



Missouri Ethics Commission
COMMITTEE DISCLOSURE REPORT COVER PAGE

M.E.C. ID NO. C041535

1. DATE OF REPORT <u>7/10/06</u>	OFFICE USE ONLY <i>[Signature]</i> LT
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INSTRUCTIONS ON REVERSE SIDE

2. FULL NAME OF COMMITTEE <u>80th Legislative Democratic Committee</u>	
3. COMMITTEE MAILING ADDRESS <u>3435 St. Catherine</u>	4. COMMITTEE TELEPHONE NUMBER <u>314-921-5124</u>
CITY / STATE / ZIP <u>Florissant Mo 63033</u>	
5. TREASURER'S NAME <u>Eleanor Shivers</u>	
6. TREASURER'S MAILING ADDRESS <u>3435 St. Catherine</u>	7. TREASURER'S TELEPHONE NUMBER HOME: <u>314-921-5124</u> WORK:
CITY / STATE / ZIP <u>Florissant Mo 63033</u>	
8. DEPUTY TREASURER'S NAME <input checked="" type="checkbox"/> CHECK IF NO DEPUTY TREASURER	
9. DEPUTY TREASURER'S MAILING ADDRESS <u>N/A</u>	10. DEPUTY TREASURER'S TELEPHONE NUMBER HOME: <u>N/A</u> WORK:
CITY / STATE / ZIP <u>N/A</u>	
11. DATE OF ELECTION <u>8/8/06</u>	12. TYPE OF ELECTION (CHECK ONE) <input checked="" type="checkbox"/> PRIMARY <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIAL
13. TIME PERIOD COVERED BY THIS STATEMENT FROM <u>April 1, 2006</u> THROUGH <u>June 30, 2006</u>	
14. CANDIDATE COMMITTEES ONLY: LIST CANDIDATE'S NAME, ADDRESS, PHONE, OFFICE SOUGHT, POLITICAL SUBDIVISION AND POLITICAL PARTY <input type="checkbox"/> CHECK IF INCUMBENT <input type="checkbox"/> REPUBLICAN <input type="checkbox"/> DEMOCRAT <input type="checkbox"/>	15. TYPE OF REPORT <input type="checkbox"/> 15 DAYS AFTER CAUCUS NOMINATION <input type="checkbox"/> COMMITTEE QUARTERLY REPORT <input type="checkbox"/> Jan 15 <input type="checkbox"/> Apr 15 <input checked="" type="checkbox"/> Jul 15 <input type="checkbox"/> Oct 15 <input type="checkbox"/> 8 DAYS BEFORE <input type="checkbox"/> 30 DAYS AFTER ELECTION <input type="checkbox"/> TERMINATION (ATTACH FORM CO-3) <input type="checkbox"/> SEMIANNUAL DEBT REPORT <input type="checkbox"/> Jan 15 <input type="checkbox"/> Jul 15 <input type="checkbox"/> ANNUAL SUPPLEMENTAL, JAN 15 <input type="checkbox"/> 15 DAYS AFTER PETITION DEADLINE <input type="checkbox"/> OTHER <input type="checkbox"/> 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. <u>Eleanor Shivers</u> 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. _____ CANDIDATE'S SIGNATURE

MISSOURI ETHICS COMMISSION
JUL 13 2006



Missouri Ethics Commission
REPORT SUMMARY
 INSTRUCTIONS ON REVERSE SIDE

NAME OF COMMITTEE <i>80th Legislative Democratic Committee</i>	DATE OF REPORT <i>7/10/06</i>	OFFICE USE ONLY
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RECEIPTS		A. THIS PERIOD	B. THIS ELECTION	STATEMENT OF BEGINNING AND ENDING FINANCIAL CONDITION	
1. TOTAL RECEIPTS FOR THIS ELECTION PREVIOUSLY REPORTED			\$ 36450	MONEY ON HAND	
2. ALL MONETARY CONTRIBUTIONS RECEIVED THIS PERIOD	\$ 11,000				
3. ALL LOANS RECEIVED THIS PERIOD	+				
4. MISCELLANEOUS RECEIPTS THIS PERIOD	+				
5. SUBTOTAL MONETARY RECEIPTS THIS PERIOD (SUM 2A + 3A + 4A)	\$ 11,000				
6. IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD	+			25. MONEY ON HAND AT THE BEGINNING OF THIS REPORTING PERIOD (INCLUDING FUNDS IN DEPOSITORY, CASH, SAVINGS ACCOUNTS AND ALL OTHER INVESTMENTS)	\$ 16,167.48/xx
7. TOTAL ALL RECEIPTS THIS PERIOD (SUM 5A + 6A)	\$ 11,000			26. MONETARY RECEIPTS THIS PERIOD (FROM ITEM 5)	+\$ 11,000
8. FUNDS USED FOR REPAYING LOANS THIS PERIOD	-			27. MONETARY DISBURSEMENTS MADE THIS PERIOD (SUM 11 + 17 + 24)	
9. TOTAL ALL RECEIPTS THIS ELECTION (SUM 1B + 7A - 8A)			\$ 47,450	a) Disbursements By Check \$ 17,495.95	\$ 17,495.95/xx
				b) Disbursements By Cash \$	
EXPENDITURES		A. THIS PERIOD	B. THIS ELECTION	28. MONEY ON HAND AT THE CLOSE OF THIS REPORTING PERIOD (SUM 25 + 26 - 27)	\$ 9,671.53/xx
10. TOTAL EXPENDITURES FOR THIS ELECTION PREVIOUSLY REPORTED			\$ 20,726.02	INDEBTEDNESS	
11. EXPENDITURES MADE BY CASH OR CHECK THIS PERIOD	\$ 17,495.95				
12. IN-KIND EXPENDITURES MADE THIS PERIOD	+				
13. DEBTS INCURRED THIS PERIOD (NOT INCLUDING LOANS)	+			29. OUTSTANDING INDEBTEDNESS AT THE BEGINNING OF THIS PERIOD	\$
14. TOTAL ALL EXPENDITURES MADE THIS PERIOD (SUM 11A + 12A + 13A)	\$ 17,495.95			30. LOANS RECEIVED THIS PERIOD	+
15. TOTAL EXPENDITURES THIS ELECTION (SUM 10B + 14A)			\$	31. NEW DEBTS INCURRED THIS PERIOD	+
CONTRIBUTIONS MADE		A. THIS PERIOD	B. THIS ELECTION	32. PAYMENTS MADE ON LOANS THIS PERIOD	-
16. TOTAL CONTRIBUTIONS MADE FOR THIS ELECTION PREVIOUSLY REPORTED			\$	33. CREDITS RECEIVED ON LOANS THIS PERIOD	-
17. ALL MONETARY CONTRIBUTIONS MADE THIS PERIOD	\$			34. PAYMENTS MADE THIS PERIOD ON DEBTS INCURRED IN PREVIOUS PERIOD	-
18. ALL IN-KIND CONTRIBUTIONS MADE THIS PERIOD	+			35. TOTAL INDEBTEDNESS AT THE CLOSE OF THIS REPORTING PERIOD (SUM 29 + 30 + 31 - 32 - 33 - 34)	\$
19. TOTAL ALL CONTRIBUTIONS MADE THIS PERIOD (SUM 17A + 18A)	\$				
20. TOTAL ALL CONTRIBUTIONS MADE THIS ELECTION (SUM 16B + 19A)			\$		
OTHER DISBURSEMENTS		A. THIS PERIOD	B. THIS ELECTION		
21. FUNDS USED FOR REPAYING LOANS THIS PERIOD	+				
22. PAYMENTS THIS PERIOD ON PREVIOUSLY REPORTED DEBTS INCURRED	+				
23. ANY MISCELLANEOUS DISBURSEMENT NOT REPORTED ELSEWHERE	+				
24. TOTAL OTHER DISBURSEMENTS THIS PERIOD (SUM 21A + 22A + 23A)	\$				



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS AND LOANS RECEIVED
 INSTRUCTIONS ON REVERSE SIDE

OFFICE USE ONLY

1. NAME OF COMMITTEE <i>80th Legislative Democratic Committee</i>		2. REPORT DATE <i>7/10/06</i>	
A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.		4. DATE RECEIVED	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)		AGGREGATE TO DATE	
NAME: ADDRESS: <i>Bob Mc Nelt</i> CITY / STATE: <i>514 Earth City Exp way</i> EMPLOYER: <input type="checkbox"/> COMMITTEE: <i>Floussant Mo 63045</i>		<i>4/10/06</i> \$ <i>1000</i>	\$ <i>1000</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: <i>Robert Kaplan Trust</i> CITY / STATE: <i>1000 Mackland Ave</i> EMPLOYER: <input type="checkbox"/> COMMITTEE: <i>St. Louis Mo. 63110</i>		<i>4/6/06</i> \$ <i>2000</i>	\$ <i>2000</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: <i>Missouri Health Care Assn.</i> CITY / STATE: <i>236 Metro Dr</i> EMPLOYER: <input type="checkbox"/> COMMITTEE: <i>Jefferson City Mo. 65101</i>		<i>4/13/06</i> \$ <i>2000</i>	\$ <i>2000</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: <i>James J Giardina</i> CITY / STATE: <i>312 Solhen Dr</i> EMPLOYER: <input type="checkbox"/> COMMITTEE: <i>Ballwin Mo. 63021</i>		<i>6/15/06</i> \$ <i>5000</i>	\$ <i>5000</i> <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: <i>Fuse</i> CITY / STATE: <i>802 N 1ST</i> EMPLOYER: <input type="checkbox"/> COMMITTEE: <i>St. Louis Mo 63102</i>		<i>6/1/06</i> \$ <i>1000</i>	\$ <i>1000</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
6. SUBTOTAL: ITEMIZED CONTRIBUTIONS THIS PAGE (SUM COLUMN 5)			\$ <i>11000</i>
7. SUBTOTAL: ITEMIZED CONTRIBUTIONS ANY ATTACHED PAGES			+ \$
8. TOTAL: ITEMIZED CONTRIBUTIONS THIS PERIOD (SUM 6 + 7)			\$
9. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS MONETARY CONTRIBUTIONS			\$
10. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS IN-KIND CONTRIBUTIONS			\$
B. NON-ITEMIZED CONTRIBUTIONS RECEIVED (LIST BY CATEGORY, NOT BY INDIVIDUAL CONTRIBUTIONS)			AMOUNT RECEIVED
11. TOTAL CONTRIBUTIONS RECEIVED AT FUND-RAISERS AS REPORTED INLINE 8 ON FORM CD1A			\$
12. TOTAL ANONYMOUS CONTRIBUTIONS RECEIVED FROM PERSON GIVING \$25 OR LESS			\$
13. TOTAL MONETARY CONTRIBUTIONS RECEIVED FROM PERSONS GIVING \$100 OR LESS			\$
14. TOTAL IN-KIND CONTRIBUTIONS RECEIVED FROM PERSONS (NOT COMMITTEES) GIVING \$100 OR LESS			\$
C. LOANS RECEIVED		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)			\$
19. SUBTOTAL: LOANS FROM ANY ATTACHED PAGES			\$
20. TOTAL: LOANS THIS PERIOD (SUM 18 + 19)			\$
21. TOTAL: ALL IN-KIND CONTRIBUTIONS (SUM 10 + 14)			\$
22. TOTAL: ALL MONETARY CONTRIBUTIONS (SUM 9, 11, 12 & 13)			\$
23. MONETARY CONTRIBUTIONS & LOANS RECEIVED REQUIRING A RECORD OF NAME & ADDRESS (SUM 9, 13 & 20)			\$



MISSOURI ETHICS COMMISSION
EXPENDITURES AND CONTRIBUTIONS MADE
 INSTRUCTIONS ON REVERSE SIDE

OFFICE USE ONLY

1. NAME OF COMMITTEE <i>80th Legislative Democratic Comm.</i>		2. REPORT DATE <i>7/10/06</i>	
A. EXPENDITURES OF \$100 OR LESS BY CATEGORY (LIST PAYMENTS TO CAMPAIGN WORKERS IN SECTION B BELOW)			4. AMOUNT PAID OR INCURRED THIS PERIOD
3. CATEGORY OF EXPENDITURE			\$
			\$
5. SUBTOTAL: NON-ITEMIZED EXPENDITURES THIS PAGE (SUM COLUMN 4)			\$
6. SUBTOTAL: NON-ITEMIZED EXPENDITURES ANY ATTACHED PAGES			+ \$
7. TOTAL: NON-ITEMIZED EXPENDITURES THIS PERIOD (SUM 5 + 6)			\$
B. ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS		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: <i>Adams for Mayor</i> ADDRESS: <i>924 Wild Cherry</i> CITY / STATE: <i>St. Louis Mo 63130</i>		<i>4/1/06</i>	\$ <i>3250</i> <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: <i>David Pozay</i> ADDRESS: <i>4 Ironcliff Lane</i> CITY / STATE: <i>St. Louis Mo 63122</i>		<i>4/14/06</i>	\$ <i>1000</i> <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: <i>Eleanor E. Shivers</i> ADDRESS: <i>3435 St. Catherine</i> CITY / STATE: <i>Florissant Mo 63033</i>		<i>4/17/06</i>	\$ <i>500</i> <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: <i>People for El-Amin</i> ADDRESS: <i>5058 Durant</i> CITY / STATE: <i>St. Louis mo 63115</i>		<i>4/18/06</i>	\$ <i>3800</i> <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: <i>Hubbard 4 State Rep</i> ADDRESS: <i>1401 Comet</i> CITY / STATE: <i>St. Louis Mo 63137</i>		<i>5/22/06</i>	\$ <i>1000</i> <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
12. SUBTOTAL: THIS PAGE (SUM COLUMN 11)			\$ <i>9550</i>
13. SUBTOTAL: ANY ATTACHED PAGES			+ \$ <i>7945.95</i>
14. TOTAL: ITEMIZED EXPENDITURES THIS PERIOD (SUM 12 + 13)			\$ <i>17495.95</i>
15. TOTAL: MONETARY EXPENDITURES THIS PERIOD (SUM 7 + 14)			\$
16. AMOUNT OF LINE 15 WHICH WAS PAID OUT THIS PERIOD			\$
17. AMOUNT OF LINE 15 WHICH WAS DEBT INCURRED THIS PERIOD			\$
18. IF COMMITTEE MADE ANY IN-KIND EXPENDITURES THIS PERIOD, LIST AMOUNT			\$
19. FUNDS USED FOR REPAYING LOANS THIS PERIOD (ATTACH FORM CD1B)			\$
C. MONETARY CONTRIBUTIONS MADE (REGARDLESS OF AMOUNT)		21. DATE	22. AMOUNT
20. NAME AND ADDRESS OF CANDIDATE OR COMMITTEE			
NAME: ADDRESS: CITY / STATE:			\$
NAME: ADDRESS: CITY / STATE:			\$
NAME: ADDRESS: CITY / STATE:			\$
23. SUBTOTAL: THIS PAGE (SUM COLUMN 22)			\$
24. SUBTOTAL: ANY ATTACHED PAGES			+ \$
25. TOTAL: MONETARY CONTRIBUTIONS MADE THIS PERIOD (SUM 23 + 24)			\$
26. IF COMMITTEE MADE ANY LOANS THIS PERIOD, LIST AMOUNT			\$
27. TOTAL: ALL MONETARY CONTRIBUTIONS AND LOANS MADE THIS PERIOD (SUM 25 + 26)			\$
28. IF COMMITTEE MADE ANY IN-KIND CONTRIBUTIONS THIS PERIOD, LIST AMOUNT			\$



MISSOURI ETHICS COMMISSION
EXPENDITURES MADE - SUPPLEMENTAL FORM

OFFICE USE ONLY

NAME OF COMMITTEE: 80th Legislative Democratic Committee DATE: 7/10/06

INSTRUCTIONS
 PURPOSE: The purpose of the Expenditures Made supplement is to provide a printed outline for attaching additional pages to Form CD3 (Expenditures and Contributions Made). This form should be used as additional space for reporting itemized expenditures over \$100 and all payments to campaign workers. This form may be reproduced as needed.
 Total all itemized expenditures at the bottom of the page and carry to item 13 (Subtotal: From Any Attached Pages) on Form CD-3.
 If further information is needed concerning reporting itemized expenditures, see Form CD-3 Instructions.

ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS	DATE	PURPOSE - (IF PAYMENT WAS TO A CAMPAIGN WORKER, SHOW AGGREGATE PAID)	AMOUNT PAID OR INCURRED THIS PERIOD
NAME AND ADDRESS OF RECIPIENT			
Citizens to Elect J. Nashhead 4710 Lee St. Louis, Mo 63115	5/22/06	Cont	\$ 325
Friends to Elect Ted Hoskins 8427 Januaria Ave St. Louis, Mo. 63124	6/19/06	Cont	\$ 1625
Hubbard 4 State Rep 1401 Comet St. Louis, Mo 63137	6/19/06	Cont	\$ 500
D. R. Beckman Printing 3133 S. Compton St. Louis, Mo. 63118	6/19/06	Signs	\$ 295.95
Eleanor Shivers 3435 St. Catherine Florissant, Mo 63033	6/19/06	Consultant	\$ 500
Nixon for Governor P.O. Box 143 Jefferson City, Mo 65102	6/22/06	Cont	\$ 4700
			\$
			\$
			\$
			\$
TOTAL: ITEMIZED EXPENDITURES			\$ 7945.95
(CARRY TO ITEM 13 "SUBTOTAL: ANY ATTACHED PAGES" ON FORM CD-3)			\$