



Missouri Ethics Commission
COMMITTEE DISCLOSURE REPORT COVER PAGE

MEC ID NO C001189

1 DATE OF REPORT 12/5/2006	OFFICE USE ONLY <i>[Signature]</i> 17
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INSTRUCTIONS ON REVERSE SIDE

2 FULL NAME OF COMMITTEE Citizens for Holden	
3 COMMITTEE MAILING ADDRESS 2136A W Chesterfield Blvd	4 COMMITTEE TELEPHONE NUMBER 417 883 3399
CITY / STATE / ZIP Springfield MO 65807	
5 TREASURER S NAME Michael T Pivac	
6 TREASURER S MAILING ADDRESS (same as above)	7 TREASURER S TELEPHONE NUMBER HOME 417 882 9344 WORK 417 883 3399
CITY / STATE / ZIP (same as above)	
8 DEPUTY TREASURER S NAME <input type="checkbox"/> CHECK IF NO DEPUTY TREASURER Thomas C Carver	
9 DEPUTY TREASURER S MAILING ADDRESS 115 S Weller	10 DEPUTY TREASURER S TELEPHONE NUMBER HOME 417 863 9303 WORK 417 869 2010
CITY / STATE / ZIP Springfield MO	
11 DATE OF ELECTION 2006	12 TYPE OF ELECTION (CHECK ONE) <input type="radio"/> PRIMARY <input checked="" type="radio"/> GENERAL <input type="radio"/> SPECIAL
13 TIME PERIOD COVERED BY THIS STATEMENT FROM October 27 2006 THROUGH 12/02/2006	
14 CANDIDATE COMMITTEES ONLY LIST CANDIDATE S NAME ADDRESS PHONE OFFICE SOUGHT POLITICAL SUBDIVISION AND POLITICAL PARTY Judge Calvin Holden 1010 Boonville Avenue Springfield MO 65802 Circuit Judge 31st Judicial Circuit Democrat <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 type="checkbox"/> Jul 15 <input type="checkbox"/> Oct 15 <input type="checkbox"/> 8 DAYS BEFORE <input checked="" 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-left: auto; margin-right: auto;">MISSOURI ETHICS COMMISSION DEC 08 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 <i>[Signature]</i> 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 <i>[Signature]</i> CANDIDATE S SIGNATURE



Missouri Ethics Commission
REPORT SUMMARY
 INSTRUCTIONS ON REVERSE SIDE

NAME OF COMMITTEE Citizens for Holden	DATE OF REPORT 12/5/2006	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		\$ 67 725 00			
2	ALL MONETARY CONTRIBUTIONS RECEIVED THIS PERIOD	\$ 3 250 00		MONEY ON HAND		
3	ALL LOANS RECEIVED THIS PERIOD	+ \$ 0				
4	MISCELLANEOUS RECEIPTS THIS PERIOD	+ \$ 234 15		25	MONEY ON HAND AT THE BEGINNING OF THIS REPORTING PERIOD (INCLUDING FUNDS IN DEPOSITORY CASH SAVINGS ACCOUNTS AND ALL OTHER INVESTMENTS)	\$ 15 463 35
5	SUBTOTAL MONETARY RECEIPTS THIS PERIOD (SUM 2A + 3A + 4A)	\$ 3 484 15		26	MONETARY RECEIPTS THIS PERIOD (FROM ITEM 5)	+ \$ 3 484 15
6	IN KIND CONTRIBUTIONS RECEIVED THIS PERIOD	+ \$ 0		27	MONETARY DISBURSEMENTS MADE THIS PERIOD (SUM 11 + 17 + 24)	\$ 16 214 27
7	TOTAL ALL RECEIPTS THIS PERIOD (SUM 5A + 6A)	\$ 3 484 15		a) Disbursements By Check \$ 16 214 27 b) Disbursements By Cash \$		
8	FUNDS USED FOR REPAYING LOANS THIS PERIOD	\$ 0		28	MONEY ON HAND AT THE CLOSE OF THIS REPORTING PERIOD (SUM 25 + 26 27)	\$ 2 733 23
9	TOTAL ALL RECEIPTS THIS ELECTION (SUM 1B + 7A 8A)	\$ 71 209 15				
EXPENDITURES		A THIS PERIOD	B THIS ELECTION			
10	TOTAL EXPENDITURES FOR THIS ELECTION PREVIOUSLY REPORTED		\$ 67 908 61			
11	EXPENDITURES MADE BY CASH OR CHECK THIS PERIOD	\$ 16 214 27		INDEBTEDNESS		
12	IN KIND EXPENDITURES MADE THIS PERIOD	+ \$ 0				
13	DEBTS INCURRED THIS PERIOD (NOT INCLUDING LOANS)	+ \$ 0		29	OUTSTANDING INDEBTEDNESS AT THE BEGINNING OF THIS PERIOD	\$ 10 000 00
14	TOTAL ALL EXPENDITURES MADE THIS PERIOD (SUM 11A + 12A + 13A)	\$ 16 214 27		30	LOANS RECEIVED THIS PERIOD	+ \$ 0
15	TOTAL EXPENDITURES THIS ELECTION (SUM 10B + 14A)	\$ 84 122 88		31	NEW DEBTS INCURRED THIS PERIOD	+ \$ 0
CONTRIBUTIONS MADE		A THIS PERIOD	B THIS ELECTION			
16	TOTAL CONTRIBUTIONS MADE FOR THIS ELECTION PREVIOUSLY REPORTED		\$ 0	32	PAYMENTS MADE ON LOANS THIS PERIOD	\$ 0
17	ALL MONETARY CONTRIBUTIONS MADE THIS PERIOD	\$ 0		33	CREDITS RECEIVED ON LOANS THIS PERIOD	\$ 0
18	ALL IN KIND CONTRIBUTIONS MADE THIS PERIOD	+ \$ 0		34	PAYMENTS MADE THIS PERIOD ON DEBTS INCURRED IN PREVIOUS PERIOD	\$ 0
19	TOTAL ALL CONTRIBUTIONS MADE THIS PERIOD (SUM 17A + 18A)	\$ 0		35	TOTAL INDEBTEDNESS AT THE CLOSE OF THIS REPORTING PERIOD (SUM 29 + 30 + 31 32 33 34)	\$ 10 000 00
20	TOTAL ALL CONTRIBUTIONS MADE THIS ELECTION (SUM 16B + 19A)	\$ 0				
OTHER DISBURSEMENTS		A THIS PERIOD	B THIS ELECTION			
21	FUNDS USED FOR REPAYING LOANS THIS PERIOD	+ \$ 0				
22	PAYMENTS THIS PERIOD ON PREVIOUSLY REPORTED DEBTS INCURRED	+ \$ 0				
23	ANY MISCELLANEOUS DISBURSEMENT NOT REPORTED ELSEWHERE	+ \$ 0				
24	TOTAL OTHER DISBURSEMENTS THIS PERIOD (SUM 21A + 22A + 23A)	\$ 0				



MISSOURI ETHICS COMMISSION
EXPENDITURES AND CONTRIBUTIONS MADE
 INSTRUCTIONS ON REVERSE SIDE

OFFICE USE ONLY

1 NAME OF COMMITTEE Citizens for Holden		2 REPORT DATE 12/5/2006	
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			\$
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
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
13 SUBTOTAL ANY ATTACHED PAGES			+
14 TOTAL ITEMIZED EXPENDITURES THIS PERIOD (SUM 12 +13)			\$ 16 214 27
15 TOTAL MONETARY EXPENDITURES THIS PERIOD (SUM 7 + 14)			\$ 16 214 27
16 AMOUNT OF LINE 15 WHICH WAS PAID OUT THIS PERIOD			\$ 16 214 27
17 AMOUNT OF LINE 15 WHICH WAS DEBT INCURRED THIS PERIOD			\$ 0
18 IF COMMITTEE MADE ANY IN KIND EXPENDITURES THIS PERIOD LIST AMOUNT			\$ 0
19 FUNDS USED FOR REPAYING LOANS THIS PERIOD (ATTACH FORM CD1B)			\$ 0
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)			\$ 0
24 SUBTOTAL ANY ATTACHED PAGES			+
25 TOTAL MONETARY CONTRIBUTIONS MADE THIS PERIOD (SUM 23 + 24)			\$ 0
26 IF COMMITTEE MADE ANY LOANS THIS PERIOD LIST AMOUNT			\$ 0
27 TOTAL ALL MONETARY CONTRIBUTIONS AND LOANS MADE THIS PERIOD (SUM 25 + 26)			\$ 0
28 IF COMMITTEE MADE ANY IN KIND CONTRIBUTIONS THIS PERIOD LIST AMOUNT			\$ 0

ALL ITEMIZED

SEE ATTACHED SHEETS



**MISSOURI ETHICS COMMISSION
EXPENDITURES MADE SUPPLEMENTAL FORM**

OFFICE USE ONLY

NAME OF COMMITTEE Citizens for Holden	DATE 12/5/2006
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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
Missouri Ethics Commission	10/27/2006	Fine report one day late	\$ 10 00
Advance Colorprint 1824 E Commercial Springfield MO 65803	10/30/2006	Printing	\$ 1 255 77
Ozark Mailing Service Inc PO Box 9303 Springfield MO 65801 9303	10/30/2006	Postage	\$ 10 440 00
KGBX Radio/Clear Channel 1856 S Glenstone Ave Springfield MO 65804	10/30/2006	Radio Ad	\$ 2 218 50
U S Post Office Springfield MO	11/01/2006	Postage	\$ 120 00
KY 3 TV 999 W Sunshine Springfield MO 65807	11/01/2006	TV Ad	\$ 220 00
KY 3 TV 999 W Sunshine] Springfield MO 65807	11/01/2006	TV Ad	\$ 850 00
Agrario Restaurant 311 Patton Ave Springfield MO 65806	11/07/2006	Food	\$ 500 00
Patrick Carver 115 S Weller Springfield MO	11/07/2006	Web Design	\$ 600 00
			\$
TOTAL ITEMIZED EXPENDITURES			
(CARRY TO ITEM 13 SUBTOTAL ANY ATTACHED PAGES ON FORM CD 3)			\$ 16 214 27



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS AND LOANS RECEIVED
 INSTRUCTIONS ON REVERSE SIDE

OFFICE USE ONLY

1 NAME OF COMMITTEE Citizens for Holden		2 REPORT DATE 12/5/2006	
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 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
6 SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE (SUM COLUMN 5)			\$ 0
7 SUBTOTAL ITEMIZED CONTRIBUTIONS ANY ATTACHED PAGES			+ \$ 3 250 00
8 TOTAL ITEMIZED CONTRIBUTIONS THIS PERIOD (SUM 6 + 7)			\$ 3 250 00
9 AMOUNT OF ITEM 8 THAT WAS RECEIVED AS MONETARY CONTRIBUTIONS			\$ 3 250 00
10 AMOUNT OF ITEM 8 THAT WAS RECEIVED AS IN KIND CONTRIBUTIONS			\$ 0
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)			\$ 0
19 SUBTOTAL LOANS FROM ANY ATTACHED PAGES			\$ 0
20 TOTAL LOANS THIS PERIOD (SUM 18 + 19)			\$ 0
21 TOTAL ALL IN KIND CONTRIBUTIONS (SUM 10 + 14)			\$ 0
22 TOTAL ALL MONETARY CONTRIBUTIONS (SUM 9 11 12 & 13)			\$ 3 250 00
23 MONETARY CONTRIBUTIONS & LOANS RECEIVED REQUIRING A RECORD OF NAME & ADDRESS (SUM 9 13 & 20)			\$ 3 250 00

SEE ATTACHED SHEETS

ALL ITEMIZED



**MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED SUPPLEMENTAL**

OFFICE USE ONLY

NAME OF COMMITTEE: Citizens for Holden
DATE: 12/5/2006

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 Patrick J Platter ADDRESS 1613 S Charing Road CITY/STATE Springfield, MO 65809 EMPLOYER Attorney <input type="checkbox"/> COMMITTEE	11-07-06 \$ 600 00 \$ 600 00	\$ 600 00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN KIND
NAME Falcon Steel, Inc ADDRESS 2610 N Eastgate CITY/STATE Springfield, MO 65803 EMPLOYER <input type="checkbox"/> COMMITTEE	11-06-06 \$ 200 00 \$ 200 00	\$ 200 00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN KIND
NAME Jack L Miller ADDRESS P O Box 872 CITY/STATE Lebanon, MO 65536 EMPLOYER Attorney <input type="checkbox"/> COMMITTEE	11-06-06 \$ 200 00 \$ 200 00	\$ 200 00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN KIND
NAME Terry J Heinz ADDRESS 3916 Eaglescliff CITY/STATE Springfield, MO 65809 EMPLOYER Falcon Steel Co <input type="checkbox"/> COMMITTEE	11-06-06 \$ 200 00 \$ 200 00	\$ 200 00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN KIND
NAME Julie M Hamlin ADDRESS 1948 E Sunset CITY/STATE Springfield, MO 65804 EMPLOYER Carlson Properties <input type="checkbox"/> COMMITTEE	11-03-06 \$ 600 00 \$ 600 00	\$ 600 00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN KIND
NAME Bob R Frost ADDRESS 1216 S Jefferson CITY/STATE Springfield, MO 65807 EMPLOYER Carlson Properties <input type="checkbox"/> COMMITTEE	11-03-06 \$ 600 00 \$ 600 00	\$ 600 00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN KIND
NAME James R Schumacher ADDRESS 155 Park Central Square CITY/STATE Springfield, MO 65806 EMPLOYER Attorney <input type="checkbox"/> COMMITTEE	11-03-06 \$ 100 00 \$ 100 00	\$ 100 00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN KIND
NAME David J Thomas ADDRESS 1848 E Berkeley St CITY/STATE Springfield, MO 65804 EMPLOYER Self Employed <input type="checkbox"/> COMMITTEE	11-03-06 \$ 25 00 \$ 25 00	\$ 25 00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN KIND

TOTAL ITEMIZED CONTRIBUTIONS \$ 2525 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 Holden	DATE 12/5/2006
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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 Walker, Salveter, Lee & Graff ADDRESS 3259 E Sunshine, Suite M CITY/STATE Springfield, MO 65804 EMPLOYER Attorneys <input type="checkbox"/> COMMITTEE	11-03-06 \$ 50 00	\$50 00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN KIND
NAME Albert A Riederer ADDRESS 1100 Main St , Ste 2800 CITY/STATE Kansas City, MO 64105 EMPLOYER Attorney <input type="checkbox"/> COMMITTEE	11-03-06 \$ 325 00	\$ 325 00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN KIND
NAME Pamela Ross ADDRESS 18 Aberdeen Pl CITY/STATE Saint Louis, MO 63105 EMPLOYER City of St Louis <input type="checkbox"/> COMMITTEE	11-03-06 \$ 100 00	\$ 100 00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN KIND
NAME JCB Containers, LLC ADDRESS P O Box 9303 CITY/STATE Springfield, MO 65801 EMPLOYER <input type="checkbox"/> COMMITTEE	11-03-06 \$150 00	\$ 150 00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN KIND
NAME Gregory A Dorshorst ADDRESS 2103 E Sunshine St CITY/STATE Springfield, MO 65804 EMPLOYER Attorney <input type="checkbox"/> COMMITTEE	11-03-06 \$ 100 00	\$ 100 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
TOTAL ITEMIZED CONTRIBUTIONS		\$ 725 00
(CARRY TO ITEM 7 SUBTOTAL ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES ON FORM CD 1)		



Missouri Ethics Commission
ADDENDUM STATEMENT

MEC ID NO C001189

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 4 form Report Summary Misc Receipt This is the amount of a partial refund received November 13 2006 from Ozark Mailing Service Inc for mailing postage expense that was apparently double billed by OMS

HEARNE & PIVAC
ATTORNEYS AT LAW
CHESTERFIELD VILLAGE
2136A W CHESTERFIELD BLVD
SPRINGFIELD MISSOURI 65807

TELEPHONE (417) 883 3399
TELECOPIER (417) 883 3996
E-MAIL ADDRESS mail@hpl.wfirm.org

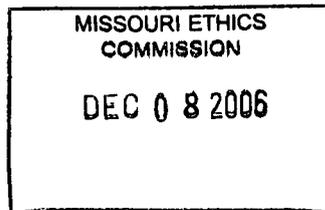
THOMAS H HEARNE
thearne@hpl.wfirm.org
MICHAEL T PIVAC
mtpac@hpl.wfirm.org

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December 5, 2006

Missouri Ethics Commission
P O Box 1254
Jefferson City MO 65102

Re Citizens for Holden (Judge Calvin Holden)
Committee Disclosure Report
M E C ID No C001189



Dear Missouri Ethics Commission

Enclosed please find the Committee Disclosure Report dated December 5 2006 of the Citizens for Holden

If you have any questions regarding this report please do not hesitate to contact me at the above number

Thank you for your attention to this matter

Very truly yours

A handwritten signature in black ink, appearing to read "Michael T. Pivac". The signature is fluid and cursive, with a long horizontal stroke extending to the right.

Michael T Pivac
Treasurer for Citizens for Holden

cc Judge Calvin Holden

f:\mtp\Citizens for Holden\2006\120506 Letter to MO Ethics Commission