



Missouri Ethics Commission
COMMITTEE DISCLOSURE REPORT COVER PAGE

M.E.C. ID NO. C061200

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

2. FULL NAME OF COMMITTEE
FRIENDS OF TOM HALEY

3. COMMITTEE MAILING ADDRESS PO BOX 62 CITY / STATE / ZIP LEE'S SUMMIT, MO 64063	4. COMMITTEE TELEPHONE NUMBER 816/525-3713
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5. TREASURER'S NAME
LOREN PAULSON

6. TREASURER'S MAILING ADDRESS 1407 SW 9TH ST CITY / STATE / ZIP LEE'S SUMMIT, MO 64063	7. TREASURER'S TELEPHONE NUMBER HOME: 816/524-8196 WORK: 816/525-9927
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8. DEPUTY TREASURER'S NAME CHECK IF NO DEPUTY TREASURER
DANIEL MOSER

9. DEPUTY TREASURER'S MAILING ADDRESS 1126 NE TRAILWOOD CITY / STATE / ZIP LEE'S SUMMIT, MO 64086	10. DEPUTY TREASURER'S TELEPHONE NUMBER HOME: 816/525-6259 WORK: 816/524-5399
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11. DATE OF ELECTION
8/6/06

12. TYPE OF ELECTION (CHECK ONE)
 PRIMARY GENERAL SPECIAL

13. TIME PERIOD COVERED BY THIS STATEMENT
FROM 4/1/06 THROUGH 6/30/06

14. CANDIDATE COMMITTEES ONLY: LIST CANDIDATE'S NAME, ADDRESS, PHONE, OFFICE SOUGHT, POLITICAL SUBDIVISION AND POLITICAL PARTY

TOM HALEY
1025 SE 5TH STREET
LEE'S SUMMIT, MO 64063
816/525-3713
STATE REP
47TH DISTRICT

CHECK IF INCUMBENT

REPUBLICAN DEMOCRAT

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

AMENDING PREVIOUS REPORT DATED _____, 20__

MISSOURI ETHICS COMMISSION
JUL 18 2006

16. COMMITTEE TREASURER'S SIGNATURE

I CERTIFY THAT THIS REPORT, COMPRISED OF THIS COVER PAGE AND ALL ATTACHED FORMS, IS COMPLETE, TRUE AND ACCURATE.

[Signature]
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.

[Signature]
CANDIDATE'S SIGNATURE



Missouri Ethics Commission
REPORT SUMMARY
 INSTRUCTIONS ON REVERSE SIDE

NAME OF COMMITTEE FRIENDS OF TOM HALEY	DATE OF REPORT 7/7/06	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		\$ 900.00	MONEY ON HAND				
2. ALL MONETARY CONTRIBUTIONS RECEIVED THIS PERIOD	\$ 17681.00						
3. ALL LOANS RECEIVED THIS PERIOD	+						
4. MISCELLANEOUS RECEIPTS THIS PERIOD	+						
5. SUBTOTAL MONETARY RECEIPTS THIS PERIOD (SUM 2A + 3A + 4A)	\$ 17681.00				25. MONEY ON HAND AT THE BEGINNING OF THIS REPORTING PERIOD (INCLUDING FUNDS IN DEPOSITORY, CASH, SAVINGS ACCOUNTS AND ALL OTHER INVESTMENTS)	\$ 900.00	
6. IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD	+				26. MONETARY RECEIPTS THIS PERIOD (FROM ITEM 5)	+	\$ 17681.00
7. TOTAL ALL RECEIPTS THIS PERIOD (SUM 5A + 6A)	\$ 17681.00				27. MONETARY DISBURSEMENTS MADE THIS PERIOD (SUM 11 + 17 + 24)		
8. FUNDS USED FOR REPAYING LOANS THIS PERIOD	-		a) Disbursements By Check \$ 6912.86	-	\$ 6912.86		
9. TOTAL ALL RECEIPTS THIS ELECTION (SUM 1B + 7A - 8A)		\$ 18581.00	b) Disbursements By Cash \$				
EXPENDITURES	A. THIS PERIOD	B. THIS ELECTION	INDEBTEDNESS				
10. TOTAL EXPENDITURES FOR THIS ELECTION PREVIOUSLY REPORTED		\$ 0	28. MONEY ON HAND AT THE CLOSE OF THIS REPORTING PERIOD (SUM 25 + 26 - 27)	\$ 11668.14			
11. EXPENDITURES MADE BY CASH OR CHECK THIS PERIOD	\$ 6912.86		INDEBTEDNESS				
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)	\$ 6912.86				29. OUTSTANDING INDEBTEDNESS AT THE BEGINNING OF THIS PERIOD	\$	
15. TOTAL EXPENDITURES THIS ELECTION (SUM 10B + 14A)		\$ 6912.86	30. LOANS RECEIVED THIS PERIOD	+	\$		
CONTRIBUTIONS MADE	A. THIS PERIOD	B. THIS ELECTION	INDEBTEDNESS				
16. TOTAL CONTRIBUTIONS MADE FOR THIS ELECTION PREVIOUSLY REPORTED		\$			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)		\$	35. TOTAL INDEBTEDNESS AT THE CLOSE OF THIS REPORTING PERIOD (SUM 29 + 30 + 31 - 32 - 33 - 34)	\$			
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)	\$						



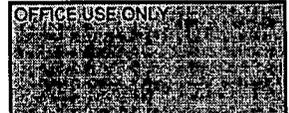
MISSOURI ETHICS COMMISSION
CONTRIBUTIONS AND LOANS RECEIVED
 INSTRUCTIONS ON REVERSE SIDE

OFFICE USE ONLY

1. NAME OF COMMITTEE FRIENDS OF TOM HALEY		2. REPORT DATE 7/7/06	
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: MO SCHOOL ADMINISTRATORS PAC ADDRESS: 398 DIX RD, SUITE 201 CITY / STATE: JEFFERSON CITY, MO 65109 EMPLOYER: <input checked="" type="checkbox"/> COMMITTEE:		6/14/06 ----- \$ 300.00	\$ 300.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: IRON WORKERS LOCAL NO 10 PAC ADDRESS: 1000 E 10TH ST CITY / STATE: KANSAS CITY, MO 64106 EMPLOYER: <input checked="" type="checkbox"/> COMMITTEE:		6/15/06 ----- \$ 150.00	\$ 150.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: LEVOTA FOR LEADERSHIP ADDRESS: 5101 SHRANK AVE CITY / STATE: INDEPENDENCE, MO 64055 EMPLOYER: <input checked="" type="checkbox"/> COMMITTEE:		6/20/06 ----- \$ 325.00	\$ 325.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: GREATER KC WOMEN'S POLITICAL CAUCUS PAC ADDRESS: PO BOX 10095 CITY / STATE: KANSAS CITY, MO 64171 EMPLOYER: <input checked="" type="checkbox"/> COMMITTEE:		6/23/06 ----- \$ 325.00	\$ 325.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: FRIENDS OF KAREN MESSERLI ADDRESS: 201 SHOREVIEW DR CITY / STATE: LEE'S SUMMIT, MO 64064 EMPLOYER: <input checked="" type="checkbox"/> COMMITTEE:		6/28/06 ----- \$ 325.00	\$ 325.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
6. SUBTOTAL: ITEMIZED CONTRIBUTIONS THIS PAGE (SUM COLUMN 5)			\$ 1425.00
7. SUBTOTAL: ITEMIZED CONTRIBUTIONS ANY ATTACHED PAGES			+ \$ 5300.00
8. TOTAL: ITEMIZED CONTRIBUTIONS THIS PERIOD (SUM 6 + 7)			\$ 6725.00
9. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS MONETARY CONTRIBUTIONS			\$ 6725.00
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 IN LINE 8 ON FORM CD1A			\$
12. TOTAL ANONYMOUS CONTRIBUTIONS RECEIVED FROM PERSON GIVING \$25 OR LESS			\$ 167.60
13. TOTAL MONETARY CONTRIBUTIONS RECEIVED FROM PERSONS GIVING \$100 OR LESS			\$ 10788.40
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)			\$ 17681.00
23. MONETARY CONTRIBUTIONS & LOANS RECEIVED REQUIRING A RECORD OF NAME & ADDRESS (SUM 9, 13 & 20)			\$ 17513.40



**MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**



NAME OF COMMITTEE FRIENDS OF TOM HALEY	DATE 7/7/06
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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)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: TAXPAYERS IN SUPPORT OF PUBLIC EDUCATION ADDRESS: 824 NE EMILY LANE CITY / STATE: LEE'S SUMMIT, MO 64086 EMPLOYER: <input checked="" type="checkbox"/> COMMITTEE:	6/16/06 ----- \$ 325.00	\$ 325.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: MO NEA-PAC ADDRESS: 1810 EAST ELM ST CITY / STATE: JEFFERSON CITY, MO 65101 EMPLOYER: <input checked="" type="checkbox"/> COMMITTEE:	6/28/06 ----- \$ 325.00	\$ 325.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: P. J. PIERCE ADDRESS: 6811 GLEN RIDGE DR CITY / STATE: AUSTIN, TX 78731 EMPLOYER: <input type="checkbox"/> COMMITTEE: SELF-WRITER	5/8/06 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: BERRY JENNINGS ADDRESS: 25605 E 99TH ST CITY / STATE: LEE'S SUMMIT, MO 64086 EMPLOYER: <input type="checkbox"/> COMMITTEE: AGENT - STATE FARM	5/15/06 ----- \$ 150.00	\$ 150.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: PAM GAMMONS ADDRESS: 5716 SUMMIT KNOLL TRAIL CITY / STATE: SACHSE, TX 75048 EMPLOYER: <input type="checkbox"/> COMMITTEE: MANAGER-AIG	5/18/06 ----- \$ 325.00	\$ 325.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: WILLIAM STRICKLER ADDRESS: 316 SE WILLOW WAY CITY / STATE: LEE'S SUMMIT, MO 64063 EMPLOYER: <input type="checkbox"/> COMMITTEE: RESEARCH MANAGER-HALLMARK CARDS	5/23/06 ----- \$ 325.00	\$ 325.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: D. L. GIBLER ADDRESS: 824 NE EMILY LANE CITY / STATE: LEE'S SUMMIT, MO 64086 EMPLOYER: <input type="checkbox"/> COMMITTEE: RETIRED	5/30/06 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: MARGARET PAULSON ADDRESS: 808 SW PLEASANT DR CITY / STATE: LEE'S SUMMIT, MO 64063 EMPLOYER: <input type="checkbox"/> COMMITTEE: RETIRED	5/31/06 ----- \$ 150.00	\$ 150.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
TOTAL: ITEMIZED CONTRIBUTIONS	\$ 2000.00	

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



**MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**



NAME OF COMMITTEE FRIENDS OF TOM HALEY	DATE 7/7/06
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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: JAN CANTRELL ADDRESS: 921 SW LAUREN CT CITY / STATE: LEE'S SUMMIT, MO 64081 EMPLOYER: TEACHER-LEE'S SUMMIT R-7 SCHOOL DIST <input type="checkbox"/> COMMITTEE:	4/10/06 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: RANDY BRITTON ADDRESS: 6404 NW ARROWHEAD DR CITY / STATE: LAWTON, OK 73505 EMPLOYER: FIRE OFFICER-CITY OF LAWTON <input type="checkbox"/> COMMITTEE:	4/17/06 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: KENNETH HALEY ADDRESS: 5155 PLUM POINT RD CITY / STATE: HUNTINGTON, MD 20639 EMPLOYER: DEALER-ART & ANTIQUES <input type="checkbox"/> COMMITTEE:	4/24/06 ----- \$ 325.00	\$ 325.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: KIM GRAHAM ADDRESS: ROUTE 3, BOX 204 CITY / STATE: MARLOW, OK 73055 EMPLOYER: HOMEMAKER <input type="checkbox"/> COMMITTEE:	4/24/06 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: JANE RUTHERFORD ADDRESS: 2900 SW 14TH ST CITY / STATE: LEE'S SUMMIT, MO 64081 EMPLOYER: HOMEMAKER <input type="checkbox"/> COMMITTEE:	5/3/06 ----- \$ 325.00	\$ 325.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: JOE WILLERTH ADDRESS: 4500 SW BOWSPIRIT CITY / STATE: LEE'S SUMMIT, MO 64082 EMPLOYER: ATTORNEY-KAPKE & WILLERTH <input type="checkbox"/> COMMITTEE:	5/3/06 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: CARROLL STORY ADDRESS: 4105 SW JAMES YOUNGER DR CITY / STATE: LEE'S SUMMIT, MO 64082 EMPLOYER: RETIRED <input type="checkbox"/> COMMITTEE:	5/3/06 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ANN LENTZ ADDRESS: 107 TEAKWOOD ST CITY / STATE: LEE'S SUMMIT, MO 64064 EMPLOYER: HOMEMAKER <input type="checkbox"/> COMMITTEE:	5/8/06 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
TOTAL: ITEMIZED CONTRIBUTIONS		\$ 1900.00
(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 FRIENDS OF TOM HALEY	DATE 7/7/06
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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)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ANNETTE BELLAH ADDRESS: PO BOX 556 CITY / STATE: WESTCLIFFE, CO 81252 EMPLOYER: RETIRED <input type="checkbox"/> COMMITTEE:	6/6/06 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: JAMES OSBORNE ADDRESS: 222 WINNEBAGO DR CITY / STATE: LAKE WINNEBAGO, MO 64034 EMPLOYER: SELF-ORTHODONTIST <input type="checkbox"/> COMMITTEE:	6/7/06 ----- \$ 300.00	\$ 300.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: SUSAN COFFMAN ADDRESS: 306 NE CORDER ST CITY / STATE: LEE'S SUMMIT, MO 64063 EMPLOYER: RETIRED <input type="checkbox"/> COMMITTEE:	6/16/06 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: JANICE HATTIG ADDRESS: 2217 SW MORRIS DR CITY / STATE: LEE'S SUMMIT, MO 64082 EMPLOYER: R-VII SCHOOL DISTRICT-TEACHER <input type="checkbox"/> COMMITTEE:	6/20/06 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: FRED ARBANAS ADDRESS: 3350 SW HOOK RD CITY / STATE: LEE'S SUMMIT, MO 64082 EMPLOYER: JACKSON COUNTY-LEGISLATOR <input type="checkbox"/> COMMITTEE:	6/28/06 ----- \$ 300.00	\$ 300.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: DIANA SWIFT ADDRESS: 4617 BIRKDALE CT CITY / STATE: LEE'S SUMMIT, MO 64064 EMPLOYER: HOMEMAKER <input type="checkbox"/> COMMITTEE:	6/28/06 ----- \$ 200.00	\$ 200.00 <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
TOTAL: ITEMIZED CONTRIBUTIONS		\$ 1400.00

(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 FRIENDS OF TOM HALEY		2. REPORT DATE 7/7/06	
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			
POSTAGE			\$ 78.00
FACILITY RENT - \$50.00 ; WEBSITE - \$30.00			\$ 80.00
5. SUBTOTAL: NON-ITEMIZED EXPENDITURES THIS PAGE (SUM COLUMN 4)			\$ 158.00
6. SUBTOTAL: NON-ITEMIZED EXPENDITURES ANY ATTACHED PAGES			+ \$
7. TOTAL: NON-ITEMIZED EXPENDITURES THIS PERIOD (SUM 5 + 6)			\$ 158.00
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: CONSUMERS PRINTING INC ADDRESS: 112 E HARRIS ST CITY / STATE: GRAIN VALLEY, MO 64029		4/10/06	\$ 369.07 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: CONSUMERS PRINTING INC ADDRESS: 112 E HARRIS ST CITY / STATE: GRAIN VALLEY, MO 64029		4/24/06	\$ 401.16 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: LS POST OFFICE ADDRESS: CITY / STATE: LEE'S SUMMIT, MO 64063		4/26/06	\$ 390.00 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: BEACON PRESS ADDRESS: 20 SW PERSELS RD CITY / STATE: LEE'S SUMMIT, MO 64081		4/26/06	\$ 1103.15 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: JACKSON COUNTY DEMOCRATIC COMM ADDRESS: 14401 COVINGTON RD CITY / STATE: INDEPENDENCE, MO 64055		5/3/06	\$ 125.00 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
12. SUBTOTAL: THIS PAGE (SUM COLUMN 11)			\$ 2388.38
13. SUBTOTAL: ANY ATTACHED PAGES			+ \$ 4366.48
14. TOTAL: ITEMIZED EXPENDITURES THIS PERIOD (SUM 12 +13)			\$ 6754.86
15. TOTAL: MONETARY EXPENDITURES THIS PERIOD (SUM 7 + 14)			\$ 6912.86
16. AMOUNT OF LINE 15 WHICH WAS PAID OUT THIS PERIOD			\$ 6912.86
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 FRIENDS OF TOM HALEY	DATE 7/7/06
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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 NAME AND ADDRESS OF RECIPIENT	DATE	PURPOSE - (IF PAYMENT WAS TO A CAMPAIGN WORKER, SHOW AGGREGATE PAID)	AMOUNT PAID OR INCURRED THIS PERIOD
LECPI 4501 CLEAVER II BLVD, KANSAS CITY, MO 64130	5/8/06	DINNER EVENT	\$ 250.00
LEGAL AID OF WESTERN MISSOURI'S JUSTICE FOR ALL LUNCHEON, 1125 GRAND, KC MO 64106	5/24/06	LUNCHEON	\$ 130.00
CONSUMERS PRINTING INC 112 E HARRIS ST., GRAIN VALLEY, MO 64029	5/26/06	PRINTING	\$ 282.49
CONSUMERS PRINTING INC 112 E HARRIS ST., GRAIN VALLEY, MO 64029	6/13/06	PRINTING	\$ 283.48
LS POST OFFICE LEE'S SUMMIT, MO 64063	6/13/06	POSTAGE	\$ 546.00
BEACON PRESS 20 SW PERSELS RD, LEE'S SUMMIT, MO 64081	6/13/06	INVITATIONS	\$ 350.07
BEACON PRESS 20 SW PERSELS RD, LEE'S SUMMIT, MO 64081	6/27/06	SIGNS	\$ 1907.18
JACKIE MCCORMICK 29104 E 117TH ST., LEE'S SUMMIT, MO 64086	6/27/06	REIMBURSEMENT FOR SHIRTS \$617.26	\$ 617.26
			\$
			\$
TOTAL: ITEMIZED EXPENDITURES (CARRY TO ITEM 13 "SUBTOTAL: ANY ATTACHED PAGES" ON FORM CD-3)			\$ 4366.48