



Missouri Ethics Commission
COMMITTEE DISCLOSURE REPORT COVER PAGE

M.E.C. ID NO. C071315

1. DATE OF REPORT	OFFICE USE ONLY
July 12, 2008	<i>[Signature]</i> <i>[Signature]</i>

INSTRUCTIONS ON REVERSE SIDE

2. FULL NAME OF COMMITTEE 4th District Senate Committee	
3. COMMITTEE MAILING ADDRESS 48 Willmore Road	4. COMMITTEE TELEPHONE NUMBER 314-353-2562
CITY / STATE / ZIP St. Louis, MO 63109	
5. TREASURER'S NAME Louise D. Tonkovich	
6. TREASURER'S MAILING ADDRESS 48 Willmore Road	7. TREASURER'S TELEPHONE NUMBER HOME: 314-353-2562
CITY / STATE / ZIP St. Louis, MO 63109	
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	
11. DATE OF ELECTION	12. TYPE OF ELECTION (CHECK ONE) <input checked="" type="radio"/> PRIMARY <input type="radio"/> GENERAL <input type="radio"/> SPECIAL
13. TIME PERIOD COVERED BY THIS STATEMENT FROM 4-1-08 THROUGH 6-30-08	
14. CANDIDATE COMMITTEES ONLY: LIST CANDIDATE'S NAME, ADDRESS, PHONE, OFFICE SOUGHT, POLITICAL SUBDIVISION AND POLITICAL PARTY	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__
<input type="checkbox"/> CHECK IF INCUMBENT <input type="checkbox"/> REPUBLICAN <input type="checkbox"/> DEMOCRAT <input type="checkbox"/> _____	
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>Louise D. Tonkovich</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. _____ CANDIDATE'S SIGNATURE

MISSOURI ETHICS COMMISSION
JUL 15 2008



Missouri Ethics Commission
REPORT SUMMARY
 INSTRUCTIONS ON REVERSE SIDE

NAME OF COMMITTEE 4th District Senate Committee	DATE OF REPORT 7-12-08	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		\$ 72,925.00	MONEY ON HAND	
2. ALL MONETARY CONTRIBUTIONS RECEIVED THIS PERIOD	\$ 61,500.00			
3. ALL LOANS RECEIVED THIS PERIOD	+ 0			
4. MISCELLANEOUS RECEIPTS THIS PERIOD	+ 0			
5. SUBTOTAL MONETARY RECEIPTS THIS PERIOD (SUM 2A + 3A + 4A)	\$ 61,500.00			
6. IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD	+ 0		25. MONEY ON HAND AT THE BEGINNING OF THIS REPORTING PERIOD (INCLUDING FUNDS IN DEPOSITORY, CASH, SAVINGS ACCOUNTS AND ALL OTHER INVESTMENTS)	\$ 525.00
7. TOTAL ALL RECEIPTS THIS PERIOD (SUM 5A + 6A)	\$ 61,500.00		26. MONETARY RECEIPTS THIS PERIOD (FROM ITEM 5)	+ 61,500.00
8. FUNDS USED FOR REPAYING LOANS THIS PERIOD	- 0		27. MONETARY DISBURSEMENTS MADE THIS PERIOD (SUM 11 + 17 + 24)	- 59,650.00
9. TOTAL ALL RECEIPTS THIS ELECTION (SUM 1B + 7A - 8A)		\$ 134,425.00	a) Disbursements By Check \$ 59,650.00 b) Disbursements By Cash \$	- 59,650.00
EXPENDITURES			28. MONEY ON HAND AT THE CLOSE OF THIS REPORTING PERIOD (SUM 25 + 26 - 27)	\$ 2,375.00
10. TOTAL EXPENDITURES FOR THIS ELECTION PREVIOUSLY REPORTED		\$ 13,450.00	INDEBTEDNESS	
11. EXPENDITURES MADE BY CASH OR CHECK THIS PERIOD	\$ 0			
12. IN-KIND EXPENDITURES MADE THIS PERIOD	+ 0			
13. DEBTS INCURRED THIS PERIOD (NOT INCLUDING LOANS)	+ 0			
14. TOTAL ALL EXPENDITURES MADE THIS PERIOD (SUM 11A + 12A + 13A)	\$ 0			
15. TOTAL EXPENDITURES THIS ELECTION (SUM 10B + 14A)		\$ 13,450.00	29. OUTSTANDING INDEBTEDNESS AT THE BEGINNING OF THIS PERIOD	\$ 0
CONTRIBUTIONS MADE			30. LOANS RECEIVED THIS PERIOD	+ 0
16. TOTAL CONTRIBUTIONS MADE FOR THIS ELECTION PREVIOUSLY REPORTED		\$ 58,950	31. NEW DEBTS INCURRED THIS PERIOD	+ 0
17. ALL MONETARY CONTRIBUTIONS MADE THIS PERIOD	\$ 59,650		32. PAYMENTS MADE ON LOANS THIS PERIOD	- 0
18. ALL IN-KIND CONTRIBUTIONS MADE THIS PERIOD	+ 0		33. CREDITS RECEIVED ON LOANS THIS PERIOD	- 0
19. TOTAL ALL CONTRIBUTIONS MADE THIS PERIOD (SUM 17A + 18A)	\$ 59,650		34. PAYMENTS MADE THIS PERIOD ON DEBTS INCURRED IN PREVIOUS PERIOD	- 0
20. TOTAL ALL CONTRIBUTIONS MADE THIS ELECTION (SUM 16B + 19A)		\$ 118,800.00	35. TOTAL INDEBTEDNESS AT THE CLOSE OF THIS REPORTING PERIOD (SUM 29 + 30 + 31 - 32 - 33 - 34)	\$ 0
OTHER DISBURSEMENTS				
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
4th District Senate Committee

2. REPORT DATE
July 12, 2008

A. EXPENDITURES OF \$100 OR LESS BY CATEGORY
 (LIST PAYMENTS TO CAMPAIGN WORKERS IN SECTION B BELOW)

3. CATEGORY OF EXPENDITURE

4. AMOUNT PAID OR INCURRED THIS PERIOD

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) \$ 0

B. ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS

8. NAME AND ADDRESS OF RECIPIENT	9. DATE	10. PURPOSE - (IF PAYMENT WAS TO A CAMPAIGN WORKER, SHOW AGGREGATE PAID)	11. AMOUNT THIS PERIOD
NAME: ADDRESS: CITY / STATE:			\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:			\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:			\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:			\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:			\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED

12. SUBTOTAL: THIS PAGE (SUM COLUMN 11) \$ 0

13. SUBTOTAL: ANY ATTACHED PAGES + 0

14. TOTAL: ITEMIZED EXPENDITURES THIS PERIOD (SUM 12 + 13) \$ 0

15. TOTAL: MONETARY EXPENDITURES THIS PERIOD (SUM 7 + 14) \$ 0

16. AMOUNT OF LINE 15 WHICH WAS PAID OUT THIS PERIOD \$ 0

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. CONTRIBUTIONS MADE (REGARDLESS OF AMOUNT)

20. NAME AND ADDRESS OF CANDIDATE OR COMMITTEE	21. DATE	22. AMOUNT
NAME: Slay for Mayor ADDRESS: P.O. Box 23039 CITY / STATE: St. Louis, MO 63156	6-9-08	\$ 5,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: Nixon for Governor ADDRESS: P.O. Box 143 CITY / STATE: Jefferson City, MO 65102	6-13-08	\$ 13,450.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: Friends of Tom Hayes ADDRESS: 5834 Delor CITY / STATE: St. Louis, MO 63109	6-20-08	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

23. SUBTOTAL: THIS PAGE (SUM COLUMN 22) \$ 18,650.00

24. SUBTOTAL: ANY ATTACHED PAGES \$ 41,000.00

25. TOTAL: MONETARY CONTRIBUTIONS MADE THIS PERIOD \$ 59,650.00

26. IF COMMITTEE MADE ANY LOANS THIS PERIOD, LIST AMOUNT \$ 0

27. TOTAL: ALL MONETARY CONTRIBUTIONS AND LOANS MADE THIS PERIOD (SUM 25 + 26) \$ 59,650.00

28. TOTAL: IN-KIND CONTRIBUTIONS MADE THIS PERIOD, LIST AMOUNT \$ 0



**MISSOURI ETHICS COMMISSION
CONTRIBUTIONS MADE - SUPPLEMENTAL FORM**

OFFICE USE ONLY

NAME OF COMMITTEE 4th District Senate Committee		DATE July 12, 2008
CONTRIBUTIONS MADE (REGARDLESS OF AMOUNT)		
NAME AND ADDRESS OF CANDIDATE OR COMMITTEE	DATE	AMOUNT
NAME: Friends of Louise Tonkovich ADDRESS: 48 Willmore Road CITY / STATE: St. Louis, MO 63109	6-20-08	\$ 200 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: 87th Democratic Leg. Dist. Comm. ADDRESS: 30 Willow Hill Road CITY / STATE: St. Louis, MO 63124	6-30-08	\$ 3,300 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: 114th Leg. Democratic Comm. ADDRESS: 1618 St., Marys Blvd. CITY / STATE: Jefferson City, MO 65109	6-30-08	\$ 3,300 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: Cole County Dem. Central Comm. ADDRESS: 3617 Schott Road CITY / STATE: Jefferson City, MO 65101	6-30-08	\$ 3,300 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: Slay for Mayor ADDRESS: P.O. Box 23039 CITY / STATE: St. Louis, MO 63156	6-30-08	\$ 1,450 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: Citizens for Mike Talboy ADDRESS: 21 W. 10th St. #7E CITY / STATE: Kansas City, MO 64105	6-30-08	\$ 900 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: 72nd Legislative District Comm. ADDRESS: 825 Chevlot CITY / STATE: St. Louis, MO 63122	6-30-08	\$ 3,950 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: 90th Legislative District Comm. ADDRESS: 684 S Old HWY 141 CITY / STATE: Fenton, MO 63026	6-30-08	\$ 3,350 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: 65th Legislative Comm. ADDRESS: 9433 Vicary CITY / STATE: St. Louis, MO 63126	6-30-08	\$ 5,000 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: 82nd Legislative Comm. ADDRESS: 36 Rio Vista CITY / STATE: St. Louis, MO 63124	6-30-08	\$ 1,400 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
TOTAL: ITEMIZED CONTRIBUTIONS MADE THIS PAGE (CARRY TO ITEM 25. "SUBTOTAL: ANY ATTACHED PAGES" ON FORM CD-3)		\$ 26,150



**MISSOURI ETHICS COMMISSION
CONTRIBUTIONS MADE - SUPPLEMENTAL FORM**

OFFICE USE ONLY

NAME OF COMMITTEE 4th District Senate Committee		DATE July 12, 2008
CONTRIBUTIONS MADE (REGARDLESS OF AMOUNT)		
NAME AND ADDRESS OF CANDIDATE OR COMMITTEE	DATE	AMOUNT
NAME: Benjamin for Missouri Senate ADDRESS: P.O. Box 35 CITY / STATE: Freeman, MO 64746	6-30-08	\$ 3250 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: New Leadership for Missouri ADDRESS: P.O. Box 4554 CITY / STATE: St. Louis, MO 63108	6-30-08	\$ 2,650 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: Committee to Elect Beth Low ADDRESS: 5930 Cherry St. CITY / STATE: Kansas City, MO 64110	6-30-08	\$ 500 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: Friends to Elect Ted Hoskins ADDRESS: 8424 January CITY / STATE: St. Louis, MO 63134	6-30-08	\$ 2,000 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: St. Louis County Democratic Central Comm. ADDRESS: P.O. Box 823 CITY / STATE: Manchester, MO 63011	6-30-08	\$ 1,500 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: Sandra Aust for Missouri Senate ADDRESS: 4380 N. Oak Ste. 100 CITY / STATE: Kansas City, MO 64116	6-30-08	\$ 3,250 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: Citizens for Don Calloway ADDRESS: 8418 Glen Echo Dr. CITY / STATE: St. Louis, MO 63121	6-30-08	\$ 1,700 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE:		\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE:		\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE:		\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
TOTAL: ITEMIZED CONTRIBUTIONS MADE THIS PAGE (CARRY TO ITEM 25. "SUBTOTAL: ANY ATTACHED PAGES" ON FORM CD-3)		\$ 14,850



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS AND LOANS RECEIVED
 INSTRUCTIONS ON REVERSE SIDE

OFFICE USE ONLY

1. NAME OF COMMITTEE 4th District Senate Committee		2. REPORT DATE 7-12-08	
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: AGC of St. Louis PAC ADDRESS: 6330 Knox Industrial Drive CITY / STATE: St. Louis, MO 63109 EMPLOYER: <input checked="" type="checkbox"/> COMMITTEE:		6-9-08 \$5,000.00	\$ 5,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: Missouri Democratic State Comm. ADDRESS: P.O. Box 719 CITY / STATE: Jefferson City, MO 65102 EMPLOYER: <input checked="" type="checkbox"/> COMMITTEE:		6-9-08 \$14,000.00	\$ 14,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: Health Care Leadership Comm. ADDRESS: 221 E. Capitol Ave. CITY / STATE: Jefferson City, MO 65101 EMPLOYER: <input checked="" type="checkbox"/> COMMITTEE:		6-30-08 \$1,500.00	\$ 1,500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: Supporters of Health Research & Treatments ADDRESS: P.O. Box 220954 CITY / STATE: St. Louis, MO 63122 EMPLOYER: <input checked="" type="checkbox"/> COMMITTEE:		6-30-08 \$18,375	\$ 10,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: Supporters of Health Research & Treatments ADDRESS: P.O. Box 220954 CITY / STATE: St. Louis, MO 63122 EMPLOYER: <input checked="" type="checkbox"/> COMMITTEE:		6-30-08 22,375	\$ 4,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
6. SUBTOTAL: ITEMIZED CONTRIBUTIONS THIS PAGE (SUM COLUMN 5)			\$ 34,500.00
7. SUBTOTAL: ITEMIZED CONTRIBUTIONS ANY ATTACHED PAGES			+ 27,000.00
8. TOTAL: ITEMIZED CONTRIBUTIONS THIS PERIOD (SUM 6 + 7)			\$ 61,500.00
9. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS MONETARY CONTRIBUTIONS			\$ 61,500.00
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			\$ 0
12. TOTAL ANONYMOUS CONTRIBUTIONS RECEIVED FROM PERSON GIVING \$25 OR LESS			\$ 0
13. TOTAL MONETARY CONTRIBUTIONS RECEIVED FROM PERSONS GIVING \$100 OR LESS			\$ 0
14. TOTAL IN-KIND CONTRIBUTIONS RECEIVED FROM PERSONS (NOT COMMITTEES) GIVING \$100 OR LESS			\$ 0
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)			\$ 61,500.00
23. MONETARY CONTRIBUTIONS & LOANS RECEIVED REQUIRING A RECORD OF NAME & ADDRESS (SUM 9, 13 & 20)			\$ 61,500.00



**MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

OFFICE USE ONLY

NAME OF COMMITTEE 4th District Senate Committee	DATE 7-12-08
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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: Supporters of Health Research & Treatments ADDRESS: P.O. Box 22095 CITY / STATE: St. Louis, MO 63122 EMPLOYER: <input checked="" type="checkbox"/> COMMITTEE:	6-30-08 ----- 23,375.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: Life Sciences Fund of Greater KC Chamber of Comm PAC ADDRESS: 911 Main St. CITY / STATE: Kansas City, MO 64105 EMPLOYER: <input checked="" type="checkbox"/> COMMITTEE:	6-30-08 ----- 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: Life Sciences Fund of Greater KC Chamber of Comm PAC ADDRESS: 911 Main St. CITY / STATE: Kansas City, MO 64105 EMPLOYER: <input checked="" type="checkbox"/> COMMITTEE:	6-30-08 ----- 1,500.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: Life Sciences Fund of Greater KC Chamber of Comm PAC ADDRESS: 911 Main St. CITY / STATE: Kansas City, MO 64105 EMPLOYER: <input checked="" type="checkbox"/> COMMITTEE:	6-30-08 ----- 2,500.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: Life Sciences Fund of Greater KC Chamber of Comm PAC ADDRESS: 911 Main St. CITY / STATE: Kansas City, MO 64105 EMPLOYER: <input checked="" type="checkbox"/> COMMITTEE:	6-30-08 ----- 3,500.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: Life Sciences Fund of Greater KC Chamber of Comm PAC ADDRESS: 911 Main St. CITY / STATE: Kansas City, MO 64105 EMPLOYER: <input checked="" type="checkbox"/> COMMITTEE:	6-30-08 ----- 7,500.00	\$ 4,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: Life Sciences Fund of Greater KC Chamber of Comm PAC ADDRESS: 911 Main St. CITY / STATE: Kansas City, MO 64105 EMPLOYER: <input checked="" type="checkbox"/> COMMITTEE:	6-30-08 ----- 10,000.00	\$ 2,500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: Life Sciences Fund of Greater KC Chamber of Comm PAC ADDRESS: 911 Main St. CITY / STATE: Kansas City, MO 64105 EMPLOYER: <input checked="" type="checkbox"/> COMMITTEE:	6-30-08 ----- 12,500.00	\$ 2,500.00 <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)	\$ 13,500.00	



**MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

OFFICE USE ONLY

NAME OF COMMITTEE 4th District Senate Committee	DATE 7-12-08
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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: Life Sciences Fund of the Greater KC Chamber of Comm PAC ADDRESS: 911 Main St. CITY / STATE: Kansas City, MO 64105 EMPLOYER: <input checked="" type="checkbox"/> COMMITTEE:	6-30-08 ----- 22,500.00	\$ 10,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: Supporters of Health Research & Treatments ADDRESS: P.O. Box 220954 CITY / STATE: St. Louis, MO 63122 EMPLOYER: <input checked="" type="checkbox"/> COMMITTEE:	6-30-08 ----- 23,875.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: Supporters of Health Research & Treatments ADDRESS: P.O. Box 220954 CITY / STATE: St. Louis, MO 63122 EMPLOYER: <input checked="" type="checkbox"/> COMMITTEE:	6-30-08 ----- 24,375.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: Supporters of Health Research & Treatments ADDRESS: P.O. Box 220954 CITY / STATE: St. Louis, MO 63122 EMPLOYER: <input checked="" type="checkbox"/> COMMITTEE:	6-30-08 ----- 26,875.00	\$ 2,500.00 <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
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:	----- -----	\$ <input 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)	\$ 13,500.00	