIONS ON REVERSE SIDE

2. FULL NAME OF COMMITTEE  
 HULSHOF FOR GOVERNOR INC

3. COMMITTEE MAILING ADDRESS PO BOX 1347 CITY / STATE / ZIP COLUMBIA MO 65205	4. COMMITTEE TELEPHONE NUMBER  (573) 875-2008
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5. TREASURER'S NAME  
 LANIE G BLACK III

6. TREASURER'S MAILING ADDRESS 671 N 407TH CITY / STATE / ZIP CHARLESTON MO 63834	7. TREASURER'S TELEPHONE NUMBER HOME: (573) 683-4870 WORK:
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8. DEPUTY TREASURER'S NAME  CHECK IF NO DEPUTY TREASURER  
 JOHN E BECKER SR

9. DEPUTY TREASURER'S MAILING ADDRESS 903 OLD HWY 63 N STE C COLUMBIA MO 65201 CITY / STATE / ZIP	10. DEPUTY TREASURER'S TELEPHONE NUMBER HOME: WORK: (573) 815-1150
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11. DATE OF ELECTION 11/4/2008	12. TYPE OF ELECTION ( CHECK ONE ) <input type="radio"/> PRIMARY <input checked="" type="radio"/> GENERAL <input type="radio"/> SPECIAL
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13. TIME PERIOD COVERED BY THIS STATEMENT  
 FROM 10/24/2008 THROUGH 11/29/2008

14. CANDIDATE COMMITTEES ONLY: LIST CANDIDATE'S NAME, ADDRESS, PHONE, OFFICE SOUGHT, POLITICAL SUBDIVISION AND POLITICAL PARTY  
 KENNY HULSHOF  
 24 BINGHAM RD COLUMBIA MO 65203  
 (573) 874-1682  
 GOVERNOR  
 CHECK IF INCUMBENT  
 REPUBLICAN     DEMOCRAT     Null

15. TYPE OF REPORT  
 15 DAYS AFTER CAUCUS NOMINATION  
 COMMITTEE QUARTERLY REPORT  
      Jan 15     Apr 15     Jul 15     Oct 15  
 8 DAYS BEFORE  
 30 DAYS AFTER ELECTION  
 TERMINATION (ATTACH FORM CO-3)  
 SEMIANNUAL DEBT REPORT  
      Jan 15     Jul 15  
 ANNUAL SUPPLEMENTAL, JAN 15  
 15 DAYS AFTER PETITION DEADLINE  
 OTHER 0  
 AMENDING PREVIOUS REPORT DATED \_\_\_\_\_, 20\_\_\_\_

16. COMMITTEE TREASURER'S SIGNATURE  
 I CERTIFY THAT THIS REPORT, COMPRISED OF THIS COVER PAGE AND ALL ATTACHED FORMS, IS COMPLETE, TRUE AND ACCURATE.  
 ELECTRONICALLY FILED Dec 4 2008 4:19PM  
 \_\_\_\_\_  
 TREASURER'S SIGNATURE

17. CANDIDATE'S SIGNATURE ( CANDIDATE COMMITTEES ONLY )  
 I CERTIFY THAT THIS REPORT, COMPRISED OF THIS COVER PAGE AND ALL ATTACHED FORMS, IS COMPLETE, TRUE AND ACCURATE.  
 ELECTRONICALLY FILED Dec 4 2008 4:19PM  
 \_\_\_\_\_  
 CANDIDATE'S SIGNATURE



**Missouri Ethics Commission**  
**REPORT SUMMARY**  
 INSTRUCTIONS ON REVERSE SIDE

NAME OF COMMITTEE	DATE OF REPORT	OFFICE USE ONLY
HULSHOF FOR GOVERNOR INC	12/3/2008	

RECEIPTS	A. THIS PERIOD	B. THIS ELECTION	STATEMENT OF BEGINNING AND ENDING FINANCIAL CONDITION			
1. TOTAL RECEIPTS FOR THIS ELECTION PREVIOUSLY REPORTED		\$ 5,274,605.63	<b>MONEY ON HAND</b>			
2. ALL MONETARY CONTRIBUTIONS RECEIVED THIS PERIOD	\$ 134,987.70					
3. ALL LOANS RECEIVED THIS PERIOD	+ \$ 0.00					
4. MISCELLANEOUS RECEIPTS THIS PERIOD	+ \$ 16,083.65				25. MONEY ON HAND AT THE BEGINNING OF THIS REPORTING PERIOD (INCLUDING FUNDS IN DEPOSITORY, CASH, SAVINGS ACCOUNTS AND ALL OTHER INVESTMENTS)	\$ 597,862.55
5. <b>SUBTOTAL</b> MONETARY RECEIPTS THIS PERIOD (SUM 2A + 3A + 4A)	\$ 151,071.35				26. MONETARY RECEIPTS THIS PERIOD (FROM ITEM 5)	+ \$ 151,071.35
6. IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD	+ \$ 115,135.11				27. MONETARY DISBURSEMENTS MADE THIS PERIOD (SUM 11 + 17 + 24)	- \$ 679,482.07
7. <b>TOTAL</b> ALL RECEIPTS THIS PERIOD (SUM 5A + 6A)	\$ 266,206.46				a) Disbursements By Check \$ 679,482.07 b) Disbursements By Cash \$ 0.00	
8. FUNDS USED FOR REPAYING LOANS THIS PERIOD	- \$ 0.00				28. MONEY ON HAND AT THE CLOSE OF THIS REPORTING PERIOD (SUM 25 + 26 - 27)	\$ 69,451.83
9. <b>TOTAL ALL RECEIPTS THIS ELECTION</b> (SUM 1B + 7A - 8A)		\$ 5,540,812.09			<b>INDEBTEDNESS</b>	
<b>EXPENDITURES</b>			29. OUTSTANDING INDEBTEDNESS AT THE BEGINNING OF THIS PERIOD	\$ 0.00		
10. TOTAL EXPENDITURES FOR THIS ELECTION PREVIOUSLY REPORTED		\$ 4,941,420.85	30. LOANS RECEIVED THIS PERIOD	+ \$ 0.00		
11. EXPENDITURES MADE BY CASH OR CHECK THIS PERIOD	\$ 679,432.07		31. NEW DEBTS INCURRED THIS PERIOD	+ \$ 82,556.02		
12. IN-KIND EXPENDITURES MADE THIS PERIOD	+ \$ 115,135.11		32. PAYMENTS MADE ON LOANS THIS PERIOD	- \$ 0.00		
13. DEBTS INCURRED THIS PERIOD (NOT INCLUDING LOANS)	+ \$ 82,556.02		33. CREDITS RECEIVED ON LOANS THIS PERIOD	- \$ 0.00		
14. <b>TOTAL</b> ALL EXPENDITURES MADE THIS PERIOD (SUM 11A + 12A + 13A)	\$ 877,123.20		34. PAYMENTS MADE THIS PERIOD ON DEBTS INCURRED IN PREVIOUS PERIOD	- \$ 0.00		
15. <b>TOTAL EXPENDITURES THIS ELECTION</b> (SUM 10B + 14A)		\$ 5,818,544.05	35. <b>TOTAL INDEBTEDNESS AT THE CLOSE OF THIS REPORTING PERIOD</b> (SUM 29 + 30 + 31 - 32 - 33 - 34)	\$ 82,556.02		
<b>CONTRIBUTIONS MADE</b>						
16. TOTAL CONTRIBUTIONS MADE FOR THIS ELECTION PREVIOUSLY REPORTED		\$ 0.00				
17. ALL MONETARY CONTRIBUTIONS MADE THIS PERIOD	\$ 0.00					
18. ALL IN-KIND CONTRIBUTIONS MADE THIS PERIOD	+ \$ 0.00					
19. <b>TOTAL</b> ALL CONTRIBUTIONS MADE THIS PERIOD (SUM 17A + 18A)	\$ 0.00					
20. <b>TOTAL ALL CONTRIBUTIONS MADE THIS ELECTION</b> (SUM 16B + 19A)		\$ 0.00				
<b>OTHER DISBURSEMENTS</b>						
21. FUNDS USED FOR REPAYING LOANS THIS PERIOD	+ \$ 0.00					
22. PAYMENTS THIS PERIOD ON PREVIOUSLY REPORTED DEBTS INCURRED	+ \$ 0.00					
23. ANY MISCELLANEOUS DISBURSEMENT NOT REPORTED ELSEWHERE	+ \$ 50.00					
24. <b>TOTAL</b> OTHER DISBURSEMENTS THIS PERIOD (SUM 21A + 22A + 23A)	\$ 50.00					



**MISSOURI ETHICS COMMISSION**  
**CONTRIBUTIONS AND LOANS RECEIVED**  
 INSTRUCTIONS ON REVERSE SIDE

OFFICE USE ONLY

1. NAME OF COMMITTEE HULSHOF FOR GOVERNOR INC		2. REPORT DATE 12/3/2008	
<b>A. ITEMIZED CONTRIBUTIONS RECEIVED</b> FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.		4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)			
NAME: ADDRESS: CITY / STATE: View Supplemental Form(s) EMPLOYER: <input type="checkbox"/> COMMITTEE:		\$ ..... \$	\$  <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:		\$ ..... \$	\$  <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:		\$ ..... \$	\$  <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:		\$ ..... \$	\$  <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:		\$ ..... \$	\$  <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
6. SUBTOTAL: ITEMIZED CONTRIBUTIONS THIS PAGE (SUM COLUMN 5)		\$	0.00
7. SUBTOTAL: ITEMIZED CONTRIBUTIONS ANY ATTACHED PAGES		+ \$	231,469.11
8. TOTAL: ITEMIZED CONTRIBUTIONS THIS PERIOD (SUM 6 + 7)		\$	231,469.11
9. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS <b>MONETARY</b> CONTRIBUTIONS		\$	116,334.00
10. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS <b>IN-KIND</b> CONTRIBUTIONS		\$	115,135.11
<b>B. NON-ITEMIZED CONTRIBUTIONS RECEIVED</b> (LIST BY CATEGORY, NOT BY INDIVIDUAL CONTRIBUTIONS)			AMOUNT RECEIVED
11. TOTAL CONTRIBUTIONS RECEIVED AT FUND-RAISERS AS REPORTED INLINE 8 ON FORM CD1A		\$	0.00
12. TOTAL ANONYMOUS CONTRIBUTIONS RECEIVED FROM PERSON GIVING \$25 OR LESS		\$	283.00
13. TOTAL MONETARY CONTRIBUTIONS RECEIVED FROM PERSONS GIVING \$100 OR LESS		\$	18,370.70
14. TOTAL IN-KIND CONTRIBUTIONS RECEIVED FROM PERSONS (NOT COMMITTEES) GIVING \$100 OR LESS		\$	0.00
<b>C. LOANS RECEIVED</b>		16. DATE RECEIVED	17. AMOUNT OF LOAN (IF MORE THAN \$100 ATTACH CD-1B)
15. NAME AND ADDRESS OF LENDER			
NAME: ADDRESS: CITY / STATE:			\$
NAME: ADDRESS: CITY / STATE:			\$
18. SUBTOTAL: LOANS THIS PAGE (SUM COLUMN 17)		\$	0.00
19. SUBTOTAL: LOANS FROM ANY ATTACHED PAGES		\$	0.00
20. TOTAL: LOANS THIS PERIOD (SUM 18 + 19)		\$	0.00
21. TOTAL: ALL IN-KIND CONTRIBUTIONS (SUM 10 + 14)		\$	115,135.11
22. TOTAL: ALL MONETARY CONTRIBUTIONS (SUM 9, 11, 12 & 13)		\$	134,987.70
23. MONETARY CONTRIBUTIONS & LOANS RECEIVED REQUIRING A RECORD OF NAME & ADDRESS (SUM 9, 13 & 20)		\$	134,704.70



**MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

OFFICE USE ONLY

NAME OF COMMITTEE HULSHOF FOR GOVERNOR INC	DATE 12/3/2008
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**INSTRUCTIONS**

**PURPOSE:** The purpose of the Contributions Received supplement is to provide a printed outline for attaching additional pages to Form CD1 (Contributions Received). This form should be used as additional space for reporting persons contributing more than \$100 and for committee contributions. This form may be reproduced as needed.

Total all itemized contributions at the bottom of the page and carry to item 7 (Subtotal: Itemized Contributions From Any Attached Pages) on Form CD-1.

If further information is needed concerning reporting itemized expenditures, see Form CD-1 Instructions.

A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
<b>3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)</b> NAME: ADDRESS: Douglas Adair CITY / STATE: 2710 Hillshire Dr. EMPLOYER: Columbia, MO 65203 Requested <input type="checkbox"/> COMMITTEE:	10/27/2008 ----- \$ 150.00	\$ 50.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: C. Ade CITY / STATE: 109 Chesterfield Bluffs Dr. EMPLOYER: Chesterfield, MO 63005 Retired <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 200.00	\$ 100.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Dora Lee Adkisson CITY / STATE: 3606 N. Highway J EMPLOYER: Charleston, MO 63834 Adkisson Farms Inc. Farming <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 325.00	\$ 25.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Aesthetic Dermatologic Surgery LLC CITY / STATE: PO Box 220217 EMPLOYER: Saint Louis, MO 63122 <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 500.00	\$ 500.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Paul Akin CITY / STATE: 31415 Pike 219 EMPLOYER: Clarksville, MO 63336 Retired <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 450.00	\$ 100.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Sam Alexander CITY / STATE: 1423 North Jefferson Ave EMPLOYER: Springfield, MO 65802 Cox Medical Center Physician <input type="checkbox"/> COMMITTEE:	11/14/2008 ----- \$ 500.00	\$ 500.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: James Alley CITY / STATE: 12713 Ranson Road EMPLOYER: Lees Summit, MO 64082 Retired <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 235.00	\$ 60.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ernest Angelo Jr. CITY / STATE: 410 N. Main EMPLOYER: Midland, TX 79701 Self Employed Petroleum Engineer <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 1,000.00	\$ 500.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

<b>TOTAL: ITEMIZED CONTRIBUTIONS</b>	<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;">--</div>
(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)	



**MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

OFFICE USE ONLY

NAME OF COMMITTEE HULSHOF FOR GOVERNOR INC	DATE 12/3/2008
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**INSTRUCTIONS**

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NAME: ADDRESS: Mary Susan Appelquist CITY/STATE: 4606 S. Lakehill Springfield, MO 65804 EMPLOYER: Self Employed Lawyer <input type="checkbox"/> COMMITTEE:	11/14/2008 ----- \$ 150.00	\$ 150.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: K.E. Austin CITY/STATE: 22421 State Hwy 149 Ethel, MO 63539 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 175.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Bach Medical Supply CITY/STATE: 1711 E Sunshine Springfield, MO 65804 EMPLOYER: <input type="checkbox"/> COMMITTEE:	10/31/2008 ----- \$ 1,000.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Bachman Machine Company CITY/STATE: 4321 N. Broadway Saint Louis, MO 63147 EMPLOYER: <input type="checkbox"/> COMMITTEE:	10/27/2008 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Wendell Bailey CITY/STATE: P. O. Box 144 Jefferson City, MO 65102 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	10/27/2008 ----- \$ 1,000.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Richard Baldwin Jr. CITY/STATE: 139 Plantation Dr. Saint Louis, MO 63141 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 300.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ruby Balsley CITY/STATE: 608 Wildrose Pl Columbia, MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 205.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: James Barber CITY/STATE: 23007 St. Hwy 114 Essex, MO 63846 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 120.00	\$ 20.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

**TOTAL: ITEMIZED CONTRIBUTIONS** --

**(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)**



**MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

OFFICE USE ONLY

NAME OF COMMITTEE HULSHOF FOR GOVERNOR INC	DATE 12/3/2008
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**INSTRUCTIONS**

**PURPOSE:** The purpose of the Contributions Received supplement is to provide a printed outline for attaching additional pages to Form CD1 (Contributions Received). This form should be used as additional space for reporting persons contributing more than \$100 and for committee contributions. This form may be reproduced as needed.

Total all itemized contributions at the bottom of the page and carry to item 7 (Subtotal: Itemized Contributions From Any Attached Pages) on Form CD-1.

If further information is needed concerning reporting itemized expenditures, see Form CD-1 Instructions.

A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
<b>3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)</b> NAME: ADDRESS: Michael Beck CITY / STATE: 4901 Cochero Ct. Columbia, MO 65203 EMPLOYER: Fireworks America Owner <input type="checkbox"/> COMMITTEE:	11/3/2008 \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Rhonda Beerman CITY / STATE: 732 S. Lake Dr. Marshall, MO 65340 EMPLOYER: Beerman Htg & Cooling Co-Owner <input type="checkbox"/> COMMITTEE:	11/1/2008 \$ 320.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Gary Belt CITY / STATE: 36416 State Hwy M Atlanta, MO 63530 EMPLOYER: Self Employed Farmer <input type="checkbox"/> COMMITTEE:	10/28/2008 \$ 200.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Pat Benson CITY / STATE: 3817 McMasters Ave. Ste. 150 Hannibal, MO 63401 EMPLOYER: Self-employed <input type="checkbox"/> COMMITTEE:	10/31/2008 \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Truman Benson CITY / STATE: 433 Darla Drive Branson, MO 65616 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	11/3/2008 \$ 150.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Scott Betz CITY / STATE: 752 NE 72nd St Trenton, MO 64683 EMPLOYER: Self Employed Farmer <input type="checkbox"/> COMMITTEE:	10/28/2008 \$ 225.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Matthew Beuerlein CITY / STATE: 7135 N. National Dr. Parkville, MO 64152 EMPLOYER: Physician <input type="checkbox"/> COMMITTEE:	10/28/2008 \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Greg Beykirch CITY / STATE: 1043 Country Club Dr West Plains, MO 65775 EMPLOYER: Great Rivers Dist Pres. <input type="checkbox"/> COMMITTEE:	10/30/2008 \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

**TOTAL: ITEMIZED CONTRIBUTIONS** --

**(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)**



**MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

OFFICE USE ONLY

NAME OF COMMITTEE HULSHOF FOR GOVERNOR INC	DATE 12/3/2008
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**INSTRUCTIONS**

**PURPOSE:** The purpose of the Contributions Received supplement is to provide a printed outline for attaching additional pages to Form CD1 (Contributions Received). This form should be used as additional space for reporting persons contributing more than \$100 and for committee contributions. This form may be reproduced as needed.

Total all itemized contributions at the bottom of the page and carry to item 7 (Subtotal: Itemized Contributions From Any Attached Pages) on Form CD-1.

If further information is needed concerning reporting itemized expenditures, see Form CD-1 Instructions.

A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE. 3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)	4. DATE RECEIVED AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
NAME: ADDRESS: Walter Bivins CITY/STATE: 9 Idecker Ct. EMPLOYER: Saint Louis, MO 63129 State Representative <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 200.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Tom Bleigh CITY/STATE: 2627 Haycynth EMPLOYER: Hannibal, MO 63401 Self-employed <input type="checkbox"/> COMMITTEE:	10/31/2008 ----- \$ 650.00	\$ 650.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: James Bonzon CITY/STATE: 15400 Braefield Dr. EMPLOYER: Chesterfield, MO 63017 AHM Financial Group Ins. Broker <input type="checkbox"/> COMMITTEE:	10/30/2008 ----- \$ 400.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Emil Bosch CITY/STATE: 10301 Topaz Spring Dr EMPLOYER: Saint Louis, MO 63123 Self-employed <input type="checkbox"/> COMMITTEE:	10/30/2008 ----- \$ 190.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Arthur Boyd CITY/STATE: 206 Browning Ct. EMPLOYER: Saint Charles, MO 63303 Retired <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 150.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Darlene Breitigam CITY/STATE: 1314 Katsura Ct EMPLOYER: Chesterfield, MO 63005 Requested <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 140.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Brownfield Oil Company Inc. CITY/STATE: P. O. Box 386 1415 Riley Industrial Dr EMPLOYER: Moberly, MO 65270 <input type="checkbox"/> COMMITTEE:	10/31/2008 ----- \$ 350.00	\$ 350.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Edward Bruns CITY/STATE: 18608 Maries Rd. 531 EMPLOYER: Rolla, MO 65401 Bond Clinic <input type="checkbox"/> COMMITTEE:	10/30/2008 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

<b>TOTAL: ITEMIZED CONTRIBUTIONS</b>	-----	--
<b>(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)</b>		



**MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

OFFICE USE ONLY

NAME OF COMMITTEE HULSHOF FOR GOVERNOR INC	DATE 12/3/2008
---	-------------------

**INSTRUCTIONS**

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A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE. 3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)	4. DATE RECEIVED AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
NAME: ADDRESS: Eugene Buckley CITY / STATE: 3641 Flora Place Saint Louis, MO 63110 EMPLOYER: Self Employed Lawyer <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 150.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Kevin Bucol CITY / STATE: 12615 Town & Country Est. Ln. Saint Louis, MO 63141 EMPLOYER: Self Employed Physician <input type="checkbox"/> COMMITTEE:	10/24/2008 ----- \$ 1,000.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Halpin Burke CITY / STATE: 24 THorndell Dr Saint Louis, MO 63117 EMPLOYER: Attorney <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 150.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Anna Byrd CITY / STATE: 2018 Valley View Rd. Mexico, MO 65265 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	11/4/2008 ----- \$ 150.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Edmond Cabbabe CITY / STATE: 1249 Takara Ct. Saint Louis, MO 63131 EMPLOYER: Physician <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 300.00	\$ 300.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Wallace Well Service CITY / STATE: 1208 Cote Sans Dessein Fulton, MO 65251 EMPLOYER: <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 125.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Donald Warren CITY / STATE: 29 Oak Ridge Pond Hannibal, MO 63401 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	10/31/2008 ----- \$ 400.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Wasinger Parham Morthland Terrell & Wasinger L.C CITY / STATE: 2801 St. Marys Ave Hannibal, MO 63401 EMPLOYER: <input type="checkbox"/> COMMITTEE:	10/31/2008 ----- \$ 650.00	\$ 650.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

<b>TOTAL: ITEMIZED CONTRIBUTIONS</b>		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;">--</div>
<b>(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)</b>		



**MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

OFFICE USE ONLY

NAME OF COMMITTEE HULSHOF FOR GOVERNOR INC	DATE 12/3/2008
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<b>3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)</b> NAME: ADDRESS: Tony Watkins CITY / STATE: 2850 State Hwy. B EMPLOYER: Bragg City, MO 63827 Retired <input type="checkbox"/> COMMITTEE:	10/30/2008 ----- \$ 150.00	\$ 50.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Bernard Weitzman CITY / STATE: 314 New Salem Dr. EMPLOYER: Saint Louis, MO 63141 Retired <input type="checkbox"/> COMMITTEE:	10/30/2008 ----- \$ 200.00	\$ 100.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Donald Welge CITY / STATE: 5 Knollwod Dr. EMPLOYER: Chester, IL 62233 Gilster-Mary Lee Corp CEO <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 115.00	\$ 25.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Andrew West CITY / STATE: 156 Chimney Rock EMPLOYER: Cape Girardeau, MO 63701 Cape Radiology Group Radiologist <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 1,450.00	\$ 100.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: West County Radiological Group Inc. CITY / STATE: 555 N. New Ballas Rd. Ste 150 EMPLOYER: Saint Louis, MO 63141 <input type="checkbox"/> COMMITTEE:	10/24/2008 ----- \$ 3,850.00	\$ 2,500.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Western Anesthesiology Assoc CITY / STATE: 339 Consort Dr. EMPLOYER: Ballwin, MO 63011 <input type="checkbox"/> COMMITTEE:	10/24/2008 ----- \$ 6,350.00	\$ 5,000.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Francis Whitesell CITY / STATE: 3531 NE 47th St. EMPLOYER: Kansas City, MO 64117 Retired <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 225.00	\$ 25.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Lorie Whittaker CITY / STATE: 654 W. 66th Ter. EMPLOYER: Kansas City, MO 64113 Homemaker <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 500.00	\$ 250.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

<b>TOTAL: ITEMIZED CONTRIBUTIONS</b>	<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;">--</div>
(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)	



**MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

OFFICE USE ONLY

NAME OF COMMITTEE HULSHOF FOR GOVERNOR INC	DATE 12/3/2008
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<b>3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)</b>		
NAME: ADDRESS: James Willis CITY/STATE: 24377 State Hwy 00 EMPLOYER: Bevier, MO 63532 Self Employed Construction <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 455.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Estelle Withum CITY/STATE: 7677 Watson Rd. Apt 207 EMPLOYER: Saint Louis, MO 63119 Requested <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 180.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mark Wittry CITY/STATE: 10525 Concord School Rd. EMPLOYER: Saint Louis, MO 63128 West Cnty Radiological Group Physician <input type="checkbox"/> COMMITTEE:	10/24/2008 ----- \$ 1,650.00	\$ 300.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Robert Yeckel CITY/STATE: 8819 Gladlea Dr. EMPLOYER: Saint Louis, MO 63127 Retired <input type="checkbox"/> COMMITTEE:	10/24/2008 ----- \$ 300.00	\$ 300.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Andrew Yoder CITY/STATE: 403 Highway B EMPLOYER: Leonard, MO 63451 Retired <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 175.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Rowena Young CITY/STATE: 24377 State Hwy 00 EMPLOYER: Bevier, MO 63532 State of Missouri <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 250.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Boone County Republican Central Committee CITY/STATE: PO Box 7617 EMPLOYER: Columbia, MO 65205 <input checked="" type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 51,800.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Camden County Republican Club CITY/STATE: P. O. Box 1054 EMPLOYER: Camdenton, MO 65020 <input checked="" type="checkbox"/> COMMITTEE:	10/27/2008 ----- \$ 2,000.00	\$ 2,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

**TOTAL: ITEMIZED CONTRIBUTIONS** -----

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



**MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

OFFICE USE ONLY

NAME OF COMMITTEE HULSHOF FOR GOVERNOR INC	DATE 12/3/2008
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<b>3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)</b>		
NAME: ADDRESS: Elect Nodler Committee CITY/STATE: P.O. Box 608 EMPLOYER: Carthage , MO 64836 <input checked="" type="checkbox"/> COMMITTEE:	10/27/2008 ----- \$ 5,700.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Eric Zahnd for Platte County Prosecutor CITY/STATE: 6406 NW Crystal Pool Drive EMPLOYER: Platte Woods , MO 64151 <input checked="" type="checkbox"/> COMMITTEE:	10/30/2008 ----- \$ 1,497.57	\$ 147.57 <input type="checkbox"/> MONETARY <input checked="" type="checkbox"/> IN-KIND
NAME: ADDRESS: Gasconade County Republican Central Committee CITY/STATE: 2275 Hwy K EMPLOYER: Hermann , MO 65041 <input checked="" type="checkbox"/> COMMITTEE:	10/27/2008 ----- \$ 1,500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Knight for Presiding Commissioner CITY/STATE: PO Box 1188 EMPLOYER: Platte City , MO 64079 <input checked="" type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 1,450.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: McCotter Congressional Committee CITY/STATE: PO Box 530788 EMPLOYER: Livonia , MI 48153 <input checked="" type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 2,000.00	\$ 2,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mercer County Republican Central Co. CITY/STATE: Rt. 2 Box 141 EMPLOYER: Princeton , MO 64673 <input checked="" type="checkbox"/> COMMITTEE:	10/30/2008 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Missouri Concrete Association Political Action Committee CITY/STATE: P. O. Box 392 EMPLOYER: Jefferson City , MO 65102 <input checked="" type="checkbox"/> COMMITTEE:	10/31/2008 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Missouri Republican Party CITY/STATE: 204 East Dunklin EMPLOYER: Jefferson City , MO 65101 <input checked="" type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 370,019.94	\$ 113,450.00 <input type="checkbox"/> MONETARY <input checked="" type="checkbox"/> IN-KIND

<b>TOTAL: ITEMIZED CONTRIBUTIONS</b>	-----	\$ --
<b>(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)</b>		



**MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

OFFICE USE ONLY

NAME OF COMMITTEE HULSHOF FOR GOVERNOR INC	DATE 12/3/2008
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NAME: ADDRESS: Missouri Right to Life PAC CITY/STATE: PO Box 651 EMPLOYER: Jefferson City , MO 65102 <input checked="" type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 2,075.00	\$ 2,075.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Montgomery County Republican Central Committee CITY/STATE: 205 N. Gladstone EMPLOYER: Jonesburg , MO 63351 <input checked="" type="checkbox"/> COMMITTEE:	10/31/2008 ----- \$ 13,639.00	\$ 189.00 <input type="checkbox"/> MONETARY <input checked="" type="checkbox"/> IN-KIND
NAME: ADDRESS: Northwest Township Republican Club CITY/STATE: 3244 Autumn View Pointe EMPLOYER: Bridgeton , MO 63044 <input checked="" type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Pike County Replublican Central Committee CITY/STATE: 22653 Pike 300 EMPLOYER: Bowling Green , MO 63334 <input checked="" type="checkbox"/> COMMITTEE:	10/29/2008 ----- \$ 275.63	\$ 275.63 <input type="checkbox"/> MONETARY <input checked="" type="checkbox"/> IN-KIND
NAME: ADDRESS: Republican Women's Club of Saint Louis County CITY/STATE: 6151 Columbia Ave EMPLOYER: Saint Louis , MO 63139 <input checked="" type="checkbox"/> COMMITTEE:	10/30/2008 ----- \$ 300.00	\$ 300.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ron Richard 2008 CITY/STATE: P.O. Box 1725 EMPLOYER: Joplin , MO 64802 <input checked="" type="checkbox"/> COMMITTEE:	10/29/2008 ----- \$ 5,198.00	\$ 348.00 <input type="checkbox"/> MONETARY <input checked="" type="checkbox"/> IN-KIND
NAME: ADDRESS: Wright County Republican Central Committee CITY/STATE: 1776 Summit Rd. EMPLOYER: Grovespring , MO 65662 <input checked="" type="checkbox"/> COMMITTEE:	10/30/2008 ----- \$ 600.00	\$ 400.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Edmond Cabbabe CITY/STATE: 1249 Takara Ct. EMPLOYER: Saint Louis, MO 63131 Physician <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 600.00	\$ 300.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

**TOTAL: ITEMIZED CONTRIBUTIONS** --

**(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)**



**MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

OFFICE USE ONLY

NAME OF COMMITTEE HULSHOF FOR GOVERNOR INC	DATE 12/3/2008
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<b>3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)</b> NAME: ADDRESS: Jane Caldwell CITY/STATE: 1610 Thursby Ave. EMPLOYER: Kirkwood, MO 63122 Physician <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 200.00	\$ 200.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Manuel Camejo CITY/STATE: 3525 S. National EMPLOYER: Springfield, MO 65807 Doctor <input type="checkbox"/> COMMITTEE:	11/5/2008 ----- \$ 500.00	\$ 500.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Will Carpenter CITY/STATE: 456 Conway Meadows Dr EMPLOYER: Chesterfield, MO 63017 Retired <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 150.00	\$ 50.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Cars Unlimited CITY/STATE: 2128 First Capitol Drive EMPLOYER: Saint Charles, MO 63301 <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 205.00	\$ 50.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Gary Carver CITY/STATE: 4409 Sterling Ave. EMPLOYER: Kansas City, MO 64133 Self Employed Chiropractor <input type="checkbox"/> COMMITTEE:	10/27/2008 ----- \$ 1,000.00	\$ 1,000.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Truman Cato CITY/STATE: Rt. 2 Box 2802 EMPLOYER: Advance, MO 63730 Retired <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 400.00	\$ 50.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Central Stone Company CITY/STATE: 46445 Sweetbay Lane EMPLOYER: Hannibal, MO 63401 <input type="checkbox"/> COMMITTEE:	10/31/2008 ----- \$ 650.00	\$ 650.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Willard Chamberlin CITY/STATE: 457 Alverston Ct. EMPLOYER: Ballwin, MO 63021 Metro West Anesthesia Group Physician <input type="checkbox"/> COMMITTEE:	10/29/2008 ----- \$ 700.00	\$ 200.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

**TOTAL: ITEMIZED CONTRIBUTIONS** --

**(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)**



**MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

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NAME OF COMMITTEE HULSHOF FOR GOVERNOR INC	DATE 12/3/2008
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NAME: ADDRESS: Victor Chapman CITY / STATE: 4201 Clark Ln Lot 69 Columbia, MO 65202 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 275.00	\$ 125.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Chester Bross Construction Company CITY / STATE: P. O. Box 430 Hannibal, MO 63401 EMPLOYER: <input type="checkbox"/> COMMITTEE:	10/31/2008 ----- \$ 650.00	\$ 650.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mary Chrismer CITY / STATE: 25 Barkwood Trl. Saint Peters, MO 63376 EMPLOYER: Homemaker <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 140.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mary Chrismer CITY / STATE: 25 Barkwood Trl. Saint Peters, MO 63376 EMPLOYER: Homemaker <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 140.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mary Chrismer CITY / STATE: 25 Barkwood Trl. Saint Peters, MO 63376 EMPLOYER: Homemaker <input type="checkbox"/> COMMITTEE:	11/4/2008 ----- \$ 240.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Caroline Coats CITY / STATE: PO Box 55 Monroe City, MO 63456 EMPLOYER: Homemaker <input type="checkbox"/> COMMITTEE:	11/14/2008 ----- \$ 300.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Sylvester Cook CITY / STATE: 22231 Lawrence 1180 Verona, MO 65769 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 120.00	\$ 20.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Dennis Corrington CITY / STATE: 2471 Copper Beech Dr. Saint Louis, MO 63131 EMPLOYER: Self Employed <input type="checkbox"/> COMMITTEE:	10/30/2008 ----- \$ 250.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

<b>TOTAL: ITEMIZED CONTRIBUTIONS</b>		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;">--</div>
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NAME: ADDRESS: Carol Coryell CITY / STATE: 3595 E. Montrose Court Springfield, MO 65809 EMPLOYER: Coryell Enterprises Builder <input type="checkbox"/> COMMITTEE:	10/27/2008 ----- \$ 950.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Sam Coryell CITY / STATE: 5367 S Castlebay Dr Springfield, MO 65809 EMPLOYER: Self Employed Builder <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: James Coyle M.D. CITY / STATE: 42 Pacland Estates Chesterfield, MO 63005 EMPLOYER: Coyle & Merenda Physician <input type="checkbox"/> COMMITTEE:	10/24/2008 ----- \$ 2,650.00	\$ 1,350.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: James Criscione M.D. CITY / STATE: 1837 Grassy Ridge Saint Louis, MO 63122 EMPLOYER: South County Anesthesia Associates LTD. Physician <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 300.00	\$ 150.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Tom Croley CITY / STATE: 5345 E. River Bluff Dr. Springfield, MO 65809 EMPLOYER: Croley Insurance <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Wesley Cummins CITY / STATE: 4481 Westminster Place Saint Louis, MO 63108 EMPLOYER: Self Employed Ministry <input type="checkbox"/> COMMITTEE:	10/27/2008 ----- \$ 250.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Curry Ice & Coal Inc. CITY / STATE: 21149 Route 4 Carlinville, IL 62626 EMPLOYER: <input type="checkbox"/> COMMITTEE:	10/31/2008 ----- \$ 650.00	\$ 650.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mary Davis CITY / STATE: 340 Edgewood Rd. Union, MO 63084 EMPLOYER: Homemaker <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 250.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

<b>TOTAL: ITEMIZED CONTRIBUTIONS</b>	-----	--
<b>(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)</b>		



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A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE. 3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)	4. DATE RECEIVED AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
NAME: ADDRESS: Naoma Deskin CITY / STATE: 1313 Mimosa Dr. EMPLOYER: Macon, MO 63552 Retired <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 250.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Stephen DeWitt CITY / STATE: 983 Claytonbrook Dr EMPLOYER: Ballwin, MO 63011 Retired <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 266.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: L. Sue Dobbs CITY / STATE: 9815 E. 51st St Ter. EMPLOYER: Kansas City, MO 64133 Dentist <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 125.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Virginia Dooley CITY / STATE: 3711 Lansing Ave. EMPLOYER: Columbia, MO 65201 Retired <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 140.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: John Dorsey CITY / STATE: 226 NE 69 Hwy EMPLOYER: Claycomo, MO 64119 Attorney At Law <input type="checkbox"/> COMMITTEE:	10/27/2008 ----- \$ 150.00	\$ 150.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Joseph Drozda CITY / STATE: 36 Picardy Hill Dr EMPLOYER: Chesterfield, MO 63017 Correctional Medical Services Physician <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 135.00	\$ 35.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: William Dunn Sr. CITY / STATE: 53 Coventry Ct. EMPLOYER: Prairie Village, KS 66208 JE Dunn Const. Group Retired <input type="checkbox"/> COMMITTEE:	10/30/2008 ----- \$ 200.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Justin Durel CITY / STATE: 1215 Clayton Place EMPLOYER: Saint Louis, MO 63131 Physician <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

**TOTAL: ITEMIZED CONTRIBUTIONS** --

**(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)**



**MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

OFFICE USE ONLY

NAME OF COMMITTEE HULSHOF FOR GOVERNOR INC	DATE 12/3/2008
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<b>3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)</b>		
NAME: ADDRESS: Bonnie Durk CITY / STATE: 208 Sondra Ave. EMPLOYER: Columbia, MO 65202 Patrica's Dept. Manager <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 300.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Terrence Dwyer CITY / STATE: 42 Dugan Ct. EMPLOYER: Saint Charles, MO 63304 Retired <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 250.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mary Earlewine CITY / STATE: 126 Robin Rd. EMPLOYER: Bellflower, MO 63333 Requested <input type="checkbox"/> COMMITTEE:	10/30/2008 ----- \$ 150.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Edison Learning Inc. CITY / STATE: 521 Fifth Avenue 11th Floor EMPLOYER: New York, NY 10175 <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 1,000.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Beverly Eggering CITY / STATE: 204 Dauphine EMPLOYER: Lake St Louis, MO 63367 Self Employed Sales <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Judith Egloff CITY / STATE: 12720 Baltimore Ct. EMPLOYER: Kansas City, MO 64145 Retired <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 125.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Catherine Ellis CITY / STATE: 3909 Sequoyan Court EMPLOYER: Hannibal, MO 63401 Retired <input type="checkbox"/> COMMITTEE:	10/31/2008 ----- \$ 200.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mendell Elson CITY / STATE: Rt 1 Box 139 EMPLOYER: Miami, MO 65344 Agricultural Production <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 300.00	\$ 300.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

<b>TOTAL: ITEMIZED CONTRIBUTIONS</b>	-----	--
<b>(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)</b>		



**MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

OFFICE USE ONLY

NAME OF COMMITTEE HULSHOF FOR GOVERNOR INC	DATE 12/3/2008
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NAME: ADDRESS: Linda Emmons CITY/STATE: 345 Daniels Ests Union, MO 63084 EMPLOYER: Franklin County Collector <input type="checkbox"/> COMMITTEE:	10/27/2008 ----- \$ 150.00	\$ 150.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: H. Blanton Engle CITY/STATE: 20247 Rt. AA Paris, MO 65275 EMPLOYER: Hubbell Power System Analyst <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 100.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: H. Blanton Engle CITY/STATE: 20247 Rt. AA Paris, MO 65275 EMPLOYER: Hubbell Power System Analyst <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 150.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Falkoff's CITY/STATE: 118 East Front Street Sikeston, MO 63801 EMPLOYER: <input type="checkbox"/> COMMITTEE:	10/27/2008 ----- \$ 150.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Falkoff's CITY/STATE: 118 East Front Street Sikeston, MO 63801 EMPLOYER: <input type="checkbox"/> COMMITTEE:	10/27/2008 ----- \$ 150.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: David Felske CITY/STATE: 2141 East Briar Springfield, MO 65804 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	10/27/2008 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Charlotte Fink CITY/STATE: 1438 Charic Dr. Wildwood, MO 63021 EMPLOYER: Nursing Home Admin. <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 190.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Paul Fleischut CITY/STATE: 7344 Whitehaven Saint Louis, MO 63123 EMPLOYER: Senniger Attorney <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 1,750.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

<b>TOTAL: ITEMIZED CONTRIBUTIONS</b>	-----	--
<b>(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)</b>		



**MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

OFFICE USE ONLY

NAME OF COMMITTEE HULSHOF FOR GOVERNOR INC	DATE 12/3/2008
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NAME: ADDRESS: Cathy Forand CITY / STATE: 7401 Granbury Circle EMPLOYER: Saint Louis, MO 63123 Homemaker <input type="checkbox"/> COMMITTEE:	10/24/2008 ----- \$ 690.00	\$ 600.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Doris Ford CITY / STATE: 3124 Kage Rd. EMPLOYER: Cape Girardeau, MO 63701 Requested <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 110.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jerry Foster CITY / STATE: 2010 Wayne Ave. EMPLOYER: Jefferson City, MO 65109 MO Dept. of Natural Resources Environmental Specialist <input type="checkbox"/> COMMITTEE:	10/29/2008 ----- \$ 150.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Robert Fry CITY / STATE: 805 Country Manor EMPLOYER: Saint Louis, MO 63141 Fry-Wagner Executive <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Charles Fugate CITY / STATE: 2605 Lee Anna Dr. EMPLOYER: West Plains, MO 65775 City of West Plains Engineer <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 700.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: G. Potterfield Trucking Inc. CITY / STATE: PO Box 296 EMPLOYER: Monroe City, MO 63456 <input type="checkbox"/> COMMITTEE:	10/31/2008 ----- \$ 1,250.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Charles Garvin CITY / STATE: 35 Clermont EMPLOYER: Saint Louis, MO 63124 Diagnostic Physician <input type="checkbox"/> COMMITTEE:	10/30/2008 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Gateway Pharmacy of Monroe City Inc. CITY / STATE: 10 Mark Twain Center EMPLOYER: Monroe City, MO 63456 <input type="checkbox"/> COMMITTEE:	10/31/2008 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

**TOTAL: ITEMIZED CONTRIBUTIONS** --

**(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)**



**MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

OFFICE USE ONLY

NAME OF COMMITTEE HULSHOF FOR GOVERNOR INC	DATE 12/3/2008
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NAME: ADDRESS: Scott George CITY/STATE: 2605 Kayla Ln. EMPLOYER: Mount Vernon, MO 65712 Mid-Am Dental & Hearing CEO <input type="checkbox"/> COMMITTEE:	11/1/2008 ----- \$ 150.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Eugene Gerke CITY/STATE: 2105 S Country Club Dr. EMPLOYER: Columbia, MO 65201 Gerke & Associates Inc. Consultant <input type="checkbox"/> COMMITTEE:	10/29/2008 ----- \$ 2,000.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mark Gibson CITY/STATE: 371 N. Shore Drive EMPLOYER: Lake Waukomis, MO 64151 Platte County MO <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 150.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Robert Gioia CITY/STATE: 10356 Meath EMPLOYER: Saint Louis, MO 63123 Retired <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 325.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Anne Goetz CITY/STATE: 10015 Courtwick Cir EMPLOYER: Saint Louis, MO 63128 Retired <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 150.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: G. William Goldinger Jr. CITY/STATE: 5992 Hwy 24 EMPLOYER: Hannibal, MO 63401 Farmer <input type="checkbox"/> COMMITTEE:	10/31/2008 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Darrel Goodman CITY/STATE: P.O. Box 312 EMPLOYER: Versailles, MO 65084 Farmer <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 125.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Catherine Greany CITY/STATE: 1 Terry Hill Lane EMPLOYER: Saint Louis, MO 63131 Emerson <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 2,000.00	\$ 2,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

**TOTAL: ITEMIZED CONTRIBUTIONS** -----

**(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)**



**MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

OFFICE USE ONLY

NAME OF COMMITTEE HULSHOF FOR GOVERNOR INC	DATE 12/3/2008
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NAME: ADDRESS: Barbara Greenwell CITY/STATE: 24537 Monroe Road 398 Shelbina, MO 63468 EMPLOYER: Retired Farmer <input type="checkbox"/> COMMITTEE:	10/27/2008 ----- \$ 350.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: David Gregory CITY/STATE: 503 Southwood Lane Saint Joseph, MO 64506 EMPLOYER: Self Employed Property Management <input type="checkbox"/> COMMITTEE:	10/29/2008 ----- \$ 150.00	\$ 150.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Georgene Grimm CITY/STATE: 891 Burgundy Lane Manchester, MO 63011 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 175.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: David Grossman CITY/STATE: 102 Mason Ave. Saint Louis, MO 63119 EMPLOYER: Grossman Ron & Steel Executive <input type="checkbox"/> COMMITTEE:	10/29/2008 ----- \$ 750.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Walter Groth CITY/STATE: 12808 Smith Creek Rd Versailles, MO 65084 EMPLOYER: Self Employed Farming <input type="checkbox"/> COMMITTEE:	10/24/2008 ----- \$ 850.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Joyce Groth CITY/STATE: 408 Chapelford Lane St. Louis, MO 63119 EMPLOYER: Homemaker <input type="checkbox"/> COMMITTEE:	10/24/2008 ----- \$ 300.00	\$ 300.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: W. Haag CITY/STATE: 3 Spring Creek Ln. Washington, MO 63090 EMPLOYER: Moore Gear and Manufacturing President <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 550.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Paul Haglin CITY/STATE: 300 Eagles Next Farm Rd Hawk Point, MO 63349 EMPLOYER: Clergyman <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 200.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

**TOTAL: ITEMIZED CONTRIBUTIONS** --

**(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)**



**MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

OFFICE USE ONLY

NAME OF COMMITTEE HULSHOF FOR GOVERNOR INC	DATE 12/3/2008
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<b>3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)</b> NAME: ADDRESS: Judy Hall CITY/STATE: 2837 County Road 1205 EMPLOYER: Moberly, MO 65270 Retired <input type="checkbox"/> COMMITTEE:	11/4/2008 ----- \$ 150.00	\$ 50.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Judy Harding CITY/STATE: 3821 Hwy MM EMPLOYER: Hannibal, MO 63401 Lomax Trucking Owner <input type="checkbox"/> COMMITTEE:	10/31/2008 ----- \$ 200.00	\$ 100.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Roy Hart CITY/STATE: 12412 Bell Drive EMPLOYER: De Soto, MO 63020 At & T Manager Tier 3 Tech Support <input type="checkbox"/> COMMITTEE:	11/1/2008 ----- \$ 300.00	\$ 100.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Diana Hawthorne CITY/STATE: 1616 Glenbrook Ct EMPLOYER: Columbia, MO 65203 University of Missouri Professor of Radiology <input type="checkbox"/> COMMITTEE:	10/30/2008 ----- \$ 200.00	\$ 100.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Scott Hays CITY/STATE: 7250 County Rd. 225 EMPLOYER: Monroe City, MO 63456 Self Employed Farmer <input type="checkbox"/> COMMITTEE:	10/31/2008 ----- \$ 750.00	\$ 650.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Richard Head CITY/STATE: 1421 Neffwold Ln. EMPLOYER: Saint Louis, MO 63122 Physician <input type="checkbox"/> COMMITTEE:	10/24/2008 ----- \$ 500.00	\$ 500.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Patrick Heath CITY/STATE: 704 Havenwood Ct EMPLOYER: St Louis, MO 63122 KRH Co. Vice President <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 200.00	\$ 100.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jimmie Heathman CITY/STATE: 4100 Roxbury Ct. EMPLOYER: Columbia, MO 65203 Retired Army Officer <input type="checkbox"/> COMMITTEE:	10/30/2008 ----- \$ 250.00	\$ 25.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

<b>TOTAL: ITEMIZED CONTRIBUTIONS</b>	<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;">--</div>
(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)	



**MISSOURI ETHICS COMMISSION  
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NAME: ADDRESS: Jesse Heimer CITY/STATE: 6598 Hwy 6 EMPLOYER: Taylor, MO 63471 MO Soybean Assoc. <input type="checkbox"/> COMMITTEE:	10/31/2008 ----- \$ 1,600.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Kenneth Helms CITY/STATE: PO Box 160 EMPLOYER: Columbia, MO 65205 Con-Way Truckload <input type="checkbox"/> COMMITTEE:	10/25/2008 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Bonnie Henderson CITY/STATE: 36431 Archer Lane EMPLOYER: Hurdland, MO 63547 Requested <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 125.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Donna Hennigh CITY/STATE: 1816 Oakcliff Drive EMPLOYER: Columbia, MO 65203 Retired <input type="checkbox"/> COMMITTEE:	10/29/2008 ----- \$ 120.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Robert Hertzog CITY/STATE: 24800 Milton Thompson Rd. EMPLOYER: Lees Summit, MO 64086 Lee Summitt Animal Hospital Veterinarian <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 1,200.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: High Way Media CITY/STATE: 1008 Highway K EMPLOYER: O Fallon, MO 63366 <input type="checkbox"/> COMMITTEE:	10/31/2008 ----- \$ 2,500.00	\$ 625.00 <input type="checkbox"/> MONETARY <input checked="" type="checkbox"/> IN-KIND
NAME: ADDRESS: Byron Hill CITY/STATE: 3712 Woodrail on the Green EMPLOYER: Columbia, MO 65203 ABC Labs President and CEO <input type="checkbox"/> COMMITTEE:	10/29/2008 ----- \$ 2,350.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Esther Hill CITY/STATE: 203 2nd Street EMPLOYER: Jonesburg, MO 63351 Retired <input type="checkbox"/> COMMITTEE:	10/30/2008 ----- \$ 126.00	\$ 14.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

**TOTAL: ITEMIZED CONTRIBUTIONS** -----

**(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)**



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A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE. 3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)	4. DATE RECEIVED AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
NAME: ADDRESS: Dorothy Hilton CITY / STATE: 4678 S. West Avenue Springfield, MO 65810 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	10/29/2008 ----- \$ 200.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Robert Hinman CITY / STATE: P.O. Box 72 Springfield, MO 63366 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 190.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Richard Hirschl CITY / STATE: P.O. Box 353 Washington, MO 63090 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 175.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: B.W. Hoecker CITY / STATE: 3204 Wood Valley Way Columbia, MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 500.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: A.P. Holtman CITY / STATE: 705 Mendocina Ct Apt 12 Florissant, MO 63031 EMPLOYER: Unemployed <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 200.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Herbert Homeyer CITY / STATE: PO Box 247 Marthasville, MO 63357 EMPLOYER: Homeyer Tool Owner <input type="checkbox"/> COMMITTEE:	10/27/2008 ----- \$ 1,500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Rose Hopkins CITY / STATE: 1102 Tanya Lynn Jefferson City, MO 65109 EMPLOYER: Accent Mortgage Professionals Inc. <input type="checkbox"/> COMMITTEE:	10/27/2008 ----- \$ 145.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Bennye Houck CITY / STATE: 1006 Blueberry Ln. Liberty, MO 64068 EMPLOYER: Ferguson Properties Office Manager <input type="checkbox"/> COMMITTEE:	10/30/2008 ----- \$ 1,600.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

<b>TOTAL: ITEMIZED CONTRIBUTIONS</b>		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div>
<b>(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)</b>		



**MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

OFFICE USE ONLY

NAME OF COMMITTEE HULSHOF FOR GOVERNOR INC	DATE 12/3/2008
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A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
<b>3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)</b> NAME: ADDRESS: Gene Howes CITY/STATE: 905 US Hwy 24-36 E Ste 4 EMPLOYER: Monroe City, MO 63456 Shelter Insurance Insurance agent <input type="checkbox"/> COMMITTEE:	10/31/2008 ----- \$ 500.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: HRB Management Inc. CITY/STATE: 1401 Eye Street NW Ste 240 EMPLOYER: Washington, DC 20005 <input type="checkbox"/> COMMITTEE:	10/30/2008 ----- \$ 1,350.00	\$ 1,350.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Nancy Hubbart CITY/STATE: 3095 Key Harbour Dr. EMPLOYER: Lake Saint Louis, MO 63367 American Pool Players Assoc. <input type="checkbox"/> COMMITTEE:	10/24/2008 ----- \$ 650.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Nancy Hubbart CITY/STATE: 3095 Key Harbour Dr. EMPLOYER: Lake Saint Louis, MO 63367 American Pool Players Assoc. <input type="checkbox"/> COMMITTEE:	11/1/2008 ----- \$ 750.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Richard Hulshof CITY/STATE: 1858 Poplar Woods EMPLOYER: Germantown, TN 38138 Colonial Counseling Center Management <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 225.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Image Technologies of Missouri CITY/STATE: 20 Business Loop 70 East EMPLOYER: Columbia, MO 65203 <input type="checkbox"/> COMMITTEE:	11/7/2008 ----- \$ 1,449.91	\$ 99.91 <input type="checkbox"/> MONETARY <input checked="" type="checkbox"/> IN-KIND
NAME: ADDRESS: Imperial Services Inc. CITY/STATE: 1238 Main St. EMPLOYER: Imperial, MO 63052 <input type="checkbox"/> COMMITTEE:	10/27/2008 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Insight Marketing Advisors LLC CITY/STATE: 465 Twin Creek Lane EMPLOYER: Saint Louis, MO 63141 <input type="checkbox"/> COMMITTEE:	11/4/2008 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

<b>TOTAL: ITEMIZED CONTRIBUTIONS</b>		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;">--</div>
<b>(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)</b>		



**MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

OFFICE USE ONLY

NAME OF COMMITTEE HULSHOF FOR GOVERNOR INC	DATE 12/3/2008
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<b>3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)</b> NAME: ADDRESS: J. C. Shoemyer Inc. CITY / STATE: 901 County Line Road Monroe City, MO 63456 EMPLOYER: <input type="checkbox"/> COMMITTEE:	10/31/2008 ----- \$ 950.00	\$ 650.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mary Jackson CITY / STATE: PO Box 163 Center, MO 63436 EMPLOYER: Hannibal Regional Hospital Clinical Application Specialist/RN <input type="checkbox"/> COMMITTEE:	10/31/2008 ----- \$ 225.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Barbara Jackson CITY / STATE: P. O. Box 144 Jefferson City, MO 65102 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 125.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: M. James CITY / STATE: 606 Tam O Shanter Dr. Kansas City, MO 64145 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 175.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: James Piontek Inc. CITY / STATE: PO Box 1642 Independence, MO 64055 EMPLOYER: <input type="checkbox"/> COMMITTEE:	10/24/2008 ----- \$ 1,000.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Carolyn Jeffrey CITY / STATE: 2622 East Hwy. 24 Moberly, MO 65270 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 125.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: James Jenkins CITY / STATE: 526 Purdue Ave. Saint Louis, MO 63130 EMPLOYER: Washington University Professor <input type="checkbox"/> COMMITTEE:	10/30/2008 ----- \$ 300.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Allan Johnson CITY / STATE: 53 Waterside Ln Camdenton, MO 65020 EMPLOYER: USDA Exec <input type="checkbox"/> COMMITTEE:	10/29/2008 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

**TOTAL: ITEMIZED CONTRIBUTIONS** --

**(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)**



**MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

OFFICE USE ONLY

NAME OF COMMITTEE HULSHOF FOR GOVERNOR INC	DATE 12/3/2008
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NAME: ADDRESS: Sally Johnston CITY / STATE: 4 Town & Country Dr. EMPLOYER: Saint Louis, MO 63124 Homemaker <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 150.00	\$ 150.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Georgia Jordan CITY / STATE: 1 McKnight Pl. Apt 363 EMPLOYER: Saint Louis, MO 63124 Retired <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Joshua L. Potterfield Trucking Inc. CITY / STATE: P. O. Box 296 EMPLOYER: Monroe City, MO 63456 <input type="checkbox"/> COMMITTEE:	10/31/2008 ----- \$ 650.00	\$ 650.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jerry Karez CITY / STATE: 14327 White Birch Valley Ln. EMPLOYER: Chesterfield, MO 63017 Self Employed Contractor <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 110.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: L. Brenton Karhoff CITY / STATE: 309 E Marion St P.O. box 75 EMPLOYER: Edina, MO 63537 Knox County Collector <input type="checkbox"/> COMMITTEE:	10/27/2008 ----- \$ 250.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: L. Brenton Karhoff CITY / STATE: 309 E Marion St P.O. box 75 EMPLOYER: Edina, MO 63537 Knox County Collector <input type="checkbox"/> COMMITTEE:	10/27/2008 ----- \$ 250.00	\$ 150.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Dorothy Kaye CITY / STATE: 12499 Kaye Rd EMPLOYER: Sumner, MO 64681 Self Employed Farmer <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 675.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Harry Kenagy CITY / STATE: 401 Strawbridge Ct. EMPLOYER: Marionville, MO 65705 Requested <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 125.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

**TOTAL: ITEMIZED CONTRIBUTIONS** --

**(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)**



**MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

OFFICE USE ONLY

NAME OF COMMITTEE HULSHOF FOR GOVERNOR INC	DATE 12/3/2008
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NAME: ADDRESS: Teco Kim CITY/STATE: 418 Spring Meadows Dr Ballwin, MO 63011 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	10/29/2008 ----- \$ 150.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Francis Kimbel Jr. CITY/STATE: 3015 Bray Ave. Columbia, MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 160.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Nancy Kirkpatrick CITY/STATE: 1616 State Hwy N. Charleston, MO 63834 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 810.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: The Knapheide Manufacturing Co. CITY/STATE: 1848 Westphalia Stresse Quincy, IL 62305 EMPLOYER: <input type="checkbox"/> COMMITTEE:	10/27/2008 ----- \$ 2,000.00	\$ 2,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Robert Koetting CITY/STATE: 900 S. Hanley Rd. Apt 11C Saint Louis, MO 63105 EMPLOYER: Self Employed Retired <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 300.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Robert Koetting CITY/STATE: 900 S. Hanley Rd. Apt 11C Saint Louis, MO 63105 EMPLOYER: Self Employed Retired <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 300.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Beverly Kraemer CITY/STATE: 27 Westwood CC Gr. PO Box 410473 Saint Louis, MO 63141 EMPLOYER: St. Louis Pathlogy Assoc. Physician <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 750.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: John Kramer Jr. CITY/STATE: 9821 Log Cabin Ct. Saint Louis, MO 63124 EMPLOYER: Engineer <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

**TOTAL: ITEMIZED CONTRIBUTIONS** --

**(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)**



**MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

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NAME OF COMMITTEE HULSHOF FOR GOVERNOR INC	DATE 12/3/2008
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NAME: ADDRESS: Joseph Kras CITY/STATE: 9515 Old Bonhomme Rd. OLIVETTE, MO 63132 EMPLOYER: Washington University Medical Physician <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Fred Kummer Jr. CITY/STATE: 11 Squires Lane SAINT LOUIS, MO 63131 EMPLOYER: HBE Corporation Owner <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 2,000.00	\$ 2,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Teresa Kuss CITY/STATE: 4992 N Irvin Loop COLUMBIA, MO 65202 EMPLOYER: Gerbes Pharmacy Pharmacist <input type="checkbox"/> COMMITTEE:	10/27/2008 ----- \$ 1,600.00	\$ 300.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Karen Ladd CITY/STATE: 1303 W. Main St. WASHINGTON, MO 63090 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	10/30/2008 ----- \$ 300.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Patricia Lane CITY/STATE: 4 Oakleigh Lane SAINT LOUIS, MO 63124 EMPLOYER: Self Employed <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 3,300.00	\$ 2,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Charles Lang CITY/STATE: 216 Whiting Ln. CHESTERFIELD, MO 63005 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 200.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Joan Langenberg CITY/STATE: 41 Glen Eagles Dr. SAINT LOUIS, MO 63124 EMPLOYER: Requested <input type="checkbox"/> COMMITTEE:	10/27/2008 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Harold Lankford CITY/STATE: 9 Park Circle MEXICO, MO 65265 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 265.00	\$ 35.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

**TOTAL: ITEMIZED CONTRIBUTIONS** --

**(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)**



**MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

OFFICE USE ONLY

NAME OF COMMITTEE HULSHOF FOR GOVERNOR INC	DATE 12/3/2008
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<b>3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)</b> NAME: ADDRESS: Norman Lause CITY / STATE: 2314 Eleanor Dr. EMPLOYER: Washington, MO 63090 Retired <input type="checkbox"/> COMMITTEE:	11/14/2008 ----- \$ 425.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mark Leidy CITY / STATE: 17683 Bridgeway Circle EMPLOYER: Chesterfield, MO 63005 Monsanto Co. <input type="checkbox"/> COMMITTEE:	10/27/2008 ----- \$ 1,600.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Leo O'Laughlin Inc. CITY / STATE: 499 N Fourth St EMPLOYER: Shelbina, MO 63468 <input type="checkbox"/> COMMITTEE:	10/31/2008 ----- \$ 650.00	\$ 650.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Becky Link CITY / STATE: 258 Dickens Farm Lane EMPLOYER: Ballwin, MO 63021 Requested <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 125.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Martha Link CITY / STATE: 2165 Highway BB EMPLOYER: Huntsville, MO 65259 Requested <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 150.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Martha Link CITY / STATE: 2165 Highway BB EMPLOYER: Huntsville, MO 65259 Requested <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 200.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Rodney Loesch CITY / STATE: 1440 Trails End EMPLOYER: Moberly, MO 65270 Waddell & Reed Inc. Financial Planner <input type="checkbox"/> COMMITTEE:	11/1/2008 ----- \$ 350.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Sam Lomax CITY / STATE: 1701 Manning EMPLOYER: Hannibal, MO 63401 Requested <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 150.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

<b>TOTAL: ITEMIZED CONTRIBUTIONS</b>		--
<b>(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)</b>		



**MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

OFFICE USE ONLY

NAME OF COMMITTEE HULSHOF FOR GOVERNOR INC	DATE 12/3/2008
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<b>3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)</b> NAME: ADDRESS: Walter Luehrman CITY / STATE: 15810 Highway F Higginsville, MO 64037 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 175.00	\$ 25.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Brice Luetkemeyer CITY / STATE: PO Box 86 Saint Elizabeth, MO 65075 EMPLOYER: Bank of St. Elizabeth Banker <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 950.00	\$ 200.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Catherine Lutz CITY / STATE: 340 Kimberly Dr. Paducah, KY 42001 EMPLOYER: Homemaker <input type="checkbox"/> COMMITTEE:	10/27/2008 ----- \$ 1,000.00	\$ 625.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Sharon Lynch CITY / STATE: 2708 Lacewood Dr Columbia, MO 65201 EMPLOYER: UMB Trust Officer <input type="checkbox"/> COMMITTEE:	10/27/2008 ----- \$ 500.00	\$ 500.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Susan MacDonald CITY / STATE: 7254 Maryland Ave. Saint Louis, MO 63130 EMPLOYER: Homemaker <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 200.00	\$ 100.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Maher Brothers Inc. CITY / STATE: 26409 Monroe Road 583 Monroe City, MO 63456 EMPLOYER: <input type="checkbox"/> COMMITTEE:	10/31/2008 ----- \$ 650.00	\$ 650.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Tom Marhefka CITY / STATE: PO Box 1007 West Plains, MO 65775 EMPLOYER: KUPH Radio <input type="checkbox"/> COMMITTEE:	10/30/2008 ----- \$ 1,000.00	\$ 500.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: John Marshall CITY / STATE: 1201 Sutton Dr Columbia, MO 65203 EMPLOYER: University of Missouri Professor <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 150.00	\$ 50.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

**TOTAL: ITEMIZED CONTRIBUTIONS** --

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



**MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

OFFICE USE ONLY

NAME OF COMMITTEE HULSHOF FOR GOVERNOR INC	DATE 12/3/2008
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NAME: ADDRESS: Karen Masterson CITY / STATE: 815 Plymouth Rock Drive Des Peres, MO 63131 EMPLOYER: Homemaker <input type="checkbox"/> COMMITTEE:	11/5/2008 ----- \$ 160.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Marlene Maulsby CITY / STATE: 1305 Pine Dr. Macon, MO 63552 EMPLOYER: Modern Cleaners Dry Cleaner <input type="checkbox"/> COMMITTEE:	10/30/2008 ----- \$ 290.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Michael Maurizi CITY / STATE: 2015 Woodhollow Drive Columbia, MO 65203 EMPLOYER: Self Employed Physician <input type="checkbox"/> COMMITTEE:	10/29/2008 ----- \$ 1,000.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Warren McClure CITY / STATE: 121 Platt Road Union, MO 63084 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	10/30/2008 ----- \$ 350.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Thea McGaugh CITY / STATE: 3434 Craig Lane Saint Joseph, MO 64506 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 250.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Debbi McGinnis CITY / STATE: 1030 E 444th Rd Bolivar, MO 65613 EMPLOYER: Polk County Assesor <input type="checkbox"/> COMMITTEE:	10/27/2008 ----- \$ 150.00	\$ 150.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jack McKee CITY / STATE: 35 Frederick Ln Saint Louis, MO 63122 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 300.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: J.P. McLane CITY / STATE: PO Box 567 Poplar Bluff, MO 63902 EMPLOYER: McLane Transport Inc. <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 750.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

**TOTAL: ITEMIZED CONTRIBUTIONS** --

**(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)**



**MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

OFFICE USE ONLY

NAME OF COMMITTEE HULSHOF FOR GOVERNOR INC	DATE 12/3/2008
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<b>3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)</b> NAME: ADDRESS: Robert McMahon CITY / STATE: 740 High Hampton Rd. Saint Louis, MO 63124 EMPLOYER: St. Louis Gastro Physician <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 400.00	\$ 200.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Fred McQueary CITY / STATE: PO Box 5955 Springfield, MO 65801 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 3,350.00	\$ 1,000.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: AJ McRoberts CITY / STATE: Rt 1 Box 115A Malta Bend, MO 65339 EMPLOYER: Self Employed Accountant <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 125.00	\$ 100.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Alan Miller CITY / STATE: 135 Wyckcliffe Pl. Saint Louis, MO 63141 EMPLOYER: Requested <input type="checkbox"/> COMMITTEE:	10/27/2008 ----- \$ 300.00	\$ 300.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Missouri Association of Municipal Utilities CITY / STATE: 2407 W. Ash Columbia, MO 65203 EMPLOYER: <input type="checkbox"/> COMMITTEE:	10/27/2008 ----- \$ 250.00	\$ 250.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: MO Assessors Association Legislative Account CITY / STATE: P.O. Box 339 New London, MO 63459 EMPLOYER: <input type="checkbox"/> COMMITTEE:	10/31/2008 ----- \$ 500.00	\$ 300.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: David Montgomery CITY / STATE: PO Box 218 Willow Springs, MO 65793 EMPLOYER: Cost Energy Corporation <input type="checkbox"/> COMMITTEE:	11/7/2008 ----- \$ 130.00	\$ 30.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: John Moreton CITY / STATE: 201 South Clayton St. Charleston, MO 63834 EMPLOYER: Self Employed Farmer <input type="checkbox"/> COMMITTEE:	11/7/2008 ----- \$ 275.00	\$ 150.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

<b>TOTAL: ITEMIZED CONTRIBUTIONS</b>	<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;">--</div>
<b>(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)</b>	



**MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

OFFICE USE ONLY

NAME OF COMMITTEE HULSHOF FOR GOVERNOR INC	DATE 12/3/2008
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NAME: ADDRESS: R. Morris CITY/STATE: 228 Oakwood Ave. EMPLOYER: Webster Groves, MO 63119 St. Louis Oncology Associates Inc. Physician <input type="checkbox"/> COMMITTEE:	10/30/2008 \$ 500.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: William Musick CITY/STATE: 1104 Dunbar Dr. EMPLOYER: Columbia, MO 65203 Capital Emergency Physicians ER Physician <input type="checkbox"/> COMMITTEE:	10/28/2008 \$ 300.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Namic Adminstrative Fund CITY/STATE: PO Box 68700 EMPLOYER: Indianapolis, IN 46268 <input type="checkbox"/> COMMITTEE:	10/27/2008 \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Joyce Norton CITY/STATE: RR 1 Box 21 EMPLOYER: Knox City, MO 63446 Self Employed Dog Breeder <input type="checkbox"/> COMMITTEE:	11/4/2008 \$ 175.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Edgar Oetting CITY/STATE: 1015 S. Maple St. EMPLOYER: Concordia, MO 64020 Retired <input type="checkbox"/> COMMITTEE:	11/3/2008 \$ 150.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Beth Orscheln CITY/STATE: 4016 Glen Eagle Dr. EMPLOYER: Columbia, MO 65203 Homemaker <input type="checkbox"/> COMMITTEE:	10/28/2008 \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Osage Door Company CITY/STATE: 302 E South Street EMPLOYER: Ozark, MO 65721 <input type="checkbox"/> COMMITTEE:	10/27/2008 \$ 1,000.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Robert Osborn CITY/STATE: 7720 Callie Ct. EMPLOYER: O Fallon, MO 63368 Retired <input type="checkbox"/> COMMITTEE:	10/31/2008 \$ 3,500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

**TOTAL: ITEMIZED CONTRIBUTIONS** --

**(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)**



**MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

OFFICE USE ONLY

NAME OF COMMITTEE HULSHOF FOR GOVERNOR INC	DATE 12/3/2008
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<b>3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)</b> NAME: ADDRESS: Lynne Parriott CITY / STATE: 8753 Washington EMPLOYER: Saint Louis, MO 63124 Self-employed <input type="checkbox"/> COMMITTEE:	10/30/2008 ----- \$ 250.00	\$ 200.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Elroy Peters CITY / STATE: 2261 Country Ln. EMPLOYER: Columbia, MO 65201 Retired <input type="checkbox"/> COMMITTEE:	11/4/2008 ----- \$ 1,300.00	\$ 100.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Barbara Pickering CITY / STATE: 525 Lakeview Road EMPLOYER: Mexico, MO 65265 City of Mexico MO <input type="checkbox"/> COMMITTEE:	10/31/2008 ----- \$ 220.00	\$ 20.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Connie Pickering CITY / STATE: 403 N Western St. EMPLOYER: Mexico, MO 65265 City of Mexico MO <input type="checkbox"/> COMMITTEE:	10/31/2008 ----- \$ 370.00	\$ 20.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: James Piontek CITY / STATE: 1495 Hemlock Ct. EMPLOYER: Liberty, MO 64068 Self Employed Physician <input type="checkbox"/> COMMITTEE:	10/24/2008 ----- \$ 1,000.00	\$ 1,000.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Portalnd Cement Association CITY / STATE: 5420 Old Orchard Road EMPLOYER: Skokie, IL 60077 <input type="checkbox"/> COMMITTEE:	10/27/2008 ----- \$ 500.00	\$ 500.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Steven Privette CITY / STATE: 103 E. Main EMPLOYER: Willow Springs, MO 65793 Self Employed Attorney <input type="checkbox"/> COMMITTEE:	10/27/2008 ----- \$ 3,850.00	\$ 2,500.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Somporn Puangsuvan CITY / STATE: 3103 S. Ward Ave. EMPLOYER: Caruthersville, MO 63830 Pemiscot Memorial Health Systems Physician <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 150.00	\$ 50.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

<b>TOTAL: ITEMIZED CONTRIBUTIONS</b>	<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;">--</div>
<b>(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)</b>	



**MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

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NAME OF COMMITTEE HULSHOF FOR GOVERNOR INC	DATE 12/3/2008
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<b>3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)</b> NAME: ADDRESS: Quincy Mack Sales & Service Inc. CITY/STATE: 5014 Broadway EMPLOYER: Quincy, IL 62305 <input type="checkbox"/> COMMITTEE:	10/31/2008 ----- \$ 650.00	\$ 650.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Russell Redburn CITY/STATE: 6541 Ridge Rd. EMPLOYER: Parkville, MO 64152 Central Power CEO <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 500.00	\$ 500.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ren Potterfield Trucking Inc. CITY/STATE: 404 US Hwy. 24 & 36 East EMPLOYER: Monroe City, MO 63456 <input type="checkbox"/> COMMITTEE:	10/31/2008 ----- \$ 2,850.00	\$ 1,500.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Sue Reynolds CITY/STATE: 24456 Bacon Bridge Rd. EMPLOYER: Jamestown, MO 65046 MO House of Representatives Legislator Assistant <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 200.00	\$ 50.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Donna Rice CITY/STATE: 12505 S. Highway N. EMPLOYER: Columbia, MO 65203 Retired <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 150.00	\$ 25.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Dale Roberts CITY/STATE: 308A. Douglas Dr. EMPLOYER: Ashland, MO 65010 State of Missouri Attorney <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 325.00	\$ 100.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Dale Roberts CITY/STATE: 308A. Douglas Dr. EMPLOYER: Ashland, MO 65010 State of Missouri Attorney <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 325.00	\$ 100.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: J. B. Rutledge CITY/STATE: 3120 Independence St. Apt 409 EMPLOYER: Cape Girardeau, MO 63703 Physician <input type="checkbox"/> COMMITTEE:	10/27/2008 ----- \$ 500.00	\$ 500.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

<b>TOTAL: ITEMIZED CONTRIBUTIONS</b>		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;">--</div>
<b>(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)</b>		



**MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

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NAME: ADDRESS: Quentin Salley CITY / STATE: P. O. Box 306 EMPLOYER: Oak Grove, MO 64075 Salley's Propane Inc. Mgr <input type="checkbox"/> COMMITTEE:	10/27/2008 ----- \$ 300.00	\$ 300.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Harry Sammons CITY / STATE: 4 Homestead View EMPLOYER: Washington, MO 63090 Retired Physician <input type="checkbox"/> COMMITTEE:	11/7/2008 ----- \$ 850.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Harvey Sayre CITY / STATE: 21851 Hwy P EMPLOYER: Lebanon, MO 65536 Requested <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 105.00	\$ 75.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mary Schaff CITY / STATE: 11933 Hilltop Greens Dr. EMPLOYER: Saint Louis, MO 63128 Homemaker <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 375.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Wayne Scharnhorst CITY / STATE: 8460 County Rd. 9550 EMPLOYER: West Plains, MO 65775 Howell County County Collector <input type="checkbox"/> COMMITTEE:	10/27/2008 ----- \$ 450.00	\$ 350.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Sandy Schnarre CITY / STATE: 19901 N. Farwest School Rd. EMPLOYER: Centralia, MO 65240 Self Employed Agriculture <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 270.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Arthur Schneider CITY / STATE: 3850 W. Applewood Crk. Rd. EMPLOYER: Columbia, MO 65203 University of MO Extension Regional Specialist <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 135.00	\$ 20.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Kurt Schultz CITY / STATE: 431 Conway Lake Dr. EMPLOYER: Saint Louis, MO 63141 Physician <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 150.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

<b>TOTAL: ITEMIZED CONTRIBUTIONS</b>		--
<b>(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)</b>		



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NAME: ADDRESS: Robert Sellenriek CITY/STATE: PO Box 237 Jonesburg, MO 63351 EMPLOYER: Self-employed <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 1,000.00	\$ 1,000.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Anita Semon CITY/STATE: 2441 Semon Rd. Columbia, MO 65202 EMPLOYER: Self Employed Sales <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 200.00	\$ 50.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Christopher Shove CITY/STATE: 211 E. 2nd St. Dearborn, MO 64439 EMPLOYER: Alfaisal University <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 1,350.00	\$ 1,350.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Dennis Shramek CITY/STATE: 2701 Comdy Rd 183 Williamsburg, MO 63388 EMPLOYER: Self Employed Farmer <input type="checkbox"/> COMMITTEE:	10/25/2008 ----- \$ 650.00	\$ 300.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Charles Smarr CITY/STATE: 1111 Lakeside Drive Columbia, MO 65203 EMPLOYER: Brydon Swearngen & England Attorney <input type="checkbox"/> COMMITTEE:	10/30/2008 ----- \$ 1,200.00	\$ 250.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ralph Smith CITY/STATE: 9 Harmonie Dr. Union, MO 63084 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 1,200.00	\$ 100.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Smith Surgical Services LLC CITY/STATE: 12348 Old Tesson Rd. Ste 180 Saint Louis, MO 63128 EMPLOYER: <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 1,000.00	\$ 1,000.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Smurfit-Stone Inc. CITY/STATE: Six City Place Drive Creve Coeur, MO 63141 EMPLOYER: <input type="checkbox"/> COMMITTEE:	10/31/2008 ----- \$ 21,350.00	\$ 10,000.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

<b>TOTAL: ITEMIZED CONTRIBUTIONS</b>	-----	--
<b>(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)</b>		



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NAME: ADDRESS: South County Anesthesia Associates LTD. CITY / STATE: P.O. Box 22407 Saint Louis, MO 63126 EMPLOYER: <input type="checkbox"/> COMMITTEE:	10/24/2008 ----- \$ 5,350.00	\$ 4,000.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Spalding Bus Line LLC CITY / STATE: 805 Park St Monroe City, MO 63456 EMPLOYER: <input type="checkbox"/> COMMITTEE:	10/31/2008 ----- \$ 350.00	\$ 350.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Douglas Sproull CITY / STATE: 9041 Haverford Terrace Lane Saint Louis, MO 63117 EMPLOYER: Warson Group VP Shoe Importer <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 150.00	\$ 100.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: St. Louis Medical Management Inc. CITY / STATE: 84 Kenrick Plaza Saint Louis, MO 63119 EMPLOYER: <input type="checkbox"/> COMMITTEE:	10/24/2008 ----- \$ 500.00	\$ 500.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jack Stanley CITY / STATE: 313 Oakridge Ct. Columbia, MO 65203 EMPLOYER: Self-employed <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 150.00	\$ 150.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: John Steele CITY / STATE: 1111 Silverwillow Ct. Fenton, MO 63026 EMPLOYER: Sara Lee Analyst <input type="checkbox"/> COMMITTEE:	11/1/2008 ----- \$ 450.00	\$ 25.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: John Steele CITY / STATE: 1111 Silverwillow Ct. Fenton, MO 63026 EMPLOYER: Sara Lee Analyst <input type="checkbox"/> COMMITTEE:	11/1/2008 ----- \$ 450.00	\$ 50.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Stuart Strickler CITY / STATE: RR 1 Box 67 A Williamstown, MO 63473 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 275.00	\$ 50.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

**TOTAL: ITEMIZED CONTRIBUTIONS** --

**(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)**



**MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

OFFICE USE ONLY

NAME OF COMMITTEE HULSHOF FOR GOVERNOR INC	DATE 12/3/2008
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**INSTRUCTIONS**

**PURPOSE:** The purpose of the Contributions Received supplement is to provide a printed outline for attaching additional pages to Form CD1 (Contributions Received). This form should be used as additional space for reporting persons contributing more than \$100 and for committee contributions. This form may be reproduced as needed.

Total all itemized contributions at the bottom of the page and carry to item 7 (Subtotal: Itemized Contributions From Any Attached Pages) on Form CD-1.

If further information is needed concerning reporting itemized expenditures, see Form CD-1 Instructions.

A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE. 3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)	4. DATE RECEIVED AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
NAME: ADDRESS: Anthony Stubblefield CITY/STATE: 6334 S. Stone Hedge Ct. Ozark, MO 65721 EMPLOYER: Reliable Auto Inc. <input type="checkbox"/> COMMITTEE:	10/27/2008 ----- \$ 1,000.00	\$ 1,000.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Supreme Tool and Die Co. CITY/STATE: 1536 Fenpark Drive Fenton, MO 63026 EMPLOYER: <input type="checkbox"/> COMMITTEE:	10/27/2008 ----- \$ 500.00	\$ 500.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Kimberly Sutter CITY/STATE: 900 Town and Country Est Ct Saint Louis, MO 63141 EMPLOYER: Monsanto Co. <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 250.00	\$ 250.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Hal Swaney CITY/STATE: 15855 Country Ln E Platte City, MO 64079 EMPLOYER: Self Employed Farmer <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 2,200.00	\$ 100.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: David Swartz CITY/STATE: 7950 Audrain Road 112 Centralia, MO 65240 EMPLOYER: Farmer <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 150.00	\$ 150.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Yongping Tao CITY/STATE: 14210 Stifel Ln. Town And Country, MO 63017 EMPLOYER: Physician <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 150.00	\$ 150.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: TeleOne Inc. CITY/STATE: 141 Chesterfield Industrial Blvd Chesterfield, MO 63005 EMPLOYER: <input type="checkbox"/> COMMITTEE:	10/27/2008 ----- \$ 2,350.00	\$ 1,000.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Terry Critten Ins. Agency Inc. CITY/STATE: 230 5th Street Monroe City, MO 63456 EMPLOYER: <input type="checkbox"/> COMMITTEE:	10/31/2008 ----- \$ 350.00	\$ 350.00  <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

**TOTAL: ITEMIZED CONTRIBUTIONS** --

**(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)**



**MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

OFFICE USE ONLY

NAME OF COMMITTEE HULSHOF FOR GOVERNOR INC	DATE 12/3/2008
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**INSTRUCTIONS**

**PURPOSE:** The purpose of the Contributions Received supplement is to provide a printed outline for attaching additional pages to Form CD1 (Contributions Received). This form should be used as additional space for reporting persons contributing more than \$100 and for committee contributions. This form may be reproduced as needed.

Total all itemized contributions at the bottom of the page and carry to item 7 (Subtotal: Itemized Contributions From Any Attached Pages) on Form CD-1.

If further information is needed concerning reporting itemized expenditures, see Form CD-1 Instructions.

A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE. 3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)	4. DATE RECEIVED AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
NAME: ADDRESS: Jeffrey Thomasson CITY/STATE: No. 3 Brookside Ln. St. Louis, MO 63124 EMPLOYER: West Co. Radiology Physician <input type="checkbox"/> COMMITTEE:	10/24/2008 ----- \$ 2,350.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Tina Oil & Propane L.L.C. CITY/STATE: P. O. Box 100 Tina, MO 64682 EMPLOYER: <input type="checkbox"/> COMMITTEE:	10/27/2008 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Bradley Todd CITY/STATE: 722 South Fairfax St. Alexandria, VA 22314 EMPLOYER: On Message Inc. <input type="checkbox"/> COMMITTEE:	11/3/2008 ----- \$ 2,000.00	\$ 2,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Todd Hays Farms Inc. CITY/STATE: 6668 County Road 245 Monroe City, MO 63456 EMPLOYER: <input type="checkbox"/> COMMITTEE:	10/31/2008 ----- \$ 650.00	\$ 650.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Steven Trulaske Sr. CITY/STATE: PO Box 97 O Fallon, MO 63366 EMPLOYER: Self Employed Manufacturing <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Trust GDC CITY/STATE: 123 North Sixth Street Hannibal, MO 63401 EMPLOYER: <input type="checkbox"/> COMMITTEE:	10/31/2008 ----- \$ 650.00	\$ 650.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Brian Underwood CITY/STATE: 5 Lombardy Way Saint Louis, MO 63138 EMPLOYER: Wachovia Securities LLC Attorney <input type="checkbox"/> COMMITTEE:	10/29/2008 ----- \$ 8,850.00	\$ 2,500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: John Vanmarter CITY/STATE: PO Box 284 Monroe City, MO 63456 EMPLOYER: Requested <input type="checkbox"/> COMMITTEE:	11/14/2008 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

**TOTAL: ITEMIZED CONTRIBUTIONS** --

**(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)**



**MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

OFFICE USE ONLY

NAME OF COMMITTEE HULSHOF FOR GOVERNOR INC	DATE 12/3/2008
---	-------------------

**INSTRUCTIONS**

**PURPOSE:** The purpose of the Contributions Received supplement is to provide a printed outline for attaching additional pages to Form CD1 (Contributions Received). This form should be used as additional space for reporting persons contributing more than \$100 and for committee contributions. This form may be reproduced as needed.

Total all itemized contributions at the bottom of the page and carry to item 7 (Subtotal: Itemized Contributions From Any Attached Pages) on Form CD-1.

If further information is needed concerning reporting itemized expenditures, see Form CD-1 Instructions.

A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE. 3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
NAME: ADDRESS: Jorge Viamontes CITY / STATE: 11922 Sackston Ridge Dr. EMPLOYER: Saint Louis, MO 63141 Physician <input type="checkbox"/> COMMITTEE:	10/30/2008 ----- \$ 500.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Richard Wagner CITY / STATE: PO Box 144 EMPLOYER: Jefferson City, MO 65102 St. Louis Auto <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 200.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: David Walker CITY / STATE: 1121 County Road 388 EMPLOYER: New Bloomfield, MO 65063 Department of Natural Resources Environmental Engineer <input type="checkbox"/> COMMITTEE:	10/28/2008 ----- \$ 150.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:	\$ -----	\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:	\$ -----	\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:	\$ -----	\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:	\$ -----	\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:	\$ -----	\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

<b>TOTAL: ITEMIZED CONTRIBUTIONS</b>		\$ -----
(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)		



**MISSOURI ETHICS COMMISSION**  
**EXPENDITURES AND CONTRIBUTIONS MADE**  
 INSTRUCTIONS ON REVERSE SIDE

OFFICE USE ONLY

1. NAME OF COMMITTEE HULSHOF FOR GOVERNOR INC		2. REPORT DATE 12/3/2008	
<b>A. EXPENDITURES OF \$100 OR LESS BY CATEGORY</b> (LIST PAYMENTS TO CAMPAIGN WORKERS IN SECTION B BELOW)			4. AMOUNT PAID OR INCURRED THIS PERIOD
3. CATEGORY OF EXPENDITURE View Supplemental Form(s)			
5. SUBTOTAL: NON-ITEMIZED EXPENDITURES THIS PAGE (SUM COLUMN 4)			\$ 0.00
6. SUBTOTAL: NON-ITEMIZED EXPENDITURES ANY ATTACHED PAGES			+ 2,927.23
7. TOTAL: NON-ITEMIZED EXPENDITURES THIS PERIOD (SUM 5 + 6)			\$ 2,927.23
<b>B. ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS</b>		9. DATE	10. PURPOSE - (IF PAYMENT WAS TO A CAMPAIGN WORKER, SHOW AGGREGATE PAID)
8. NAME AND ADDRESS OF RECIPIENT			11. AMOUNT THIS PERIOD
NAME:			\$
ADDRESS:			<input type="checkbox"/> PAID
CITY / STATE:			<input type="checkbox"/> INCURRED
NAME:			\$
ADDRESS: View Supplemental Form(s)			<input type="checkbox"/> PAID
CITY / STATE:			<input type="checkbox"/> INCURRED
NAME:			\$
ADDRESS:			<input type="checkbox"/> PAID
CITY / STATE:			<input type="checkbox"/> INCURRED
NAME:			\$
ADDRESS:			<input type="checkbox"/> PAID
CITY / STATE:			<input type="checkbox"/> INCURRED
NAME:			\$
ADDRESS:			<input type="checkbox"/> PAID
CITY / STATE:			<input type="checkbox"/> INCURRED
12. SUBTOTAL: THIS PAGE (SUM COLUMN 11)			\$ 0.00
13. SUBTOTAL: ANY ATTACHED PAGES			+ 874,195.97
14. TOTAL: ITEMIZED EXPENDITURES THIS PERIOD (SUM 12 +13)			\$ 874,195.97
15. TOTAL: MONETARY EXPENDITURES THIS PERIOD (SUM 7 + 14)			\$ 877,123.20
16. AMOUNT OF LINE 15 WHICH WAS PAID OUT THIS PERIOD			\$ 679,432.07
17. AMOUNT OF LINE 15 WHICH WAS DEBT INCURRED THIS PERIOD			\$ 82,556.02
18. IF COMMITTEE MADE ANY IN-KIND EXPENDITURES THIS PERIOD, LIST AMOUNT			\$ 115,135.11
19. FUNDS USED FOR REPAYING LOANS THIS PERIOD (ATTACH FORM CD1B)			\$ 0.00
<b>C. CONTRIBUTIONS MADE (REGARDLESS OF AMOUNT)</b>		21. DATE	22. AMOUNT
20. NAME AND ADDRESS OF CANDIDATE OR COMMITTEE			\$
NAME:			<input type="checkbox"/> MONETARY
ADDRESS:			<input type="checkbox"/> IN-KIND
CITY / STATE:			\$
NAME:			<input type="checkbox"/> MONETARY
ADDRESS:			<input type="checkbox"/> IN-KIND
CITY / STATE:			\$
NAME:			<input type="checkbox"/> MONETARY
ADDRESS:			<input type="checkbox"/> IN-KIND
CITY / STATE:			\$
23. SUBTOTAL: THIS PAGE (SUM COLUMN 22)			\$ 0.00
24. SUBTOTAL: ANY ATTACHED PAGES			\$ 0.00
25. TOTAL: MONETARY CONTRIBUTIONS MADE THIS PERIOD			\$ 0.00
26. IF COMMITTEE MADE ANY LOANS THIS PERIOD, LIST AMOUNT			\$ 0.00
27. TOTAL: ALL MONETARY CONTRIBUTIONS AND LOANS MADE THIS PERIOD (SUM 25 + 26)			\$ 0.00
28. TOTAL: IN-KIND CONTRIBUTIONS MADE THIS PERIOD, LIST AMOUNT			\$ 0.00





**MISSOURI ETHICS COMMISSION  
ITEMIZED EXPENDITURES OVER \$100 SUPPLEMENTAL FORM**

OFFICE USE ONLY

NAME OF COMMITTEE HULSHOF FOR GOVERNOR INC		REPORT DATE 12/3/2008		
<b>ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS</b>		DATE	PURPOSE - (IF PAYMENT WAS TO A CAMPAIGN WORKER, SHOW AGGREGATE PAID)	AMOUNT THIS PERIOD
NAME AND ADDRESS OF RECIPIENT				
NAME: Thomson Printing ADDRESS: 601 N. Kingshighway CITY/STATE: Saint Charles , MO 63301		11/3/2008	Printing \$ 0.00	\$ PAID 585.09 <input type="checkbox"/> INCURRED
NAME: Towner Communications Systems ADDRESS: 2511 B. Industrial Drive CITY/STATE: Jefferson City , MO 65109		11/18/2008	Rent \$ 0.00	\$ PAID 118.31 <input type="checkbox"/> INCURRED
NAME: UMB Bank ADDRESS: 300 Dix Rd. CITY/STATE: Jefferson City , MO 65109		10/24/2008	Merchant Fees \$ 0.00	\$ PAID 1,372.22 <input type="checkbox"/> INCURRED
NAME: UMB Bank ADDRESS: 300 Dix Rd. CITY/STATE: Jefferson City , MO 65109		11/15/2008	Payroll Taxes \$ 0.00	\$ PAID 186.68 <input type="checkbox"/> INCURRED
NAME: UMB Bank ADDRESS: 300 Dix Rd. CITY/STATE: Jefferson City , MO 65109		11/15/2008	Payroll Taxes \$ 0.00	\$ PAID 3,801.54 <input type="checkbox"/> INCURRED
NAME: UMB Bank ADDRESS: 300 Dix Rd. CITY/STATE: Jefferson City , MO 65109		11/28/2008	Merchant fees \$ 0.00	\$ PAID 150.50 <input type="checkbox"/> INCURRED
NAME: UMB Bank ADDRESS: 300 Dix Rd. CITY/STATE: Jefferson City , MO 65109		11/28/2008	Merchant fees \$ 0.00	\$ PAID 1,973.43 <input type="checkbox"/> INCURRED
NAME: Union Management Inc. ADDRESS: PO Box 1504 CITY/STATE: Columbia , MO 65205		10/31/2008	Prof. Services \$ 0.00	\$ PAID 700.00 <input type="checkbox"/> INCURRED
NAME: USPS ADDRESS: 1100 Town & Country Commons CITY/STATE: Chesterfield , MO 63017		11/6/2008	Postage \$ 0.00	\$ PAID 504.00 <input type="checkbox"/> INCURRED
NAME: Williams-Keepers LLC ADDRESS: PO Box 144 CITY/STATE: Jefferson City , MO 65102		10/31/2008	Acct/Compliance \$ 0.00	\$ PAID 35,000.00 <input type="checkbox"/> INCURRED
NAME: Williams-Keepers LLC ADDRESS: PO Box 144 CITY/STATE: Jefferson City , MO 65102		11/28/2008	Acct/Compliance \$ 0.00	\$ PAID 10,000.00 <input type="checkbox"/> INCURRED
NAME: Williams-Keepers LLC ADDRESS: PO Box 144 CITY/STATE: Jefferson City , MO 65102		11/28/2008	Reim Software \$ 0.00	\$ PAID 1,500.00 <input type="checkbox"/> INCURRED
NAME: American Direct Inc. ADDRESS: 1272 Corporate Park Dr. CITY/STATE: Forest , VA 24551		10/28/2008	Prof. Services \$ 0.00	\$ PAID 6,630.80 <input type="checkbox"/> INCURRED
NAME: Anthem BCBS ADDRESS: 1351 William Howard Taft Rd. CITY/STATE: Cincinnati , OH 45206		10/28/2008	Insurance \$ 0.00	\$ PAID 361.28 <input type="checkbox"/> INCURRED
NAME: AT & T Mobility ADDRESS: PO Box 6463 CITY/STATE: Carol Stream , IL 60197		11/25/2008	Telephone \$ 0.00	\$ PAID 3,369.27 <input type="checkbox"/> INCURRED
<b>TOTAL: ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS</b>				\$ --
<b>(CARRY TO ITEM 13. "SUBTOTAL: ANY ATTACHED PAGES" ON FORM CD-3)</b>				\$ --



**MISSOURI ETHICS COMMISSION  
ITEMIZED EXPENDITURES OVER \$100 SUPPLEMENTAL FORM**

OFFICE USE ONLY

NAME OF COMMITTEE HULSHOF FOR GOVERNOR INC		REPORT DATE 12/3/2008	
<b>ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS</b>		DATE	PURPOSE - (IF PAYMENT WAS TO A CAMPAIGN WORKER, SHOW AGGREGATE PAID)
NAME AND ADDRESS OF RECIPIENT			AMOUNT THIS PERIOD
NAME: August Evenings ADDRESS: 1422 South Big Bend Blvd. CITY/STATE: Saint Louis , MO 63117		11/3/2008	Fundraiser Exp. \$ 0.00 <input checked="" type="checkbox"/> PAID 2,000.00 <input type="checkbox"/> INCURRED
NAME: Raymond Baker ADDRESS: 2301 S Hastings Ct CITY/STATE: Columbia , MO 65203		10/28/2008	Reim. Travel \$ 61,463.00 <input checked="" type="checkbox"/> PAID 601.97 <input type="checkbox"/> INCURRED
NAME: Christopher Baker ADDRESS: 8461 N Route E CITY/STATE: Columbia , MO 65202		10/31/2008	Payroll \$ 46,531.58 <input checked="" type="checkbox"/> PAID 2,500.00 <input type="checkbox"/> INCURRED
NAME: Raymond Baker ADDRESS: 2301 S Hastings Ct CITY/STATE: Columbia , MO 65203		10/31/2008	Payroll \$ 61,463.00 <input checked="" type="checkbox"/> PAID 3,125.00 <input type="checkbox"/> INCURRED
NAME: Christopher Baker ADDRESS: 8461 N Route E CITY/STATE: Columbia , MO 65202		11/15/2008	Payroll \$ 46,531.58 <input checked="" type="checkbox"/> PAID 2,500.00 <input type="checkbox"/> INCURRED
NAME: Raymond Baker ADDRESS: 2301 S Hastings Ct CITY/STATE: Columbia , MO 65203		11/15/2008	Payroll \$ 61,463.00 <input checked="" type="checkbox"/> PAID 3,125.00 <input type="checkbox"/> INCURRED
NAME: Barnes Communications LLC ADDRESS: 119 East Dunklin St. Ste A CITY/STATE: Jefferson City , MO 65101		11/2/2008	Prof. Services \$ 0.00 <input checked="" type="checkbox"/> PAID 7,500.00 <input type="checkbox"/> INCURRED
NAME: Barnes Communications LLC ADDRESS: 119 East Dunklin St. Ste A CITY/STATE: Jefferson City , MO 65101		11/3/2008	Prof. Services \$ 0.00 <input checked="" type="checkbox"/> PAID 7,500.00 <input type="checkbox"/> INCURRED
NAME: Ross Branson ADDRESS: PO Box 8646 CITY/STATE: Springfield , MO 65801		10/31/2008	Payroll \$ 26,631.63 <input checked="" type="checkbox"/> PAID 1,250.00 <input type="checkbox"/> INCURRED
NAME: Ross Branson ADDRESS: PO Box 8646 CITY/STATE: Springfield , MO 65801		11/5/2008	Reim Travel \$ 26,631.63 <input checked="" type="checkbox"/> PAID 443.00 <input type="checkbox"/> INCURRED
NAME: Ross Branson ADDRESS: PO Box 8646 CITY/STATE: Springfield , MO 65801		11/5/2008	Reim. Supplies \$ 26,631.63 <input checked="" type="checkbox"/> PAID 197.00 <input type="checkbox"/> INCURRED
NAME: Ross Branson ADDRESS: PO Box 8646 CITY/STATE: Springfield , MO 65801		11/15/2008	Payroll \$ 26,631.63 <input checked="" type="checkbox"/> PAID 1,250.00 <input type="checkbox"/> INCURRED
NAME: Butler's Pantry ADDRESS: 5389 Arsenal St. CITY/STATE: Saint Louis , MO 63139		11/4/2008	Event Expense \$ 0.00 <input checked="" type="checkbox"/> PAID 1,405.38 <input type="checkbox"/> INCURRED
NAME: Campaign Solutions ADDRESS: 118 North Saint Asaph St. CITY/STATE: Alexandria , VA 22314		11/3/2008	Web Maintenance \$ 0.00 <input checked="" type="checkbox"/> PAID 1,275.00 <input type="checkbox"/> INCURRED
NAME: Campaign Solutions ADDRESS: 118 North Saint Asaph St. CITY/STATE: Alexandria , VA 22314		11/5/2008	Web Maintenance \$ 0.00 <input checked="" type="checkbox"/> PAID 421.60 <input type="checkbox"/> INCURRED
<b>TOTAL: ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS</b> (CARRY TO ITEM 13. "SUBTOTAL: ANY ATTACHED PAGES" ON FORM CD-3)			\$ --



**MISSOURI ETHICS COMMISSION  
ITEMIZED EXPENDITURES OVER \$100 SUPPLEMENTAL FORM**

OFFICE USE ONLY

NAME OF COMMITTEE HULSHOF FOR GOVERNOR INC		REPORT DATE 12/3/2008		
<b>ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS</b>		DATE	PURPOSE - (IF PAYMENT WAS TO A CAMPAIGN WORKER, SHOW AGGREGATE PAID)	AMOUNT THIS PERIOD
NAME AND ADDRESS OF RECIPIENT				
NAME: Campaign Solutions ADDRESS: 118 North Saint Asaph St. CITY/STATE: Alexandria , VA 22314		11/28/2008	Web Maintenance \$ 0.00	\$ 300.00 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Capital Enhancement Inc. ADDRESS: 12977 North Outer Forty Dr. CITY/STATE: St. Louis , MO 63141		10/28/2008	Prof. Services \$ 0.00	\$ 112,455.42 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Capital Enhancement Inc. ADDRESS: 12977 North Outer Forty Dr. CITY/STATE: St. Louis , MO 63141		11/4/2008	Prof. Services \$ 0.00	\$ 42,113.60 <input type="checkbox"/> PAID <input checked="" type="checkbox"/> INCURRED
NAME: Capital Enhancement Inc. ADDRESS: 12977 North Outer Forty Dr. CITY/STATE: St. Louis , MO 63141		11/4/2008	Prof. Services \$ 0.00	\$ 1,095.84 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Capital Enhancement Inc. ADDRESS: 12977 North Outer Forty Dr. CITY/STATE: St. Louis , MO 63141		11/4/2008	Prof. Services \$ 0.00	\$ 50,000.00 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Capital Enhancement Inc. ADDRESS: 12977 North Outer Forty Dr. CITY/STATE: St. Louis , MO 63141		11/5/2008	Reim Office \$ 0.00	\$ 1,545.26 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Capital Enhancement Inc. ADDRESS: 12977 North Outer Forty Dr. CITY/STATE: St. Louis , MO 63141		11/5/2008	Reim Postage \$ 0.00	\$ 715.26 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Catering St. Louis ADDRESS: 2141 59th St. CITY/STATE: Saint Louis , MO 63110		11/7/2008	Event Expense \$ 0.00	\$ 21,031.03 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: CD Inc. ADDRESS: PO Box 1877 CITY/STATE: Alexandria , VA 22313		11/10/2008	Web Maintenance \$ 0.00	\$ 303.03 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Century Tel ADDRESS: PO Box 4300 CITY/STATE: Carol Stream , IL 60197		11/3/2008	Telephone \$ 0.00	\$ 660.48 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Chase Park Plaza Hotel ADDRESS: 212 N. Kingshighway CITY/STATE: Saint Louis , MO 63108		10/28/2008	Travel \$ 0.00	\$ 1,741.94 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Chase Park Plaza Hotel ADDRESS: 212 N. Kingshighway CITY/STATE: Saint Louis , MO 63108		11/4/2008	Travel \$ 0.00	\$ 462.29 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: City of Columbia ADDRESS: PO Box 1676 CITY/STATE: Columbia , MO 65205		10/28/2008	Utilities \$ 0.00	\$ 148.61 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Jordan Clothier ADDRESS: 29 N. Cedar Lake Dr. W #302 CITY/STATE: Columbia , MO 65203		10/31/2008	Payroll \$ 5,938.30	\$ 1,250.00 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Jordan Clothier ADDRESS: 29 N. Cedar Lake Dr. W #302 CITY/STATE: Columbia , MO 65203		11/15/2008	Payroll \$ 5,938.30	\$ 1,250.00 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
<b>TOTAL: ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS</b>				
<b>(CARRY TO ITEM 13. "SUBTOTAL: ANY ATTACHED PAGES" ON FORM CD-3)</b>				\$ --



**MISSOURI ETHICS COMMISSION  
ITEMIZED EXPENDITURES OVER \$100 SUPPLEMENTAL FORM**

OFFICE USE ONLY

NAME OF COMMITTEE HULSHOF FOR GOVERNOR INC		REPORT DATE 12/3/2008		
<b>ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS</b>		DATE	PURPOSE - (IF PAYMENT WAS TO A CAMPAIGN WORKER, SHOW AGGREGATE PAID)	AMOUNT THIS PERIOD
NAME AND ADDRESS OF RECIPIENT				
NAME: Division of Employment Security ADDRESS: PO Box 888 CITY/STATE: Jefferson City , MO 65102		11/15/2008	Payroll Taxes \$ 0.00	\$ PAID 1,114.73 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Drury Lodge ADDRESS: 104 S. Vantage Dr. CITY/STATE: Cape Girardeau , MO 63701		10/29/2008	Travel \$ 0.00	\$ PAID 106.67 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Jeffrey Earl ADDRESS: 1406 Bristol Pl. Ct. CITY/STATE: Arnold , MO 63010		10/28/2008	Reim. Travel \$ 4,441.47	\$ PAID 183.37 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Jeffrey Earl ADDRESS: 1406 Bristol Pl. Ct. CITY/STATE: Arnold , MO 63010		10/31/2008	Payroll \$ 4,441.47	\$ PAID 637.50 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Jeffrey Earl ADDRESS: 1406 Bristol Pl. Ct. CITY/STATE: Arnold , MO 63010		11/15/2008	Payroll \$ 4,441.47	\$ PAID 637.50 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: E-Donation ADDRESS: 118 Saint Asaph St. CITY/STATE: Alexandria , VA 22314		10/24/2008	Merchant Fees \$ 0.00	\$ PAID 398.88 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: E-Donation ADDRESS: 118 Saint Asaph St. CITY/STATE: Alexandria , VA 22314		11/10/2008	Merchant Fees \$ 0.00	\$ PAID 887.60 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Enterprise Rent A Car ADDRESS: 112 N. Providence CITY/STATE: Columbia , MO 65203		11/6/2008	Travel \$ 0.00	\$ PAID 3,751.32 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Eric Zahnd for Platte County Prosecutor ADDRESS: 6406 NW Crystal Pool Drive CITY/STATE: Platte Woods , MO 64151		10/30/2008	In-Kind Expense \$ 0.00	\$ PAID 147.57 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Austin Estabrooks ADDRESS: 11501 Vemers Ford Rd. CITY/STATE: Columbia , MO 65201		10/28/2008	Reim. Travel \$ 8,748.31	\$ PAID 332.61 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Austin Estabrooks ADDRESS: 11501 Vemers Ford Rd. CITY/STATE: Columbia , MO 65201		10/31/2008	Payroll \$ 8,748.31	\$ PAID 1,250.00 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Austin Estabrooks ADDRESS: 11501 Vemers Ford Rd. CITY/STATE: Columbia , MO 65201		11/13/2008	Reim Travel \$ 8,748.31	\$ PAID 153.46 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Austin Estabrooks ADDRESS: 11501 Vemers Ford Rd. CITY/STATE: Columbia , MO 65201		11/15/2008	Payroll \$ 8,748.31	\$ PAID 1,250.00 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Jill Fansler ADDRESS: 2704 County Rd. 247 CITY/STATE: Kingdom City , MO 65262		10/31/2008	Payroll \$ 31,646.47	\$ PAID 2,083.33 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Jill Fansler ADDRESS: 2704 County Rd. 247 CITY/STATE: Kingdom City , MO 65262		11/15/2008	Payroll \$ 31,646.47	\$ PAID 2,083.33 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
<b>TOTAL: ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS</b>				\$ --
<b>(CARRY TO ITEM 13. "SUBTOTAL: ANY ATTACHED PAGES" ON FORM CD-3)</b>				\$ --



**MISSOURI ETHICS COMMISSION**  
**ITEMIZED EXPENDITURES OVER \$100 SUPPLEMENTAL FORM**

OFFICE USE ONLY

NAME OF COMMITTEE		REPORT DATE	
HULSHOF FOR GOVERNOR INC		12/3/2008	
ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS		DATE	PURPOSE - (IF PAYMENT WAS TO A CAMPAIGN WORKER, SHOW AGGREGATE PAID)
NAME AND ADDRESS OF RECIPIENT			AMOUNT THIS PERIOD
NAME: FLS Connect ADDRESS: 7300 Hudson Blvd. CITY/STATE: Saint Paul , MN 55128		10/31/2008	Conferencing \$ 0.00 <input checked="" type="checkbox"/> PAID 178.31 <input type="checkbox"/> INCURRED
NAME: FLS Connect ADDRESS: 7300 Hudson Blvd. CITY/STATE: Saint Paul , MN 55128		11/3/2008	Conferencing \$ 0.00 <input checked="" type="checkbox"/> PAID 489.16 <input type="checkbox"/> INCURRED
NAME: FLS Connect ADDRESS: 7300 Hudson Blvd. CITY/STATE: Saint Paul , MN 55128		11/3/2008	Conferencing \$ 0.00 <input checked="" type="checkbox"/> PAID 2,000.00 <input type="checkbox"/> INCURRED
NAME: FLS Connect ADDRESS: 7300 Hudson Blvd. CITY/STATE: Saint Paul , MN 55128		11/5/2008	Conferencing \$ 0.00 <input checked="" type="checkbox"/> PAID 220.02 <input type="checkbox"/> INCURRED
NAME: Mark Godfrey ADDRESS: 501 N. Clayview Dr. CITY/STATE: Liberty , MO 64068		10/28/2008	Reim. Travel \$ 17,008.42 <input checked="" type="checkbox"/> PAID 117.39 <input type="checkbox"/> INCURRED
NAME: Mark Godfrey ADDRESS: 501 N. Clayview Dr. CITY/STATE: Liberty , MO 64068		10/31/2008	Payroll \$ 17,008.42 <input checked="" type="checkbox"/> PAID 1,250.00 <input type="checkbox"/> INCURRED
NAME: Mark Godfrey ADDRESS: 501 N. Clayview Dr. CITY/STATE: Liberty , MO 64068		11/15/2008	Payroll \$ 17,008.42 <input checked="" type="checkbox"/> PAID 1,250.00 <input type="checkbox"/> INCURRED
NAME: The Goodson Company ADDRESS: 1915 Park Avenue CITY/STATE: Saint Louis , MO 63104		10/28/2008	Printing \$ 0.00 <input checked="" type="checkbox"/> PAID 702.01 <input type="checkbox"/> INCURRED
NAME: The Goodson Company ADDRESS: 1915 Park Avenue CITY/STATE: Saint Louis , MO 63104		10/28/2008	Printing \$ 0.00 <input checked="" type="checkbox"/> PAID 2,393.84 <input type="checkbox"/> INCURRED
NAME: High Way Media ADDRESS: 1008 Highway K CITY/STATE: O Fallon , MO 63366		10/31/2008	In-Kind Expense \$ 0.00 <input checked="" type="checkbox"/> PAID 625.00 <input type="checkbox"/> INCURRED
NAME: Holiday Inn Select ADDRESS: 2200 I-70 Drive S.W. CITY/STATE: Columbia , MO 65203		11/7/2008	Event Expense \$ 0.00 <input checked="" type="checkbox"/> PAID 2,503.12 <input type="checkbox"/> INCURRED
NAME: Holy Rosary PTO ADDRESS: 210 Belle Avenue CITY/STATE: Monroe City , MO 63456		11/3/2008	Event Expense \$ 0.00 <input checked="" type="checkbox"/> PAID 1,950.00 <input type="checkbox"/> INCURRED
NAME: Rush James ADDRESS: 154 North Central Ave. CITY/STATE: Saint Louis , MO 63105		10/28/2008	Reim. Travel \$ 19,300.36 <input checked="" type="checkbox"/> PAID 408.14 <input type="checkbox"/> INCURRED
NAME: Rush James ADDRESS: 154 North Central Ave. CITY/STATE: Saint Louis , MO 63105		10/31/2008	Payroll \$ 19,300.36 <input checked="" type="checkbox"/> PAID 1,250.00 <input type="checkbox"/> INCURRED
NAME: Rush James ADDRESS: 154 North Central Ave. CITY/STATE: Saint Louis , MO 63105		11/5/2008	Reim. Meals \$ 19,300.36 <input checked="" type="checkbox"/> PAID 120.71 <input type="checkbox"/> INCURRED
<b>TOTAL: ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS</b> <b>(CARRY TO ITEM 13. "SUBTOTAL: ANY ATTACHED PAGES" ON FORM CD-3)</b>			\$ --



**MISSOURI ETHICS COMMISSION**  
**ITEMIZED EXPENDITURES OVER \$100 SUPPLEMENTAL FORM**

OFFICE USE ONLY

NAME OF COMMITTEE		REPORT DATE	
HULSHOF FOR GOVERNOR INC		12/3/2008	
ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS		DATE	PURPOSE - (IF PAYMENT WAS TO A CAMPAIGN WORKER, SHOW AGGREGATE PAID)
NAME AND ADDRESS OF RECIPIENT			AMOUNT THIS PERIOD
NAME: Rush James ADDRESS: 154 North Central Ave. CITY/STATE: Saint Louis , MO 63105		11/5/2008	Reim. Travel \$ 19,300.36 <input checked="" type="checkbox"/> PAID 587.21 <input type="checkbox"/> INCURRED
NAME: Rush James ADDRESS: 154 North Central Ave. CITY/STATE: Saint Louis , MO 63105		11/15/2008	Payroll \$ 19,300.36 <input checked="" type="checkbox"/> PAID 1,250.00 <input type="checkbox"/> INCURRED
NAME: Rush James ADDRESS: 154 North Central Ave. CITY/STATE: Saint Louis , MO 63105		11/28/2008	Reim. Supplies \$ 19,300.36 <input checked="" type="checkbox"/> PAID 210.00 <input type="checkbox"/> INCURRED
NAME: John Hancock & Associates LLC ADDRESS: 16100 Chesterfield Pkwy W CITY/STATE: Chesterfield , MO 63017		11/3/2008	Prof. Services \$ 0.00 <input checked="" type="checkbox"/> PAID 15,000.00 <input type="checkbox"/> INCURRED
NAME: John Hancock & Associates LLC ADDRESS: 16100 Chesterfield Pkwy W CITY/STATE: Chesterfield , MO 63017		11/3/2008	Reim. Office \$ 0.00 <input checked="" type="checkbox"/> PAID 278.67 <input type="checkbox"/> INCURRED
NAME: John Hancock & Associates LLC ADDRESS: 16100 Chesterfield Pkwy W CITY/STATE: Chesterfield , MO 63017		11/3/2008	Reim. Travel \$ 0.00 <input checked="" type="checkbox"/> PAID 4,863.37 <input type="checkbox"/> INCURRED
NAME: John Hancock & Associates LLC ADDRESS: 16100 Chesterfield Pkwy W CITY/STATE: Chesterfield , MO 63017		11/28/2008	Prof. Services \$ 0.00 <input checked="" type="checkbox"/> PAID 15,000.00 <input type="checkbox"/> INCURRED
NAME: John Hancock & Associates LLC ADDRESS: 16100 Chesterfield Pkwy W CITY/STATE: Chesterfield , MO 63017		11/28/2008	Reim Travel \$ 0.00 <input checked="" type="checkbox"/> PAID 867.27 <input type="checkbox"/> INCURRED
NAME: Powell Kalish ADDRESS: 6237 McPherson Ave. CITY/STATE: Saint Louis , MO 63130		10/28/2008	Reim. Travel \$ 12,598.66 <input checked="" type="checkbox"/> PAID 444.76 <input type="checkbox"/> INCURRED
NAME: Powell Kalish ADDRESS: 6237 McPherson Ave. CITY/STATE: Saint Louis , MO 63130		10/31/2008	Payroll \$ 12,598.66 <input checked="" type="checkbox"/> PAID 1,250.00 <input type="checkbox"/> INCURRED
NAME: Powell Kalish ADDRESS: 6237 McPherson Ave. CITY/STATE: Saint Louis , MO 63130		11/5/2008	Reim. Travel \$ 12,598.66 <input checked="" type="checkbox"/> PAID 684.32 <input type="checkbox"/> INCURRED
NAME: Powell Kalish ADDRESS: 6237 McPherson Ave. CITY/STATE: Saint Louis , MO 63130		11/15/2008	Payroll \$ 12,598.66 <input checked="" type="checkbox"/> PAID 1,250.00 <input type="checkbox"/> INCURRED
NAME: Knights of Columbus ADDRESS: 404 US Hwy 24 - 36 East CITY/STATE: Monroe City , MO 63456		11/3/2008	Event Expense \$ 0.00 <input checked="" type="checkbox"/> PAID 800.00 <input type="checkbox"/> INCURRED
NAME: Medicom ADDRESS: PO Box 5744 CITY/STATE: Carol Stream , IL 60197		11/5/2008	Telephone \$ 0.00 <input checked="" type="checkbox"/> PAID 139.95 <input type="checkbox"/> INCURRED
NAME: Missouri Republican Party ADDRESS: 204 East Dunklin CITY/STATE: Jefferson City , MO 65101		11/3/2008	In-Kind Expense \$ 0.00 <input checked="" type="checkbox"/> PAID 113,450.00 <input type="checkbox"/> INCURRED
<b>TOTAL: ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS</b> (CARRY TO ITEM 13. "SUBTOTAL: ANY ATTACHED PAGES" ON FORM CD-3)			\$ --



**MISSOURI ETHICS COMMISSION**  
**ITEMIZED EXPENDITURES OVER \$100 SUPPLEMENTAL FORM**

OFFICE USE ONLY

NAME OF COMMITTEE		REPORT DATE		
HULSHOF FOR GOVERNOR INC		12/3/2008		
ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS		DATE	PURPOSE - (IF PAYMENT WAS TO A CAMPAIGN WORKER, SHOW AGGREGATE PAID)	AMOUNT THIS PERIOD
NAME AND ADDRESS OF RECIPIENT				
NAME: MO State Fair Foundation ADDRESS: 2503 W. 18th St. CITY/STATE: Sedalia , MO 65301		10/28/2008	Advertising \$ 0.00	\$ PAID 10,000.00 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Montgomery County Republican Central Committee ADDRESS: 205 N. Gladstone CITY/STATE: Jonesburg , MO 63351		10/31/2008	In-Kind Expense \$ 0.00	\$ PAID 189.00 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Newz Group ADDRESS: PO Box 873 CITY/STATE: Columbia , MO 65205		11/3/2008	Advertising \$ 0.00	\$ PAID 681.25 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Newz Group ADDRESS: PO Box 873 CITY/STATE: Columbia , MO 65205		11/11/2008	Advertising \$ 0.00	\$ PAID 168.75 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: On Message Inc. ADDRESS: 815 Slaters Lane CITY/STATE: Alexandria , VA 22314		10/28/2008	Media \$ 0.00	\$ PAID 891.05 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: On Message Inc. ADDRESS: 815 Slaters Lane CITY/STATE: Alexandria , VA 22314		10/28/2008	Media \$ 0.00	\$ PAID 1,608.12 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: On Message Inc. ADDRESS: 815 Slaters Lane CITY/STATE: Alexandria , VA 22314		10/28/2008	Media \$ 0.00	\$ PAID 2,807.72 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: On Message Inc. ADDRESS: 815 Slaters Lane CITY/STATE: Alexandria , VA 22314		10/28/2008	Media \$ 0.00	\$ PAID 7,108.16 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: On Message Inc. ADDRESS: 815 Slaters Lane CITY/STATE: Alexandria , VA 22314		10/28/2008	Media \$ 0.00	\$ PAID 7,555.36 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: On Message Inc. ADDRESS: 815 Slaters Lane CITY/STATE: Alexandria , VA 22314		10/28/2008	Media \$ 0.00	\$ PAID 9,417.65 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: On Message Inc. ADDRESS: 815 Slaters Lane CITY/STATE: Alexandria , VA 22314		10/28/2008	Media \$ 0.00	\$ PAID 12,255.20 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: On Message Inc. ADDRESS: 815 Slaters Lane CITY/STATE: Alexandria , VA 22314		10/28/2008	Media \$ 0.00	\$ PAID 14,642.44 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: On Message Inc. ADDRESS: 815 Slaters Lane CITY/STATE: Alexandria , VA 22314		10/28/2008	Prof. Services \$ 0.00	\$ PAID 100,000.00 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: On Message Inc. ADDRESS: 815 Slaters Lane CITY/STATE: Alexandria , VA 22314		11/3/2008	Media \$ 0.00	\$ PAID 15,740.00 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: On Message Inc. ADDRESS: 815 Slaters Lane CITY/STATE: Alexandria , VA 22314		11/3/2008	Prof. Services \$ 0.00	\$ PAID 40,442.42 <input type="checkbox"/> PAID <input checked="" type="checkbox"/> INCURRED
<b>TOTAL: ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS</b>				\$ --
<b>(CARRY TO ITEM 13. "SUBTOTAL: ANY ATTACHED PAGES" ON FORM CD-3)</b>				\$ --



**MISSOURI ETHICS COMMISSION  
ITEMIZED EXPENDITURES OVER \$100 SUPPLEMENTAL FORM**

OFFICE USE ONLY

NAME OF COMMITTEE HULSHOF FOR GOVERNOR INC		REPORT DATE 12/3/2008		
<b>ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS</b>		DATE	PURPOSE - (IF PAYMENT WAS TO A CAMPAIGN WORKER, SHOW AGGREGATE PAID)	AMOUNT THIS PERIOD
NAME AND ADDRESS OF RECIPIENT				
NAME: On Message Inc. ADDRESS: 815 Slaters Lane CITY/STATE: Alexandria , VA 22314		11/3/2008	Prof. Services \$ 0.00	\$ PAID 100,000.00 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: On Message Inc. ADDRESS: 815 Slaters Lane CITY/STATE: Alexandria , VA 22314		11/5/2008	Media \$ 0.00	\$ PAID 1,283.41 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Pat Patterson Photography ADDRESS: 2700 Bloomfield Rd. CITY/STATE: Cape Girardeau , MO 63703		10/28/2008	Photography \$ 0.00	\$ PAID 447.02 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Scott Peyton ADDRESS: 320 W. Sexton CITY/STATE: Harrisburg , MO 65256		10/31/2008	Payroll \$ 6,213.38	\$ PAID 1,250.00 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Scott Peyton ADDRESS: 320 W. Sexton CITY/STATE: Harrisburg , MO 65256		11/15/2008	Payroll \$ 6,213.38	\$ PAID 1,250.00 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Pike County Republican Central Committee ADDRESS: 22653 Pike 300 CITY/STATE: Bowling Green , MO 63334		10/29/2008	In-Kind Expense \$ 0.00	\$ PAID 275.63 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Jennifer Poeppelmeier ADDRESS: 3311 E. St. Charles Rd. CITY/STATE: Columbia , MO 65201		10/28/2008	Reim. Travel \$ 9,188.84	\$ PAID 152.43 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Jennifer Poeppelmeier ADDRESS: 3311 E. St. Charles Rd. CITY/STATE: Columbia , MO 65201		10/31/2008	Payroll \$ 9,188.84	\$ PAID 1,250.00 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Jennifer Poeppelmeier ADDRESS: 3311 E. St. Charles Rd. CITY/STATE: Columbia , MO 65201		11/5/2008	Reim Travel \$ 9,188.84	\$ PAID 378.11 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Jennifer Poeppelmeier ADDRESS: 3311 E. St. Charles Rd. CITY/STATE: Columbia , MO 65201		11/15/2008	Payroll \$ 9,188.84	\$ PAID 1,250.00 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Lesley Randolph ADDRESS: 701 Greer Street CITY/STATE: Oran , MO 63771		10/31/2008	Payroll \$ 55,256.94	\$ PAID 2,750.00 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Lesley Randolph ADDRESS: 701 Greer Street CITY/STATE: Oran , MO 63771		11/15/2008	Payroll \$ 55,256.94	\$ PAID 2,750.00 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Seth Rector ADDRESS: 33033 Lake St. CITY/STATE: Macon , MO 63552		10/28/2008	Reim Travel \$ 20,209.39	\$ PAID 320.71 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Seth Rector ADDRESS: 33033 Lake St. CITY/STATE: Macon , MO 63552		10/31/2008	Payroll \$ 20,209.39	\$ PAID 1,250.00 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Seth Rector ADDRESS: 33033 Lake St. CITY/STATE: Macon , MO 63552		11/5/2008	Reim Travel \$ 20,209.39	\$ PAID 256.00 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
<b>TOTAL: ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS</b>				
<b>(CARRY TO ITEM 13. "SUBTOTAL: ANY ATTACHED PAGES" ON FORM CD-3)</b>				\$ --



**MISSOURI ETHICS COMMISSION**  
**ITEMIZED EXPENDITURES OVER \$100 SUPPLEMENTAL FORM**

OFFICE USE ONLY

NAME OF COMMITTEE HULSHOF FOR GOVERNOR INC		REPORT DATE 12/3/2008	
<b>ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS</b>		DATE	PURPOSE - (IF PAYMENT WAS TO A CAMPAIGN WORKER, SHOW AGGREGATE PAID)
NAME AND ADDRESS OF RECIPIENT			AMOUNT THIS PERIOD
NAME: Seth Rector ADDRESS: 33033 Lake St. CITY/STATE: Macon , MO 63552		11/15/2008	Payroll \$ 20,209.39 <input checked="" type="checkbox"/> PAID 1,250.00 <input type="checkbox"/> INCURRED
NAME: Ron Richard 2008 ADDRESS: P.O. Box 1725 CITY/STATE: Joplin , MO 64802		10/29/2008	In-Kind Expense \$ 0.00 <input checked="" type="checkbox"/> PAID 348.00 <input type="checkbox"/> INCURRED
NAME: Ron's Family Restaurant ADDRESS: 2299 S. Spoede CITY/STATE: Warrenton , MO 63383		11/10/2008	Event Expense \$ 0.00 <input checked="" type="checkbox"/> PAID 1,932.00 <input type="checkbox"/> INCURRED
NAME: Donna Spickert ADDRESS: 7925 Bennett Drive CITY/STATE: Columbia , MO 65201		10/31/2008	Payroll \$ 20,643.33 <input checked="" type="checkbox"/> PAID 1,250.00 <input type="checkbox"/> INCURRED
NAME: Donna Spickert ADDRESS: 7925 Bennett Drive CITY/STATE: Columbia , MO 65201		11/15/2008	Payroll \$ 20,643.33 <input checked="" type="checkbox"/> PAID 1,250.00 <input type="checkbox"/> INCURRED
NAME: St. Louis Metro Voice ADDRESS: PO Box 1533 CITY/STATE: Saint Peters , MO 63376		11/11/2008	Advertising \$ 0.00 <input checked="" type="checkbox"/> PAID 840.00 <input type="checkbox"/> INCURRED
NAME: Nathaniel Starmer ADDRESS: 1225 Montana Pl CITY/STATE: Joplin , MO 64804		10/28/2008	Reim. Supplies \$ 8,735.21 <input checked="" type="checkbox"/> PAID 234.50 <input type="checkbox"/> INCURRED
NAME: Nathaniel Starmer ADDRESS: 1225 Montana Pl CITY/STATE: Joplin , MO 64804		10/28/2008	Reim. Travel \$ 8,735.21 <input checked="" type="checkbox"/> PAID 214.31 <input type="checkbox"/> INCURRED
NAME: Nathaniel Starmer ADDRESS: 1225 Montana Pl CITY/STATE: Joplin , MO 64804		10/31/2008	Payroll \$ 8,735.21 <input checked="" type="checkbox"/> PAID 1,250.00 <input type="checkbox"/> INCURRED
NAME: Nathaniel Starmer ADDRESS: 1225 Montana Pl CITY/STATE: Joplin , MO 64804		11/5/2008	Reim Office \$ 8,735.21 <input checked="" type="checkbox"/> PAID 130.16 <input type="checkbox"/> INCURRED
NAME: Nathaniel Starmer ADDRESS: 1225 Montana Pl CITY/STATE: Joplin , MO 64804		11/5/2008	Reim Travel \$ 8,735.21 <input checked="" type="checkbox"/> PAID 601.51 <input type="checkbox"/> INCURRED
NAME: Nathaniel Starmer ADDRESS: 1225 Montana Pl CITY/STATE: Joplin , MO 64804		11/15/2008	Payroll \$ 8,735.21 <input checked="" type="checkbox"/> PAID 1,250.00 <input type="checkbox"/> INCURRED
NAME: Sunset Country Club ADDRESS: 9555 S. Geyer Rd. CITY/STATE: Saint Louis , MO 63127		11/6/2008	Event Expense \$ 0.00 <input checked="" type="checkbox"/> PAID 1,867.23 <input type="checkbox"/> INCURRED
NAME: Thomson Printing ADDRESS: 601 N. Kingshighway CITY/STATE: Saint Charles , MO 63301		11/3/2008	Printing \$ 0.00 <input checked="" type="checkbox"/> PAID 436.88 <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY/STATE:			\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
<b>TOTAL: ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS</b> (CARRY TO ITEM 13. "SUBTOTAL: ANY ATTACHED PAGES" ON FORM CD-3)			\$ --



**MISSOURI ETHICS COMMISSION  
DIRECT EXPENDITURE REPORT**

INSTRUCTIONS ON REVERSE SIDE

OFFICE USE ONLY

1. NAME OF COMMITTEE HULSHOF FOR GOVERNOR INC	2. REPORT DATE 12/3/2008
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**DIRECT EXPENDITURE REPORT**

This form is used when expenditures listed on form CD3 have been made directly on behalf of a candidate or ballot measure issue. Candidate committees making expenditures only on behalf of the candidate for which their committee was formed do not complete this form.

**A. CANDIDATES**

3. CANDIDATE'S NAME AND ADDRESS	4. OFFICE SOUGHT	5. CHECK ONE SUPP.    OPP.	6. EXPENDITURE DATE (MM/DD/YY)	7. EXPENDITURE AMOUNT
NAME: ADDRESS: CITY STATE ZIP:		-		\$
NAME: ADDRESS: CITY STATE ZIP:		-		\$
NAME: ADDRESS: CITY STATE ZIP:		-		\$
NAME: ADDRESS: CITY STATE ZIP:		-		\$

**B. BALLOT MEASURES**

8. NAME OF BALLOT MEASURE (INCLUDE POLITICAL SUBDIVISION)	9. ELECTION DATE	10. CHECK ONE SUPP.    OPP.	11. EXPENDITURES THIS PERIOD	12. EXPENDITURES TO DATE
BALLOT MEASURE:  POLITICAL SUBDIVISION:		-	\$	\$
BALLOT MEASURE:  POLITICAL SUBDIVISION:		-	\$	\$
BALLOT MEASURE:  POLITICAL SUBDIVISION:		-	\$	\$





**MISSOURI ETHICS COMMISSION  
CONTRACTUAL RELATIONSHIP REPORT**

OFFICE USE ONLY

INSTRUCTIONS ON REVERSE SIDE

NAME OF COMMITTEE HULSHOF FOR GOVERNOR INC	DATE 12/3/2008
---	-------------------

**DESCRIPTION OF CONTRACTUAL RELATIONSHIP**

NAME OF CONTRIBUTOR		
NAME OF AGENCY / DEPARTMENT		
ADDRESS OF AGENCY / DEPARTMENT		
DATE OF CONTRACT START	DATE OF CONTRACT END	AMOUNT OF CONTRACT \$

**DESCRIPTION OF CONTRACTUAL RELATIONSHIP**

NAME OF CONTRIBUTOR		
NAME OF AGENCY / DEPARTMENT		
ADDRESS OF AGENCY / DEPARTMENT		
DATE OF CONTRACT START	DATE OF CONTRACT END	AMOUNT OF CONTRACT \$

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NAME OF CONTRIBUTOR		
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NAME OF CONTRIBUTOR		
NAME OF AGENCY / DEPARTMENT		
ADDRESS OF AGENCY / DEPARTMENT		
DATE OF CONTRACT START	DATE OF CONTRACT END	AMOUNT OF CONTRACT \$

**DESCRIPTION OF CONTRACTUAL RELATIONSHIP**

NAME OF CONTRIBUTOR		
NAME OF AGENCY / DEPARTMENT		
ADDRESS OF AGENCY / DEPARTMENT		
DATE OF CONTRACT START	DATE OF CONTRACT END	AMOUNT OF CONTRACT \$

USE THIS FORM TO REPORT THE DESCRIPTION OF ANY CONTRACTUAL RELATIONSHIP OVER \$500 BETWEEN A CONTRIBUTOR AND THE STATE (IF CANDIDATE IS SEEKING ELECTION TO A STATE OFFICE) OR BETWEEN CONTRIBUTOR AND ANY POLITICAL SUBDIVISION OF THE STATE (IF CANDIDATE IS SEEKING ELECTION TO ANOTHER POLITICAL SUBDIVISION OF THE STATE)



**MISSOURI ETHICS COMMISSION**  
**STATEMENT OF INVESTMENTS**  
**OTHER THAN SAVINGS ACCOUNTS**

OFFICE USE ONLY

INSTRUCTIONS ON REVERSE SIDE

1. NAME OF COMMITTEE HULSHOF FOR GOVERNOR INC	2. REPORT DATE 12/3/2008
--	-----------------------------

**A. INVESTMENTS MADE THIS PERIOD**

3. DESCRIPTION OF INVESTMENTS	4. NAME(S) AND ADDRESS(ES) OF PERSON(S) INVOLVED IN TRANSACTION	5. DATE OF TRANSACTION	6. AMOUNT
			\$
			\$
			\$

**B. INVESTMENTS FROM WHICH INTEREST OR DIVIDENDS WERE RECEIVED THIS PERIOD**

7. DESCRIPTION OF INVESTMENTS	8. NAMES(S) AND ADDRESS(ES) OF PERSON(S) INVOLVED IN TRANSACTION	9. DATE OF TRANSACTION	10. PRINCIPAL	11. INTEREST
			\$	\$
			\$	\$
<b>12. TOTAL: INTEREST OR DIVIDENDS RECEIVED THIS PERIOD (SUM COLUMN 11)</b>				<b>\$ 0.00</b>

**C. INVESTMENTS HELD AT CLOSE OF THIS PERIOD**

13. NAME AND DESCRIPTION OF INVESTMENT	14. NAME OF INSTITUTION	15. AMOUNT
		\$
		\$
		\$
		\$
		\$
<b>16. TOTAL: ALL INVESTMENTS HELD AT CLOSE OF THIS PERIOD (SUM COLUMN 15)</b>		<b>\$ 0.00</b>



Missouri Ethics Commission  
**ADDENDUM STATEMENT**

M.E.C. ID NO.                     C081049                    

INSTRUCTIONS ON REVERSE SIDE

PURPOSE: Form Addendum should be used for explanation of any additional information needed to complete an accurate filing of this report.

Line 1 of the report summary page has been stated to include total receipts for the General election previously reported, excluding previously reported receipts designated for the Primary election.



Missouri Ethics Commission  
**ADDENDUM STATEMENT**

M.E.C. ID NO. C081049

INSTRUCTIONS ON REVERSE SIDE

PURPOSE: Form Addendum should be used for explanation of any additional information needed to complete an accurate filing of this report.

Line 10 of the report summary page has been stated to include total expenditures for the General election previously reported, excluding previously reported expenditures designated for the Primary election.



Missouri Ethics Commission  
**ADDENDUM STATEMENT**

M.E.C. ID NO. C081049

INSTRUCTIONS ON REVERSE SIDE

PURPOSE: Form Addendum should be used for explanation of any additional information needed to complete an accurate filing of this report.

Miscellaneous receipts include interest income in the amount of \$842.58 from UMB Bank.



Missouri Ethics Commission  
**ADDENDUM STATEMENT**

M.E.C. ID NO. C081049

INSTRUCTIONS ON REVERSE SIDE

PURPOSE: Form Addendum should be used for explanation of any additional information needed to complete an accurate filing of this report.

Miscellaneous receipts include discount income in the amount of \$14.00 from the Missouri Department of Revenue received from the timely payment of the Missouri withholding taxes.



Missouri Ethics Commission  
**ADDENDUM STATEMENT**

M.E.C. ID NO. C081049

INSTRUCTIONS ON REVERSE SIDE

PURPOSE: Form Addendum should be used for explanation of any additional information needed to complete an accurate filing of this report.

Miscellaneous receipts include refund income in the amount of \$14,992.08 from Thompson Communications for overpayment.



Missouri Ethics Commission  
**ADDENDUM STATEMENT**

M.E.C. ID NO. C081049

INSTRUCTIONS ON REVERSE SIDE

PURPOSE: Form Addendum should be used for explanation of any additional information needed to complete an accurate filing of this report.

Miscellaneous receipts include \$234.99 from the sale of committee assets to the following: Jennifer Poeppelmeir \$100.00; Nathaniel Starmer \$50.00; Ross Branson \$50.00; Jordan Clothier \$34.99



Missouri Ethics Commission  
**ADDENDUM STATEMENT**

M.E.C. ID NO. C081049

INSTRUCTIONS ON REVERSE SIDE

PURPOSE: Form Addendum should be used for explanation of any additional information needed to complete an accurate filing of this report.

Other disbursements include \$50.00 payable to donors as refunds:  
11/20/08 Susan Becherer \$50.00