



Missouri Ethics Commission
COMMITTEE DISCLOSURE REPORT COVER PAGE

M.E.C. ID NO. C081298

1. DATE OF REPORT <u>July 28, 2008</u>	OFFICE USE ONLY <u>Jc</u> <u>17</u>
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INSTRUCTIONS ON REVERSE SIDE

2. FULL NAME OF COMMITTEE <u>Schauwecker for Assessor</u>	
3. COMMITTEE MAILING ADDRESS <u>2606 Walther Court</u>	4. COMMITTEE TELEPHONE NUMBER <u>573-446-0593</u>
CITY / STATE / ZIP <u>Columbia, MO 65203-1344</u>	
5. TREASURER'S NAME <u>Nancy K. Wilson</u>	
6. TREASURER'S MAILING ADDRESS <u>3704 Shadow Glen Court</u>	7. TREASURER'S TELEPHONE NUMBER HOME <u>573-875-8501</u> WORK <u>573-445-8000</u>
CITY / STATE / ZIP <u>Columbia, MO 65203-4844</u>	
8. DEPUTY TREASURER'S NAME <input type="checkbox"/> CHECK IF NO DEPUTY TREASURER <u>Sharon J. Schauwecker</u>	
9. DEPUTY TREASURER'S MAILING ADDRESS <u>2606 Walther Court</u>	10. DEPUTY TREASURER'S TELEPHONE NUMBER HOME <u>573-446-0593</u> WORK <u>N/A</u>
CITY / STATE / ZIP <u>Columbia, MO 65203-1344</u>	
11. DATE OF ELECTION <u>August 5, 2008</u>	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 <u>July 1, 2008</u> THROUGH <u>July 24, 2008</u>	
14. CANDIDATE COMMITTEES ONLY: LIST CANDIDATE'S NAME, ADDRESS, PHONE, OFFICE SOUGHT, POLITICAL SUBDIVISION AND POLITICAL PARTY <u>Tom Schauwecker</u> <u>2606 Walther Court</u> <u>Columbia, MO 65203-1344</u> <u>573-446-0593</u> <u>Assessor</u> <u>Boone County</u> <u>Democrat</u> <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 checked="" 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____
16. COMMITTEE TREASURER'S SIGNATURE I CERTIFY THAT THIS REPORT, COMPRISED OF THIS COVER PAGE AND ALL ATTACHED FORMS, IS COMPLETE, TRUE AND ACCURATE. <u>Nancy K. Wilson</u> 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. <u>Tom Schauwecker</u> CANDIDATE'S SIGNATURE

MISSOURI ETHICS COMMISSION
JUL 28 2008
HAND DELIVERED



Missouri Ethics Commission
REPORT SUMMARY
 INSTRUCTIONS ON REVERSE SIDE

NAME OF COMMITTEE <i>Schauwecker for Assessor</i>	DATE OF REPORT <i>July 28, 2008</i>	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		\$ 17,808 ²³	MONEY ON HAND	
2 ALL MONETARY CONTRIBUTIONS RECEIVED THIS PERIOD	\$ 11,825			
3 ALL LOANS RECEIVED THIS PERIOD	+ ϕ			
4 MISCELLANEOUS RECEIPTS THIS PERIOD	+ ϕ			
5 SUBTOTAL MONETARY RECEIPTS THIS PERIOD (SUM 2A + 3A + 4A)	\$ 11,825			
6 IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD	+ ϕ		26. MONETARY RECEIPTS THIS PERIOD (FROM ITEM 5)	+ 11,825 ⁰⁰
7 TOTAL ALL RECEIPTS THIS PERIOD (SUM 5A + 6A)	\$ 11,825		27. MONETARY DISBURSEMENTS MADE THIS PERIOD (SUM 11 + 17 + 24)	
8 FUNDS USED FOR REPAYING LOANS THIS PERIOD	- ϕ		a) Disbursements By Check \$ 14,829 ⁹³	- 14,829 ¹³
9. TOTAL ALL RECEIPTS THIS ELECTION (SUM 1B + 7A - 8A)		\$ 29,633 ²³	b) Disbursements By Cash \$	
EXPENDITURES	A. THIS PERIOD	B. THIS ELECTION	28. MONEY ON HAND AT THE CLOSE OF THIS REPORTING PERIOD (SUM 25 + 26 - 27)	\$ 9,919 ⁸¹
10. TOTAL EXPENDITURES FOR THIS ELECTION PREVIOUSLY REPORTED		\$ 7,020 ⁶¹	INDEBTEDNESS	
11 EXPENDITURES MADE BY CASH OR CHECK THIS PERIOD	\$ 12,692. ⁸¹			
12 IN-KIND EXPENDITURES MADE THIS PERIOD	+ ϕ			
13 DEBTS INCURRED THIS PERIOD (NOT INCLUDING LOANS)	+ ϕ			
14 TOTAL ALL EXPENDITURES MADE THIS PERIOD (SUM 11A + 12A + 13A)	\$ 12,692. ⁸¹			
15. TOTAL EXPENDITURES THIS ELECTION (SUM 10B + 14A)		\$ 19,713 ⁴²	30. LOANS RECEIVED THIS PERIOD	+
CONTRIBUTIONS MADE	A. THIS PERIOD	B. THIS ELECTION	31. NEW DEBTS INCURRED THIS PERIOD	+
16 TOTAL CONTRIBUTIONS MADE FOR THIS ELECTION PREVIOUSLY REPORTED		\$	32. PAYMENTS MADE ON LOANS THIS PERIOD	-
17. ALL MONETARY CONTRIBUTIONS MADE THIS PERIOD	\$		33. CREDITS RECEIVED ON LOANS THIS PERIOD	-
18 ALL IN-KIND CONTRIBUTIONS MADE THIS PERIOD	+		34. PAYMENTS MADE THIS PERIOD ON DEBTS INCURRED IN PREVIOUS PERIOD	-
19 TOTAL ALL CONTRIBUTIONS MADE THIS PERIOD (SUM 17A + 18A)	\$		35. TOTAL INDEBTEDNESS AT THE CLOSE OF THIS REPORTING PERIOD (SUM 29 + 30 + 31 - 32 - 33 - 34)	\$
20 TOTAL ALL CONTRIBUTIONS MADE THIS ELECTION (SUM 16B + 19A)		\$		
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	+ 2,136 ³²			
23. ANY MISCELLANEOUS DISBURSEMENT NOT REPORTED ELSEWHERE	+			
24 TOTAL OTHER DISBURSEMENTS THIS PERIOD (SUM 21A + 22A + 23A)	\$ 2,136 ³²			



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS AND LOANS RECEIVED
 INSTRUCTIONS ON REVERSE SIDE

OFFICE USE ONLY

1. NAME OF COMMITTEE <i>Schauwecker for Assessor</i>		2. REPORT DATE <i>July 28, 2008</i>
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
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)		5. AMOUNT RECEIVED (CHECK IF MONETARY OR 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
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)		\$ <i>0</i>
7. SUBTOTAL ITEMIZED CONTRIBUTIONS ANY ATTACHED PAGES		+ <i>6,700</i>
8. TOTAL ITEMIZED CONTRIBUTIONS THIS PERIOD (SUM 6 + 7)		\$ <i>6,700</i>
9. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS MONETARY CONTRIBUTIONS		\$ <i>6,700</i>
10. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS IN-KIND CONTRIBUTIONS		\$ <i>0</i>
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		\$ <i>0</i>
12. TOTAL ANONYMOUS CONTRIBUTIONS RECEIVED FROM PERSON GIVING \$25 OR LESS		\$ <i>0</i>
13. TOTAL MONETARY CONTRIBUTIONS RECEIVED FROM PERSONS GIVING \$100 OR LESS		\$ <i>5,125</i>
14. TOTAL IN-KIND CONTRIBUTIONS RECEIVED FROM PERSONS (NOT COMMITTEES) GIVING \$100 OR LESS		\$ <i>0</i>
C. LOANS RECEIVED		16. DATE RECEIVED
15. NAME AND ADDRESS OF LENDER		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)		\$ <i>11,825</i>



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE: Schauwecker for Assessor DATE: 8 days before - July 28, 2008

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: <u>Larry Potterfield</u> ADDRESS: <u>8251 W. Highway 40</u> CITY / STATE: <u>Columbia, MO 65202</u> EMPLOYER: <u>Self-Employed - Business</u> <input type="checkbox"/> COMMITTEE:	<u>7/1/08</u> <u>675⁰⁰</u>	\$ <u>675⁰⁰</u> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <u>Jim Flower</u> ADDRESS: <u>916 Hulen Drive</u> CITY / STATE: <u>Columbia, MO 65203</u> EMPLOYER: <u>Self-Employed - Business</u> <input type="checkbox"/> COMMITTEE:	<u>7/1/08</u> <u>500⁰⁰</u>	\$ <u>500⁰⁰</u> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <u>Kim Flower</u> ADDRESS: <u>916 Hulen Drive</u> CITY / STATE: <u>Columbia, MO 65203</u> EMPLOYER: <u>Home maker</u> <input type="checkbox"/> COMMITTEE:	<u>7/1/08</u> <u>500⁰⁰</u>	\$ <u>500⁰⁰</u> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <u>Carroll Wayne Wilkerson</u> ADDRESS: <u>2790 W. Mill Creek Terrace</u> CITY / STATE: <u>Columbia, MO 65203</u> EMPLOYER: <u>Waddell & Reed Financial</u> <input type="checkbox"/> COMMITTEE:	<u>7/8/08</u> <u>250⁰⁰</u>	\$ <u>250⁰⁰</u> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <u>Friends of Casey Forbis</u> ADDRESS: <u>6200 E. Kemper Road</u> CITY / STATE: <u>Hallsville, MO 65255</u> <input checked="" type="checkbox"/> COMMITTEE:	<u>7/8/08</u> <u>250⁰⁰</u>	\$ <u>250⁰⁰</u> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <u>Rhonda W. Jones</u> ADDRESS: <u>3702 Chinkapin Court</u> CITY / STATE: <u>Columbia, MO 65203</u> EMPLOYER: <u>Ferry Chevrolet</u> <input type="checkbox"/> COMMITTEE:	<u>7/8/08</u> <u>200⁰⁰</u>	\$ <u>200⁰⁰</u> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <u>Joel and Janet Bullard</u> ADDRESS: <u>13595 Highway 63 South</u> CITY / STATE: <u>Ashland, MO 65010</u> EMPLOYER: <u>Self-employed - Agriculture</u> <input type="checkbox"/> COMMITTEE:	<u>7/8/08</u> <u>300⁰⁰</u>	\$ <u>300⁰⁰</u> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <u>Bruce and Nancy Wilson</u> ADDRESS: <u>3704 Shadow Glen Court</u> CITY / STATE: <u>Columbia, MO 65203</u> EMPLOYER: <u>"Retired"</u> <input type="checkbox"/> COMMITTEE:	<u>7/8/08</u> <u>300⁰⁰</u>	\$ <u>300⁰⁰</u> <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)		\$ <u>2,975</u>



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE: Schauwecker for Assessor DATE: July 28, 2008 "8 days before"

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: <u>Robert K. & Connie Pugh</u> ADDRESS: <u>1411 Torrey Pines Drive</u> CITY / STATE: <u>Columbia, MO 65203</u> EMPLOYER: <u>MBS - Book Services</u> <input type="checkbox"/> COMMITTEE:	<u>7/8/08</u> <u>500⁰⁰</u>	<u>\$ 500⁰⁰</u> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <u>Dan and Susan Schuppan</u> ADDRESS: <u>5801 Highlands Parkway</u> CITY / STATE: <u>Columbia, MO 65203</u> EMPLOYER: <u>MBS - Missouri Book Services</u> <input type="checkbox"/> COMMITTEE:	<u>7/8/08</u> <u>500⁰⁰</u>	<u>\$ 500⁰⁰</u> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <u>Old Hawthorne Development LLC</u> ADDRESS: <u>6221 E. Highway WW</u> CITY / STATE: <u>Columbia, MO 65201</u> <input type="checkbox"/> COMMITTEE:	<u>7/8/08</u> <u>625⁰⁰</u>	<u>\$ 625⁰⁰</u> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <u>Ted and Kyle Groshong</u> ADDRESS: <u>2600 Limerick Lane</u> CITY / STATE: <u>Columbia, MO 65203</u> EMPLOYER: <u>Physician, UMC</u> <input type="checkbox"/> COMMITTEE:	<u>7/8/08</u> <u>300⁰⁰</u>	<u>\$ 100⁰⁰</u> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <u>Bandy Jacobs</u> ADDRESS: <u>6250 Highway WW</u> CITY / STATE: <u>Columbia, MD 65201</u> EMPLOYER: <u>Self Employed - Ag</u> <input type="checkbox"/> COMMITTEE:	<u>7/9/08</u> <u>250⁰⁰</u>	<u>\$ 250⁰⁰</u> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <u>Broadway Fairview Venture, LLC</u> ADDRESS: <u>2127 Innerbelt Business Center, Suite 200</u> CITY / STATE: <u>St. Louis, MO 63114</u> <input type="checkbox"/> COMMITTEE:	<u>7/7/08</u> <u>325⁰⁰</u>	<u>\$ 325⁰⁰</u> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <u>Grindstone Plaza Development, LLC</u> ADDRESS: <u>2127 Innerbelt Business Center, Suite 200</u> CITY / STATE: <u>St. Louis, MD 63114</u> <input type="checkbox"/> COMMITTEE:	<u>7/7/08</u> <u>325⁰⁰</u>	<u>\$ 325⁰⁰</u> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <u>Donald J. Fries</u> ADDRESS: <u>220 Apple Tree Court, #3</u> CITY / STATE: <u>Columbia, MO 65203</u> EMPLOYER: <u>Self-Employed - Business</u> <input type="checkbox"/> COMMITTEE:	<u>7/25/08</u> <u>200⁰⁰</u>	<u>\$ 100⁰⁰</u> <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)		<u>\$ 2,725⁰⁰</u>



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE: Schauwecker for Assessor DATE: July 28, 2008 "8 days before"

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: <u>Donna M. Grathwohl</u> ADDRESS: <u>2400 N. Shady Hills Lane</u> CITY / STATE: <u>Rocheport, MO 65279</u> EMPLOYER: <u>Homemaker</u> <input type="checkbox"/> COMMITTEE	<u>7/12/08</u> <u>500⁰⁰</u>	\$ <u>500⁰⁰</u> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <u>Peter J. Grathwohl</u> ADDRESS: <u>2400 N. Shady Hills Lane</u> CITY / STATE: <u>Rocheport, MO</u> EMPLOYER: <u>Self-employed business</u> <input type="checkbox"/> COMMITTEE	<u>7/12/08</u> <u>500⁰⁰</u>	\$ <u>500⁰⁰</u> <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
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)		\$ <u>1,000⁰⁰</u>



MISSOURI ETHICS COMMISSION
EXPENDITURES AND CONTRIBUTIONS MADE
 INSTRUCTIONS ON REVERSE SIDE

OFFICE USE ONLY

1 NAME OF COMMITTEE <i>Schauwecker for Assessor</i>		2. REPORT DATE <i>July 28, 2008</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 <i>Office Supplies, Parade Gear, Hardware, Tickets & Tshirts</i>			<i>560.⁰⁷</i>
5. SUBTOTAL NON-ITEMIZED EXPENDITURES THIS PAGE (SUM COLUMN 4)			\$ <i>560.⁰⁷</i>
6 SUBTOTAL: NON-ITEMIZED EXPENDITURES ANY ATTACHED PAGES			+ <i>0</i>
7. TOTAL: NON-ITEMIZED EXPENDITURES THIS PERIOD (SUM 5 + 6)			\$ <i>560.⁰⁷</i>
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)			\$ <i>0</i>
13 SUBTOTAL ANY ATTACHED PAGES			+ <i>12,132.74</i>
14. TOTAL ITEMIZED EXPENDITURES THIS PERIOD (SUM 12 +13)			\$ <i>12,132.74</i>
15 TOTAL MONETARY EXPENDITURES THIS PERIOD (SUM 7 + 14)			\$ <i>12,692.81</i>
16 AMOUNT OF LINE 15 WHICH WAS PAID OUT THIS PERIOD			\$ <i>12,692.81</i>
17 AMOUNT OF LINE 15 WHICH WAS DEBT INCURRED THIS PERIOD			\$ <i>0</i>
18 IF COMMITTEE MADE ANY IN-KIND EXPENDITURES THIS PERIOD, LIST AMOUNT			\$ <i>0</i>
19. FUNDS USED FOR REPAYING LOANS THIS PERIOD (ATTACH FORM CD1B)			\$ <i>0</i>
C. CONTRIBUTIONS MADE (REGARDLESS OF AMOUNT)			
20 NAME AND ADDRESS OF CANDIDATE OR COMMITTEE	21. DATE	22 AMOUNT	
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	
23 SUBTOTAL: THIS PAGE (SUM COLUMN 22)			\$ <i>0</i>
24 SUBTOTAL ANY ATTACHED PAGES			\$ <i>0</i>
25 TOTAL MONETARY CONTRIBUTIONS MADE THIS PERIOD			\$ <i>0</i>
26. IF COMMITTEE MADE ANY LOANS THIS PERIOD, LIST AMOUNT			\$ <i>0</i>
27 TOTAL ALL MONETARY CONTRIBUTIONS AND LOANS MADE THIS PERIOD (SUM 25 + 26)			\$ <i>0</i>
28. TOTAL IN-KIND CONTRIBUTIONS MADE THIS PERIOD, LIST AMOUNT			\$ <i>0</i>



MISSOURI ETHICS COMMISSION
EXPENDITURES MADE - SUPPLEMENTAL FORM

OFFICE USE ONLY

NAME OF COMMITTEE

Schauwecker for Assessor

DATE

July 28, 2008 "8 days before"

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
The Club at Old Hawthorne 6221 E. Broadway Columbia, MO 65201	7/8/08	Buffet	\$ 3,025 ⁰⁰ <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
Columbia Daily Tribune 101 N 4th Street Columbia, MO 65201	7/1/08	Fair Book Ad	\$ 255 ⁰⁰ <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
Orscheln Farm Supply 2800 Paris Road Columbia, MO 65202	7/5/08	Fence Post Signs	\$ 128 ⁸⁰ <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
Boone County Democrats	7/11/08	Database	\$ 250 ⁰⁰ <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
Postal Annex 1400 Forum Boulevard Columbia, MO 65203	7/16/08	Copies	\$ 103. ²⁵ <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
Zimmer Radio 3215 Lemone Industrial Blvd. Columbia, MO 65201	7/17/08	Radio Ads	\$ 674. ⁸⁸ <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
Cumulus Broadcasting 503 Old Highway 63 N Columbia, MO 65201	7/17/08	Radio Ads	\$ 6650 ⁰⁰ <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
			\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
			\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
			\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED

TOTAL: ITEMIZED EXPENDITURES

(CARRY TO ITEM 13 "SUBTOTAL: ANY ATTACHED PAGES" ON FORM CD-3)

\$ 6,086.⁹³



MISSOURI ETHICS COMMISSION
EXPENDITURES MADE - SUPPLEMENTAL FORM

OFFICE USE ONLY

NAME OF COMMITTEE: Schauwecker for Assessor DATE: July 28, 2008 "8 days before"

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			
U. S. Postal Service Columbia, MO 65201-9998	7/18/08	Postage	\$ 155.95 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
U.S. Postal Service Columbia, MO 65201-9998	7/21/08	Postage	\$ 216.00 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
Boone County Journal 209 E. Johnson Ashland, MO 65010	7/22/08	Newspaper Ads	\$ 360.00 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
Northern Boone County Bullseye P.O. Box 357 Hallsville, MO 65255	7/22/08	Newspaper Ads	\$ 390 ⁰⁰ <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
Centralia Fireside Guard P.O. Box 7 Centralia, MO 65240	7/22/08	Newspaper Ads	\$ 342 ²⁰ <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
The Columbia Daily Tribune 101 N. 4th Street Columbia, MO 65201	7/22/08	Newspaper Ads	\$ 507. ⁰⁰ <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
MK Enterprises 10411 Kings Lane Rocheport, MO 65279	7/25/08	Printing and Production	\$ 2,456 ⁶⁶ <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
The Columbia Daily Tribune 101 N. 4th Street Columbia, MO	7/25/08	Newspaper Ads	\$ 1,618 ⁰⁰ <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
			\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
			\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
TOTAL: ITEMIZED EXPENDITURES			
(CARRY TO ITEM 13 "SUBTOTAL: ANY ATTACHED PAGES" ON FORM CD-3)			\$ 6,045.81