



STATE OF MISSOURI  
OFFICE OF ADMINISTRATION  
MISSOURI ETHICS COMMISSION

**48 HOUR NOTICE OF LATE CONTRIBUTION/LOANS RECEIVED**

P.O. BOX 1284  
JEFFERSON CITY, MO 65102  
(800) 392-8860  
(573) 626-4608 (FAX)  
www.moethics.state.mo.us (web site)

1. STATEMENT DATE	This form is optional and may be used to report contributions in excess of \$250 received within 12 days of the election pursuant to Section 130.050.3 RSMo.	M.E.C. ID NO. <u>C041626</u>
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2. FULL NAME OF COMMITTEE <i>AL LIESE FOR STATE REP.</i>
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ADDRESS OF COMMITTEE <i>1982 SPRINGTREE</i>
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CITY, STATE AND ZIP CODE <i>MARYLAND HEIGHTS, MO 63043</i>
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3. NAME OF CANDIDATE <i>ALBERT J. LIESE</i>	4. OFFICE SOUGHT <i>STATE REPRESENTATIVE 79TH DISTRICT</i>
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FULL NAME, MAILING ADDRESS AND ZIP CODE	DATE RECEIVED	AMOUNT
<i>EASTERN MO LABORERS' EDUC. &amp; BENE. FD. 3450 HOLLENBERG DR. BRIDGETON, MO 63044</i>	<i>7-29-06</i>	<i>\$ 325.00</i>

FULL NAME, MAILING ADDRESS AND ZIP CODE	DATE RECEIVED	AMOUNT

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Missouri Ethics  
Commission *je*

**JUL 31 2006**

Received by  
Fax

FULL NAME, MAILING ADDRESS AND ZIP CODE	DATE RECEIVED	AMOUNT



STATE OF MISSOURI  
OFFICE OF ADMINISTRATION  
MISSOURI ETHICS COMMISSION

**48 HOUR NOTICE OF LATE CONTRIBUTION/LOANS RECEIVED**

P.O. BOX 1254  
JEFFERSON CITY, MO 65102  
(800) 392-8680  
(573) 526-4506 (FAX)  
www.moethics.state.mo.us (web site)

1. STATEMENT DATE	This form is optional and may be used to report contributions in excess of \$250 received within 12 days of the election pursuant to Section 130.050.3 RSMo. <b>M.E.C. ID NO. <u>C041626</u></b>	
2. FULL NAME OF COMMITTEE <i>AL LIESE FOR STATE REP.</i>		
ADDRESS OF COMMITTEE <i>1982 SPRINGTREE</i>		
CITY, STATE AND ZIP CODE <i>MARYLAND HEIGHTS, MO 63043</i>		
3. NAME OF CANDIDATE <i>ALBERT J. LIESE</i>	4. OFFICE SOUGHT <i>STATE REPRESENTATIVE 79TH DISTRICT</i>	
FULL NAME, MAILING ADDRESS AND ZIP CODE <i>CWA DISTRICT 6 PEC 10820 SUNSET OFFICE DR., STE 101 ST. L., MO 63127</i>	DATE RECEIVED <i>7-28-06</i>	AMOUNT <i>\$ 325.00</i>
FULL NAME, MAILING ADDRESS AND ZIP CODE	DATE RECEIVED	AMOUNT
FULL NAME, MAILING ADDRESS AND ZIP CODE	DATE RECEIVED	AMOUNT
FULL NAME, MAILING ADDRESS AND ZIP CODE	DATE RECEIVED	AMOUNT

Missouri Ethics Commission  
*[Signature]*  
JUL 31 2006  
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