



Missouri Ethics Commission
COMMITTEE DISCLOSURE REPORT COVER PAGE

M.E.C. ID NO. 0041620

1. DATE OF REPORT 7-15-06	OFFICE USE ONLY
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INSTRUCTIONS ON REVERSE SIDE

2. FULL NAME OF COMMITTEE Citizens for White	
3. COMMITTEE MAILING ADDRESS P.O. Box 1521	4. COMMITTEE TELEPHONE NUMBER
CITY/STATE/ZIP Liberty, Missouri 64069	816-734-9412
5. TREASURER'S NAME Mary Anne Reece	
6. TREASURER'S MAILING ADDRESS 4109 N.W. 62nd St.	7. TREASURER'S TELEPHONE NUMBER
CITY/STATE/ZIP Kansas City, Missouri 64151	HOME: 816-741-6546 WORK:
8. DEPUTY TREASURER'S NAME <input checked="" type="checkbox"/> CHECK IF NO DEPUTY TREASURER	
9. DEPUTY TREASURER'S MAILING ADDRESS	10. DEPUTY TREASURER'S TELEPHONE NUMBER
CITY/STATE/ZIP	HOME: WORK:
11. DATE OF ELECTION August 2006	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 4-01-06 THROUGH 6-30-06	
14. CANDIDATE COMMITTEES ONLY: LIST CANDIDATE'S NAME, ADDRESS, PHONE, OFFICE SOUGHT, POLITICAL SUBDIVISION AND POLITICAL PARTY Daniel L. White 9703 N. Kenwood Court Kansas City, Missouri 64155 816-734-9412 Prosecuting Attorney Clay County <input checked="" type="checkbox"/> CHECK IF INCUMBENT <input type="checkbox"/> REPUBLICAN <input checked="" 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____ <div style="border: 1px solid black; padding: 5px; width: fit-content; margin: 10px auto;">MISSOURI ETHICS COMMISSION JUL 14 2006</div>
16. COMMITTEE TREASURER'S SIGNATURE I CERTIFY THAT THIS REPORT, COMPRISED OF THIS COVER PAGE AND ALL ATTACHED FORMS, IS COMPLETE, TRUE AND ACCURATE. 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
REPORT SUMMARY
 INSTRUCTIONS ON REVERSE SIDE

NAME OF COMMITTEE Citizens for White	DATE OF REPORT 7-15-06	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		\$ 54,479.65	MONEY ON HAND		
2. ALL MONETARY CONTRIBUTIONS RECEIVED THIS PERIOD	\$ 7,840.00				
3. ALL LOANS RECEIVED THIS PERIOD	+				
4. MISCELLANEOUS RECEIPTS THIS PERIOD	+	21.37			
5. SUBTOTAL MONETARY RECEIPTS THIS PERIOD (SUM 2A + 3A + 4A)	\$ 7,861.37				
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)	\$ 33,835.65	
7. TOTAL ALL RECEIPTS THIS PERIOD (SUM 5A + 6A)	\$ 7,861.37		26. MONETARY RECEIPTS THIS PERIOD (FROM ITEM 5)	+	\$ 7,861.37
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)		\$ 62,341.02	a) Disbursements By Check \$ 17,756.54	\$ 17,756.54	
			b) Disbursements By Cash \$		
EXPENDITURES			28. MONEY ON HAND AT THE CLOSE OF THIS REPORTING PERIOD (SUM 25 + 26 - 27)	\$	23,940.48
10. TOTAL EXPENDITURES FOR THIS ELECTION PREVIOUSLY REPORTED		\$ 18,429.00	INDEBTEDNESS		
11. EXPENDITURES MADE BY CASH OR CHECK THIS PERIOD	\$ 17,756.54				
12. IN-KIND EXPENDITURES MADE THIS PERIOD	+				
13. DEBTS INCURRED THIS PERIOD (NOT INCLUDING LOANS)	+				
14. TOTAL ALL EXPENDITURES MADE THIS PERIOD (SUM 11A + 12A + 13A)	\$ 17,756.54				
15. TOTAL EXPENDITURES THIS ELECTION (SUM 10B + 14A)		\$ 36,185.54	29. OUTSTANDING INDEBTEDNESS AT THE BEGINNING OF THIS PERIOD	\$	
CONTRIBUTIONS MADE			30. LOANS RECEIVED THIS PERIOD	+	\$
16. TOTAL CONTRIBUTIONS MADE FOR THIS ELECTION PREVIOUSLY REPORTED		\$ 2,065.00	31. NEW DEBTS INCURRED THIS PERIOD	+	\$
17. ALL MONETARY CONTRIBUTIONS MADE THIS PERIOD	\$		32. PAYMENTS MADE ON LOANS THIS PERIOD	-	\$
18. ALL IN-KIND CONTRIBUTIONS MADE THIS PERIOD	+		33. CREDITS RECEIVED ON LOANS THIS PERIOD	-	\$
19. TOTAL ALL CONTRIBUTIONS MADE THIS PERIOD (SUM 17A + 18A)	\$		34. PAYMENTS MADE THIS PERIOD ON DEBTS INCURRED IN PREVIOUS PERIOD	-	\$
20. TOTAL ALL CONTRIBUTIONS MADE THIS ELECTION (SUM 16B + 19A)		\$ 2,065.00	35. TOTAL INDEBTEDNESS AT THE CLOSE OF THIS REPORTING PERIOD (SUM 29 + 30 + 31 - 32 - 33 - 34)	\$	
OTHER DISBURSEMENTS					
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 Citizens for White		2. REPORT DATE 7-15-06	
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)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)			
NAME: Sean Schvltz ADDRESS: 8909 NE 89th St. CITY / STATE: Kansas City, MO 64157 EMPLOYER: Lincoln <input type="checkbox"/> COMMITTEE:		5-6-06 \$	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: Doug Parrott ADDRESS: 8908 NE 89th St. CITY / STATE: Kansas City, MO 64157 EMPLOYER: Americo Annuity <input type="checkbox"/> COMMITTEE:		5-6-06 \$	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: Matt Swenson ADDRESS: 8915 N. Hunter Ave. CITY / STATE: Kansas City, MO 64157 EMPLOYER: Cook Composites + Polymers <input type="checkbox"/> COMMITTEE:		5-6-06 \$	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: Bill Boldana ADDRESS: 1009 NE 99th CITY / STATE: Kansas City, MO 64155 EMPLOYER: Self <input type="checkbox"/> COMMITTEE:		5-6-06 \$	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: Jack or Pam Knapton ADDRESS: 10513 N. Forest Ave. CITY / STATE: Kansas City, MO 64155 EMPLOYER: General Motors <input type="checkbox"/> COMMITTEE:		5-6-06 \$ 350.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
6. SUBTOTAL: ITEMIZED CONTRIBUTIONS THIS PAGE (SUM COLUMN 5)		\$ 500.00	
7. SUBTOTAL: ITEMIZED CONTRIBUTIONS ANY ATTACHED PAGES		+ \$ 7,340.00	
8. TOTAL: ITEMIZED CONTRIBUTIONS THIS PERIOD (SUM 6 + 7)		\$ 7,840.00	
9. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS MONETARY CONTRIBUTIONS		\$ 7,840.00	
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			
15. NAME AND ADDRESS OF LENDER	16. DATE RECEIVED	17. AMOUNT OF LOAN (IF MORE THAN \$100 ATTACH CD-1B)	
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
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE: *Citizens for White* DATE: *7-15-06*

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)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: <i>Patricia D. Reynolds</i> ADDRESS: <i>14 S. Main</i> CITY / STATE: <i>Liberty, MO 64068</i> EMPLOYER: <i>Attorney</i> <input type="checkbox"/> COMMITTEE:	<i>4-25-06</i> ----- \$	\$ <i>100.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>Spencer Hunley</i> ADDRESS: <i>5436 N. Virginia</i> CITY / STATE: <i>Kansas City, MO 64118</i> EMPLOYER: <i>Student</i> <input type="checkbox"/> COMMITTEE:	<i>4-27-06</i> ----- \$	\$ <i>100.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>J. Brewer</i> ADDRESS: <i>5823 N. College</i> CITY / STATE: <i>Gladstone, MO 64119</i> EMPLOYER: <i>Alarm Tech / Automated Lifestyles</i> <input type="checkbox"/> COMMITTEE:	<i>5-6-06</i> ----- \$ <i>400.00</i>	\$ <i>200.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>Charles F. Myers</i> ADDRESS: <i>505 NW 43rd Terr.</i> CITY / STATE: <i>Kansas City, MO 64116</i> EMPLOYER: <i>Attorney</i> <input type="checkbox"/> COMMITTEE:	<i>5-17-06</i> ----- \$ <i>100.00</i>	\$ <i>50.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>Dempsey + Kingsland</i> ADDRESS: <i>1100 Main St., 1860 City Center Sq.</i> CITY / STATE: <i>Kansas City, MO 64105</i> EMPLOYER: <i>Attorneys</i> <input type="checkbox"/> COMMITTEE:	<i>5-11-06</i> ----- \$	\$ <i>250.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>Steven Weber</i> ADDRESS: <i>10004 NE 172nd St.</i> CITY / STATE: <i>Kearney, MO 64060</i> EMPLOYER: <i>Major Brands</i> <input type="checkbox"/> COMMITTEE:	<i>5-6-06</i> ----- \$	\$ <i>100.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>Jo Ellen Hyde</i> ADDRESS: <i>6701 N. Woodland</i> CITY / STATE: <i>Gladstone, MO 64118</i> EMPLOYER: <i>Clay County</i> <input type="checkbox"/> COMMITTEE:	<i>5-19-06</i> ----- \$	\$ <i>20.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>Tyler Meierotti</i> ADDRESS: <i>4311 NE Vivion Rd.</i> CITY / STATE: <i>Kansas City, MO 64119</i> EMPLOYER: <i>Self</i> <input type="checkbox"/> COMMITTEE:	<i>5-6-06</i> ----- \$	\$ <i>100.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
TOTAL: ITEMIZED CONTRIBUTIONS		\$ <i>920.00</i>

(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: *Citizens for White* DATE: *7-15-06*

INSTRUCTIONS
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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.
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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)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: <i>Dennis Meierdti</i> ADDRESS: <i>4311 NE Vivion Rd.</i> CITY / STATE: <i>Kansas City, MO 64119</i> EMPLOYER: <i>Self</i> <input type="checkbox"/> COMMITTEE:	<i>5-8-06</i> ----- \$	\$ <i>100.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>David E. Pettyjohn</i> ADDRESS: <i>5600 N. Antioch Rd.</i> CITY / STATE: <i>Kansas City, MO 64119</i> EMPLOYER: <i>Attorney</i> <input type="checkbox"/> COMMITTEE:	<i>6-2-06</i> ----- \$ <i>450.00</i>	\$ <i>400.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>Ellen Greenberg</i> ADDRESS: <i>14400 Windsor St.</i> CITY / STATE: <i>Leawood, KS 66224</i> EMPLOYER: <i>Attorney</i> <input type="checkbox"/> COMMITTEE:	<i>6-10-06</i> ----- \$ <i>500.00</i>	\$ <i>250.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>Berald W. Furnell</i> ADDRESS: <i>P.O. Box 1215</i> CITY / STATE: <i>Lee's Summit, MO 64063</i> EMPLOYER: <i>Attorney</i> <input type="checkbox"/> COMMITTEE:	<i>6-8-06</i> ----- \$ <i>500.00</i>	\$ <i>200.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>David J. Fry</i> ADDRESS: <i>3145 Broadway</i> CITY / STATE: <i>Kansas City, MO 64111</i> EMPLOYER: <i>Attorney</i> <input type="checkbox"/> COMMITTEE:	<i>6-8-06</i> ----- \$ <i>600.00</i>	\$ <i>250.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>Phillip H. Snowden</i> ADDRESS: <i>4642 N. Holly Ct.</i> CITY / STATE: <i>Kansas City, MO 64116</i> EMPLOYER: <i>Attorney</i> <input type="checkbox"/> COMMITTEE:	<i>6-11-06</i> ----- \$	\$ <i>100.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>Cecil O. Williams, A Professional Corp.</i> ADDRESS: <i>1125 Grand Blvd. Ste. 707</i> CITY / STATE: <i>Kansas City, MO 64106</i> EMPLOYER: <i>Attorney</i> <input type="checkbox"/> COMMITTEE:	<i>6-12-06</i> ----- \$ <i>600.00</i>	\$ <i>350.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>Cecil O. Williams</i> ADDRESS: <i>Attorney</i> CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:	<i>6-12-06</i> ----- \$	\$ <i>300.00</i> <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)		\$ <i>1,950.00</i>



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE: *Citizens for White* DATE: *7-15-06*

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)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: <i>K. Louis Caskey</i> ADDRESS: <i>14 Dockside Drive</i> CITY / STATE: <i>Lake Tapawingo, Mo 64015</i> EMPLOYER: <i>Attorney</i> <input type="checkbox"/> COMMITTEE:	<i>6-19-06</i> \$	<i>\$ 20.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>Raymond Brock, Jr.</i> ADDRESS: <i>1140 Manchester Rd.</i> CITY / STATE: <i>Liberty, Mo 64068</i> EMPLOYER: <i>Curry Investment Co.</i> <input type="checkbox"/> COMMITTEE:	<i>6-18-06</i> \$ <i>200.00</i>	<i>\$ 100.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>Martin, Leigh, Laws + Fritzen</i> ADDRESS: <i>400 Peck's Plaza, 1044 Main</i> CITY / STATE: <i>Kansas City, Mo 64105</i> EMPLOYER: <i>Attorney</i> <input type="checkbox"/> COMMITTEE:	<i>6-14-06</i> \$ <i>350.00</i>	<i>\$ 150.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>David E. Pettyjohn</i> ADDRESS: <i>5600 N. Antioch</i> CITY / STATE: <i>Kansas City, Mo 64119</i> EMPLOYER: <i>Attorney</i> <input type="checkbox"/> COMMITTEE:	<i>6-28-06</i> \$ <i>650.00</i>	<i>\$ 200.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>C. Patrick or Vernice Bills</i> ADDRESS: <i>808 Magnolia</i> CITY / STATE: <i>Excelsior Springs, Mo 64024</i> EMPLOYER: <i>Retired</i> <input type="checkbox"/> COMMITTEE:	<i>6-28-06</i> \$	<i>\$ 50.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>Pam Heaberlin</i> ADDRESS: <i>10704 N. Harrison St.</i> CITY / STATE: <i>Kansas City, Mo 64155</i> EMPLOYER: <i>Sales</i> <input type="checkbox"/> COMMITTEE:	<i>6-29-06</i> \$	<i>\$ 50.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>Peter M. Schloss</i> ADDRESS: <i>104 W. Kansas St.</i> CITY / STATE: <i>Liberty, Mo 64068</i> EMPLOYER: <i>Attorney</i> <input type="checkbox"/> COMMITTEE:	<i>6-28-06</i> \$	<i>\$ 600.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>Thistle Hill Development, Inc.</i> ADDRESS: <i>5500 N. Oak, Ste. 200</i> CITY / STATE: <i>Kansas City, Mo 64118</i> EMPLOYER: <i>Self</i> <input type="checkbox"/> COMMITTEE:	<i>6-27-06</i> \$	<i>\$ 650.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS *\$ 1,820.00*
 (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 *Citizens for White* DATE *7-15-06*

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)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: <i>Rick Holtscrow</i> ADDRESS: <i>8955 NW Hillsboro Rd.</i> CITY / STATE: <i>Kansas City, MO 64153</i> EMPLOYER: <input type="checkbox"/> COMMITTEE: <i>Attorney</i>	<i>6-20-06</i> \$	\$ <i>100.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>Brent E. Williams</i> ADDRESS: <i>1455 Balindo St. Apt. 243D</i> CITY / STATE: <i>Concord, CA 94520</i> EMPLOYER: <input type="checkbox"/> COMMITTEE: <i>Sherwin-Williams Co.</i>	<i>6-19-06</i> \$ <i>125.00</i>	\$ <i>100.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>Michael Sosa</i> ADDRESS: <i>5700 N. Indiana</i> CITY / STATE: <i>Gladstone, MO 64119</i> EMPLOYER: <input type="checkbox"/> COMMITTEE: <i>Democratic Committee person</i>	<i>6-15-06</i> \$	\$ <i>25.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>Taxpayers Unlimited, Inc.</i> ADDRESS: <i>6320 Manchester Ave., Ste. 426</i> CITY / STATE: <i>Kansas City, MO 64133</i> EMPLOYER: <input type="checkbox"/> COMMITTEE:	<i>6-29-06</i> \$	\$ <i>650.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>James or Kristen Nam</i> ADDRESS: <i>7405 N. Lewis Ave.</i> CITY / STATE: <i>Kansas City, MO 64158</i> EMPLOYER: <input type="checkbox"/> COMMITTEE: <i>NKC Police Dept.</i>	<i>6-19-06</i> \$ <i>40.00</i>	\$ <i>20.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>Roy Brock</i> ADDRESS: <i>Curry Inv. Co.</i> CITY / STATE: <i>2700 Kendallwood Pkwy.</i> EMPLOYER: <input type="checkbox"/> COMMITTEE: <i>Gladstone, MO 64119</i>	<i>6-20-06</i> \$	\$ <i>100.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>Roger Potter</i> ADDRESS: CITY / STATE: <i>Excelsior Springs, MO 64024</i> EMPLOYER: <input type="checkbox"/> COMMITTEE: <i>Barber</i>	<i>6-20-06</i> \$	\$ <i>30.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>Barbara R. Stuckey</i> ADDRESS: <i>343 Westwoods Circle</i> CITY / STATE: <i>Liberty, MO 64068</i> EMPLOYER: <input type="checkbox"/> COMMITTEE: <i>Retired</i>	<i>6-26-06</i> \$ <i>200.00</i>	\$ <i>100.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS \$ *1,125.00*

(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: *Citizens for White* DATE: *7-15-06*

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)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: <i>Mildred Oraley</i> ADDRESS: <i>13975 E. 35th St. S. Apt. 111</i> CITY / STATE: <i>Independence, MO 64055</i> EMPLOYER: <input type="checkbox"/> COMMITTEE: <i>Retired</i>	<i>6-21-06</i> ----- \$ <i>50.00</i>	\$ <i>25.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>George A. Pilkett</i> ADDRESS: <i>P.O. Box K</i> CITY / STATE: <i>Plattsburg, MO 64477</i> EMPLOYER: <input type="checkbox"/> COMMITTEE: <i>Attorney</i>	<i>6-21-06</i> ----- \$ <i>500.00</i>	\$ <i>200.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>Lawrence V. Fisher</i> ADDRESS: <i>1202 S. Oak St. P.O. Box K</i> CITY / STATE: <i>Plattsburg, MO 64477</i> EMPLOYER: <input type="checkbox"/> COMMITTEE: <i>Attorney</i>	<i>6-23-06</i> ----- \$ <i>500.00</i>	\$ <i>200.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>Christy L. Fisher</i> ADDRESS: <i>116 N. Main, P.O. Box K</i> CITY / STATE: <i>Plattsburg, MO 64477</i> EMPLOYER: <input type="checkbox"/> COMMITTEE: <i>Attorney</i>	<i>6-16-06</i> ----- \$ <i>500.00</i>	\$ <i>200.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>Ruth E. Johnson</i> ADDRESS: <i>405 E. 13th St. Ste. 300</i> CITY / STATE: <i>Kansas City, MO 64106</i> EMPLOYER: <input type="checkbox"/> COMMITTEE: <i>Attorney</i>	<i>6-26-06</i> ----- \$	\$ <i>50.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>Deborah Landon</i> ADDRESS: <i>1603 B Rosales Ave.</i> CITY / STATE: <i>Excelsior Springs, MO 64024</i> EMPLOYER: <input type="checkbox"/> COMMITTEE: <i>Clay County</i>	<i>6-26-06</i> ----- \$ <i>100.00</i>	\$ <i>50.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>Michael A. Levota</i> ADDRESS: <i>400 NE Brockton Dr.</i> CITY / STATE: <i>Lee's Summit, MO 64064</i> EMPLOYER: <input type="checkbox"/> COMMITTEE: <i>Attorney</i>	<i>6-27-06</i> ----- \$ <i>275.00</i>	\$ <i>200.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>Dalena Bobbina</i> ADDRESS: <i>8912 NE 89th St.</i> CITY / STATE: <i>Kansas City, MO 64157</i> EMPLOYER: <input type="checkbox"/> COMMITTEE: <i>Fitness Center</i>	<i>5-6-06</i> ----- \$	\$ <i>100.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
TOTAL: ITEMIZED CONTRIBUTIONS		\$ <i>1,025.00</i>

(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: *Citizens for White* DATE: *7-15-06*

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: <i>Michael P. McRobert</i> ADDRESS: <i>5720 NW Wilson Blvd.</i> CITY / STATE: <i>Kansas City, MO 64118</i> EMPLOYER: <input type="checkbox"/> COMMITTEE: <i>MAXUS PROPERTIES</i>	<i>6-12-06</i> ----- \$ <i>650.00</i>	<i>(500.00)</i> \$ <i>350.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>Michael P. McRobert</i> ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:	\$	<i>(carryover of \$250.00 to general election)</i> <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>John Chick</i> ADDRESS: <i>2601 Kendallwood Pkwy.</i> CITY / STATE: <i>Gladstone, MO 64119</i> EMPLOYER: <input type="checkbox"/> COMMITTEE: <i>Attorney</i>	<i>6-9-06</i> ----- \$ <i>650.00</i>	<i>(300.00)</i> \$ <i>150.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>John Chick</i> ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:	\$	<i>(carryover of \$150.00 to general election)</i> <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

TOTAL: ITEMIZED CONTRIBUTIONS \$ *500.00*
 (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 <i>Citizens for White</i>		2. REPORT DATE <i>7-15-06</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>Service Printing + Graphics, Inc.</i> ADDRESS: <i>1146 Harrison St.</i> CITY / STATE: <i>Kansas City, MO 64106</i>		<i>6-5-06</i>	<i>printing</i> \$ <i>539.97</i> <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: <i>Service Printing + Graphics, Inc.</i> ADDRESS: <i>1146 Harrison St.</i> CITY / STATE: <i>Kansas City, MO 64106</i>		<i>6-21-06</i>	<i>printing</i> \$ <i>1,159.38</i> <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: <i>Service Printing + Graphics, Inc.</i> ADDRESS: <i>1146 Harrison St.</i> CITY / STATE: <i>Kansas City, MO 64106</i>		<i>5-31-06</i>	<i>printing</i> \$ <i>978.70</i> <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: <i>Service Printing + Graphics, Inc.</i> ADDRESS: <i>1146 Harrison St.</i> CITY / STATE: <i>Kansas City, MO 64106</i>		<i>6-30-06</i>	<i>printing</i> \$ <i>6,108.22</i> <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: <i>Postmaster</i> ADDRESS: <i>Liberty, Missouri</i> CITY / STATE: <i>Liberty, Missouri</i>		<i>6-8-06</i>	<i>postage</i> \$ <i>117.00</i> <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
12. SUBTOTAL: THIS PAGE (SUM COLUMN 11)			\$ <i>8,903.27</i>
13. SUBTOTAL: ANY ATTACHED PAGES			+ \$ <i>8,853.27</i>
14. TOTAL: ITEMIZED EXPENDITURES THIS PERIOD (SUM 12 + 13)			\$ <i>17,756.54</i>
15. TOTAL: MONETARY EXPENDITURES THIS PERIOD (SUM 7 + 14)			\$ <i>17,756.54</i>
16. AMOUNT OF LINE 15 WHICH WAS PAID OUT THIS PERIOD			\$ <i>17,756.54</i>
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 <i>Citizens for White</i>	DATE <i>7-15-06</i>
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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			
<i>Jo Ellen Hyde 6701 N. Woodland Gladstone, MO 64118</i>	<i>6-19-06</i>	<i>Reimbursement</i>	<i>\$ 78.00</i>
<i>office depot 8501 N. Evanston Ave. Kansas City, MO 64157</i>	<i>6-14-06</i>	<i>Labels</i>	<i>\$ 31.16</i>
<i>Cingular Wireless 8414 N. Church Rd. Liberty, MO 64068</i>	<i>6-14-06</i>	<i>mobile phone</i>	<i>\$ 75.21</i>
<i>Cingular Wireless 8414 N. Church Rd. Liberty, MO 64068</i>	<i>6-28-06</i>	<i>phone service</i>	<i>\$ 86.86</i>
<i>Happy Times T-Shirt Co. 400 NE Hwy. 69 Claycomo, MO 64119</i>	<i>4-19-06</i>	<i>T-shirts hats</i>	<i>\$ 2,009.98</i>
<i>O'Neill Communications</i>		<i>Advertisements</i>	<i>\$ 2,500.00</i>
<i>Johnny on the Spot</i>		<i>Rental</i>	<i>\$ 157.65</i>
<i>KC Costume Company, Inc. 2020 Grand Blvd. Kansas City, MO 64106</i>	<i>6-27-06</i>	<i>Rental</i>	<i>\$ 85.88</i>
<i>Show-me Bar-b-q-sauce, Inc. 1250 Cedar Grove Blvd. So. Columbia, MO 65201</i>	<i>6-25-06</i>	<i>Supplies</i>	<i>\$ 49.13</i>
<i>Daniel L. White 9703 N. Kenwood Ct. Kansas City, MO 64155</i>	<i>5-26-06</i>	<i>Reimbursement</i>	<i>\$ 128.75</i>
TOTAL: ITEMIZED EXPENDITURES (CARRY TO ITEM 13 "SUBTOTAL: ANY ATTACHED PAGES" ON FORM CD-3)			<i>\$ 5,202.62</i>



MISSOURI ETHICS COMMISSION
EXPENDITURES MADE - SUPPLEMENTAL FORM

OFFICE USE ONLY

NAME OF COMMITTEE <i>Citizens for White</i>	DATE <i>7-15-06</i>
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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			
<i>J.L.'s Country Meats Excelsior Springs, MO 64024</i>	<i>6-30-06</i>	<i>supplies</i>	<i>\$ 269.10</i>
<i>Michael's 8550 N. Madison Kansas City, MO 64155</i>	<i>6-30-06</i>	<i>supplies</i>	<i>\$ 24.64</i>
<i>OSCO Gladstone, MO</i>	<i>6-30-06</i>	<i>supplies</i>	<i>\$ 65.69</i>
<i>Daniel L. White 9703 N. Kenwood Cr. Kansas City, MO 64155</i>	<i>6-30-06</i>	<i>Reimbursement</i>	<i>\$ 55.86</i>
<i>Cosentino's Sun fresh Kansas City, MO</i>	<i>6-29-06</i>	<i>Food / drinks</i>	<i>\$ 356.09</i>
<i>Orscheln Farm + home 901 W. 92 Hwy. Kearney, MO 64060</i>	<i>6-29-06</i>	<i>supplies</i>	<i>\$ 64.44</i>
<i>Daniel L. White 9703 N. Kenwood Cr. Kansas City, MO 64155</i>	<i>6-29-06</i>	<i>Reimbursement</i>	<i>\$ 663.28</i>
<i>Ectonville</i>	<i>6-30-06</i>	<i>supplies</i>	<i>\$ 43.81</i>
<i>Bill Zerr</i>	<i>6-8-06</i>	<i>fireworks</i>	<i>\$ 695.00</i>
<i>Knack + Assoc.</i>	<i>6-8-06</i>	<i>graphic design</i>	<i>\$ 1,200.00</i>
TOTAL: ITEMIZED EXPENDITURES (CARRY TO ITEM 13 "SUBTOTAL: ANY ATTACHED PAGES" ON FORM CD-3)			<i>\$ 3,437.91</i>



MISSOURI ETHICS COMMISSION
EXPENDITURES MADE - SUPPLEMENTAL FORM

OFFICE USE ONLY

NAME OF COMMITTEE: *Citizens for White* DATE: *7-15-06*

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			
<i>Kearney Parade Kearney, MO 64060</i>	<i>6-12-06</i>	<i>Entry fee</i>	<i>\$ 25.00</i>
<i>Jun fresh</i>	<i>6-29-06</i>	<i>Supplies</i>	<i>\$ 87.74</i>
<i>Rodney Smith</i>	<i>6-29-06</i>	<i>BBQ</i>	<i>\$ 100.00</i>
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
TOTAL: ITEMIZED EXPENDITURES (CARRY TO ITEM 13 "SUBTOTAL: ANY ATTACHED PAGES" ON FORM CD-3)			<i>\$ 212.74</i>



**MISSOURI ETHICS COMMISSION
CONTRACTUAL RELATIONSHIP REPORT**

INSTRUCTIONS ON REVERSE SIDE

OFFICE USE ONLY

NAME OF COMMITTEE Citizens for White	DATE 7-15-06
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DESCRIPTION OF CONTRACTUAL RELATIONSHIP

NAME OF CONTRIBUTOR
Patricia D. Reynolds

NAME OF AGENCY / DEPARTMENT
ODRS - mediation

ADDRESS OF AGENCY / DEPARTMENT
contract basis with State of Missouri

DATE OF CONTRACT START	DATE OF CONTRACT END	AMOUNT OF CONTRACT \$ varies
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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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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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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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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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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)