



Missouri Ethics Commission  
**COMMITTEE TERMINATION STATEMENT**

OFFICE USE ONLY

INSTRUCTIONS ON REVERSE SIDE

M.E.C. ID NO. \_\_\_\_\_

1. FULL NAME OF COMMITTEE	2. DATE OF REPORT	3. DATE OF DISSOLUTION
4. TREASURER'S NAME AND ADDRESS  NAME: ADDRESS: CITY / STATE / ZIP:	5. NAME, ADDRESS AND PHONE OF PERSON RESPONSIBLE FOR MAINTAINING RECORDS  NAME: ADDRESS: CITY / STATE / ZIP: TELEPHONE NO:	
6. DISTRIBUTION OF SURPLUS FUNDS <input type="checkbox"/> CHECK IF NO SURPLUS REMAINED UPON TERMINATION		
A. NAME AND ADDRESS OF RECIPIENT	B. DATE OF TRANSFER	C. AMOUNT
NAME: ADDRESS: CITY / STATE / ZIP:		\$
NAME: ADDRESS: CITY / STATE / ZIP:		\$
NAME: ADDRESS: CITY / STATE / ZIP:		\$
NAME: ADDRESS: CITY / STATE / ZIP:		\$
NAME: ADDRESS: CITY / STATE / ZIP:		\$
NAME: ADDRESS: CITY / STATE / ZIP:		\$
7. DISPOSAL OF OUTSTANDING DEBTS <input type="checkbox"/> CHECK IF COMMITTEE HAD NO DEBTS UPON TERMINATION		
A. NAME OF CREDITOR	B. DESCRIBE DISPOSAL OF DEBT	C. AMOUNT
NAME: ADDRESS: CITY / STATE / ZIP:		\$
NAME: ADDRESS: CITY / STATE / ZIP:		\$
NAME: ADDRESS: CITY / STATE / ZIP:		\$
NAME: ADDRESS: CITY / STATE / ZIP:		\$
NAME: ADDRESS: CITY / STATE / ZIP:		\$
8. TREASURER VERIFICATION OF DISSOLUTION:  I CERTIFY THAT THE ABOVE NAMED COMMITTEE WAS DISSOLVED ON THE DATE INDICATED, AND THAT ALL REQUIREMENTS FOR TERMINATION UNDER SECTIONS 130.021.8 AND 130.046.7 RSMo HAVE BEEN MET.  _____	9. CANDIDATE VERIFICATION OF DISSOLUTION: (CANDIDATE COMMITTEE ONLY)  I CERTIFY THAT THE ABOVE NAMED COMMITTEE WAS DISSOLVED ON THE DATE INDICATED, AND THAT ALL REQUIREMENTS FOR TERMINATION UNDER SECTIONS 130.021.8 AND 130.046.7 RSMo HAVE BEEN MET.  _____	
TREASURER'S SIGNATURE	CANDIDATE'S SIGNATURE	

## **COMMITTEE TERMINATION STATEMENT INSTRUCTIONS**

**PURPOSE:** This form must be filed to report the termination of a committee and to report the final disposition of the committee's surplus funds and outstanding debts. It should be filed with appropriate officer(s) within ten days of the committee's dissolution.

### **CONTENT OF FORM:**

**ITEM 1:** Enter the committee's full name.

**ITEM 2:** Enter the date this report is being submitted.

**ITEM 3:** Enter the date the committee was terminated. This report is to be filed not later than 10 days after the committee has been dissolved.

**ITEM 4:** Enter the name and address of the committee treasurer.

**ITEM 5:** Enter the name, address, and telephone number of the person responsible for maintaining the committee's records for a period of three years after the date of the election for which the committee was formed.

### **ITEM 6: DISTRIBUTION OF SURPLUS FUNDS:**

Check the box provided if the committee had no remaining funds at the time of termination. If your committee had funds remaining upon termination, complete Columns A through C.

**Column A:** Enter the name and address of any person to whom surplus committee funds were transferred. Please refer to 130.034 RSMo concerning restrictions on distribution of surplus funds.

**Column B:** Enter the date the funds were transferred.

**Column C:** Enter the dollar amount of the funds transferred.

### **ITEM 7: DISPOSITION OF OUTSTANDING DEBTS:**

Check the box provided if committee had no outstanding (unpaid) debts at the time it was terminated. If the committee had outstanding debts upon termination, complete Columns A through C.

**Column A:** Enter the name of any person, business, organization, or financial institution to whom an unpaid debt was owed.

**Column B:** Enter a short description of the disposal of the debt (i.e. "Forgiven By.....", "Paid By....." etc), followed by the name and address of the person, business, organization or financial institution responsible for disposing of the debt. Debts which were forgiven must include a statement signed by the lender stating the date the loan was made and the amount forgiven.

**Column C:** Enter the dollar amount of the debt disposed.

### **ITEM 8: TREASURER VERIFICATION OF DISSOLUTION:**

This section must be completed by the treasurer of all terminating committees.

### **ITEM 9: CANDIDATE VERIFICATION OF DISSOLUTION:**

Complete this section only if the committee terminating is a candidate committee.

### **MISSOURI ETHICS COMMISSION**

Post Office Box 1254  
Jefferson City, Missouri 65102  
573 / 751-2020  
800 / 392-8660

**NOTE: A COMMITTEE FINANCIAL DISCLOSURE REPORT MUST BE  
COMPLETED AND FILED ALONG WITH THIS STATEMENT.**



Missouri Ethics Commission  
**COMMITTEE DISCLOSURE REPORT COVER PAGE**

M.E.C. ID NO. \_\_\_\_\_

1. DATE OF REPORT	OFFICE USE ONLY
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INSTRUCTIONS ON REVERSE SIDE

2. FULL NAME OF COMMITTEE

3. COMMITTEE MAILING ADDRESS	4. COMMITTEE TELEPHONE NUMBER
CITY / STATE / ZIP	

5. TREASURER'S NAME

6. TREASURER'S MAILING ADDRESS	7. TREASURER'S TELEPHONE NUMBER
CITY / STATE / ZIP	HOME:  WORK:

8. DEPUTY TREASURER'S NAME  CHECK IF NO DEPUTY TREASURER

9. DEPUTY TREASURER'S MAILING ADDRESS	10. DEPUTY TREASURER'S TELEPHONE NUMBER
CITY / STATE / ZIP	HOME:  WORK:

11. DATE OF ELECTION	12. TYPE OF ELECTION ( CHECK ONE )
	<input type="radio"/> PRIMARY <input type="radio"/> GENERAL <input type="radio"/> SPECIAL

13. TIME PERIOD COVERED BY THIS STATEMENT

FROM \_\_\_\_\_ THROUGH \_\_\_\_\_

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

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\_\_\_\_

16. COMMITTEE TREASURER'S SIGNATURE

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

\_\_\_\_\_

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

**COMMITTEE DISCLOSURE REPORT  
COVER PAGE  
INSTRUCTIONS**

FORM CD  
Cover Page

**PURPOSE:**

Form CD includes the Cover Page, Summary Page and numbered CD Forms. Form CD is used for reporting the receipts and disbursements of a committee as required by the Campaign Finance Disclosure Law. NOTE: Supplemental CD Forms are printed separately from this packet and may be obtained from the Missouri Ethics Commission or your appropriate officer.

**CONTENT OF FORM:**

- Item 1:** Enter the date the report is submitted.
- Item 2:** Enter the full name of the committee as reported on the Statement of Organization (Form CO-1).
- Item 3:** Enter the committee's mailing address (if any).
- Item 4:** Enter the committee's telephone number (if any).
- Item 5:** Enter the full name of the committee treasurer.
- Item 6:** Enter the committee treasurer's full mailing address.
- Item 7:** Enter the full name of the deputy treasurer (if any).
- Item 8:** Enter the treasurer's home and business telephone numbers.
- Item 9:** Enter the deputy treasurer's full mailing address.
- Item 10:** Enter the deputy treasurer's home and business telephone numbers.
- Item 11:** Enter the date of the election for which the report is being filed.
- Item 12:** Check the correct box for the type of election for which the report is being filed.
- Item 13:** Enter the opening and closing dates of the period covered by this report.
- Item 14:** Candidate committees only: List the name of the candidate, address, phone, the office they are seeking, the political subdivision, and political party affiliation.
- Item 15:** Check the appropriate box indicating the type of report your committee is filing.
- Item 16:** The treasurer must sign this report.
- Item 17:** Candidate committees only: The candidate must sign the report.

**MISSOURI ETHICS COMMISSION**

Campaign Finance  
Post Office Box 1254  
Jefferson City, Missouri 65102  
(573) 751-2020  
(800) 392-8660

[www.moethics.state.mo.us](http://www.moethics.state.mo.us)  
[mec@mail.state.mo.us](mailto:mec@mail.state.mo.us)

CONTACT THE MISSOURI ETHICS COMMISSION OR YOUR LOCAL ELECTION AUTHORITY FOR FURTHER INFORMATION



**Missouri Ethics Commission**  
**REPORT SUMMARY**  
 INSTRUCTIONS ON REVERSE SIDE

NAME OF COMMITTEE	DATE OF REPORT	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		\$	<b>MONEY ON HAND</b>			
2. ALL MONETARY CONTRIBUTIONS RECEIVED THIS PERIOD	\$					
3. ALL LOANS RECEIVED THIS PERIOD	+ \$					
4. MISCELLANEOUS RECEIPTS THIS PERIOD	+ \$				25. MONEY ON HAND AT THE BEGINNING OF THIS REPORTING PERIOD (INCLUDING FUNDS IN DEPOSITORY, CASH, SAVINGS ACCOUNTS AND ALL OTHER INVESTMENTS)	\$
5. <b>SUBTOTAL</b> MONETARY RECEIPTS THIS PERIOD (SUM 2A + 3A + 4A)	\$				26. MONETARY RECEIPTS THIS PERIOD (FROM ITEM 5)	+ \$
6. IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD	+ \$				27. MONETARY DISBURSEMENTS MADE THIS PERIOD (SUM 11 + 17 + 24)	- \$
7. <b>TOTAL</b> ALL RECEIPTS THIS PERIOD (SUM 5A + 6A)	\$				a) Disbursements By Check \$ _____	
8. FUNDS USED FOR <b>REPAYING</b> LOANS THIS PERIOD	- \$				b) Disbursements By Cash \$ _____	
9. <b>TOTAL ALL RECEIPTS THIS ELECTION</b> (SUM 1B + 7A - 8A)		\$			28. MONEY ON HAND AT THE CLOSE OF THIS REPORTING PERIOD (SUM 25 + 26 - 27)	\$
EXPENDITURES	A. THIS PERIOD	B. THIS ELECTION	<b>INDEBTEDNESS</b>			
10. TOTAL EXPENDITURES FOR THIS ELECTION PREVIOUSLY REPORTED		\$	29. OUTSTANDING INDEBTEDNESS AT THE BEGINNING OF THIS PERIOD			
11. EXPENDITURES MADE BY CASH OR CHECK THIS PERIOD	\$					
12. IN-KIND EXPENDITURES MADE THIS PERIOD	+ \$					
13. DEBTS INCURRED THIS PERIOD (NOT INCLUDING LOANS)	+ \$				30. LOANS RECEIVED THIS PERIOD	+ \$
14. <b>TOTAL</b> ALL EXPENDITURES MADE THIS PERIOD (SUM 11A + 12A + 13A)	\$		31. NEW DEBTS INCURRED THIS PERIOD	+ \$		
15. <b>TOTAL EXPENDITURES THIS ELECTION</b> (SUM 10B + 14A)		\$	32. PAYMENTS MADE ON LOANS THIS PERIOD	- \$		
CONTRIBUTIONS MADE	A. THIS PERIOD	B. THIS ELECTION	33. CREDITS RECEIVED ON LOANS THIS PERIOD	- \$		
16. TOTAL CONTRIBUTIONS MADE FOR THIS ELECTION PREVIOUSLY REPORTED		\$	34. PAYMENTS MADE THIS PERIOD ON DEBTS INCURRED IN PREVIOUS PERIOD	- \$		
17. ALL MONETARY CONTRIBUTIONS MADE THIS PERIOD	\$		35. <b>TOTAL INDEBTEDNESS AT THE CLOSE OF THIS REPORTING PERIOD</b> (SUM 29 + 30 + 31 - 32 - 33 - 34)	\$		
18. ALL IN-KIND CONTRIBUTIONS MADE THIS PERIOD	+ \$					
19. <b>TOTAL</b> ALL CONTRIBUTIONS MADE THIS PERIOD (SUM 17A + 18A)	\$					
20. <b>TOTAL ALL CONTRIBUTIONS MADE THIS ELECTION</b> (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	+ \$					
23. ANY MISCELLANEOUS DISBURSEMENT NOT REPORTED ELSEWHERE	+ \$					
24. <b>TOTAL</b> OTHER DISBURSEMENTS THIS PERIOD (SUM 21A + 22A + 23A)	\$					

# REPORT SUMMARY INSTRUCTIONS

FORM CD SUMMARY

## PURPOSE:

The report summary is used to consolidate the total receipts received and total disbursements made by your committee for this reporting period, and to report the cumulative amounts for the election period to date. In addition, the financial status of your committee is determined through disclosure of money on hand and outstanding indebtedness. Most of the information asked for is included on other forms in the Committee Disclosure Report packet.

## NOTE:

**This form should be filled out after all other CD-Forms required of your committee have been completed.** If this is an initial report, items 1, 10, and 16 will reflect a balance of zero (0).

## CONTENT OF FORM:

### RECEIPTS

- Item 1:** From item 9 of your LAST Report Summary enter the total receipts for this election that your committee has previously reported.
- Item 2:** From Item 22 of Form CD1 for this reporting period, enter the total of all monetary contributions received.
- Item 3:** From Item 20 of Form CD1 for this reporting period, enter the total of all loans received.
- Item 4:** Enter the total amount of any receipts to your committee from sources other than contributions received. Such sources can include interest from interest bearing accounts (from committee records) and interest or dividends from investments (from item 12 Form CD2), intra-campaign transfers from one candidate committee to another candidate committee controlled by the same candidate must be included in this amount. If such transfers are included, attach a listing, by name and address of the committee, date and amount of the transfer, to this report. This amount should not include any credits on loans received by your committee.
- Item 5:** Add the amounts entered for Items 2A, 3A, and 4A and enter the total. This reflects total monetary receipts for this reporting period.
- Item 6:** From Item 21 of Form CD1 for this reporting period, enter the total of in-kind contributions received this reporting period.
- Item 7:** Add the amounts entered for Items 5A and 6A and enter the total. This reflects total receipts for this reporting period.
- Item 8:** From Item 19 of Form CD3 for this reporting period, enter the total amount used for repaying loans this period.
- Item 9:** Add the amounts entered for Item 1B and 7A, then subtract the amount entered for Item 8A and enter the total. This reflects total receipts for this election to date.

### EXPENDITURES

- Item 10:** From Item 15 of your last Report Summary, enter the total expenditures your committee has previously reported for this election.
- Item 11:** From Item 16 of Form CD3 for this reporting period, enter the total expenditures made by check or in cash this period.
- Item 12:** From Item 18 of Form CD3 for this reporting period, enter the total of in-kind expenditures for this reporting period.
- Item 13:** From Item 17 of Form CD3 for this reporting period, enter the total of expenditures incurred but not paid during the period.
- Item 14:** Add the amounts entered for Items 11A, 12A, and 13A and enter the total. This reflects total expenditures made this period.
- Item 15:** Add the amount entered for Items 10B and 14A and enter the total. This reflects total expenditures for this election.

### CONTRIBUTIONS MADE

- Item 16:** From Item 20 of your last Report Summary, enter the total contributions made and previously reported for this election.
- Item 17:** From Item 25 of Form CD3 for this reporting period, enter the amount of monetary contributions made for this period.
- Item 18:** From Item 28 of Form CD3 for this reporting period, enter the amount of in-kind contributions made during this period.
- Item 19:** Add the amounts entered for Items 17A and 18A, and enter the total. This reflects total contributions made for this reporting period.
- Item 20:** Add the amounts entered for items 16B and 19A and enter the total. This reflects total contributions made during the election period.

### OTHER DISBURSEMENTS

- Item 21:** From Item 19 of Form CD3 for this reporting period, enter the amount used for repaying loans (this is the same amount entered for Item 8 of this form).
- Item 22:** From your committee records, enter the amount which was used during this reporting period to repay debts which were incurred and reported previous to this reporting period.
- Item 23:** From committee records enter the amount of any disbursement not listed as an expenditure or contribution made. This amount must include any intra-campaign transfers from one candidate committee to another candidate committee controlled by the same candidate. If such transfers are included, attach a listing, by name and address of the committee, date and amount of the transfer, to this report.
- Item 24:** Add the amounts entered for Items 21A, 22A and 23A and enter the total. This reflects total "other" disbursements for this period.

### MONEY ON HAND

- Item 25:** From Item 28 of your last Report Summary, enter the amount of money on hand at the beginning of this reporting period.
- Item 26:** From Item 5 of this Report Summary, enter the total monetary receipts for this reporting period.
- Item 27:** Add Items 11A, 17A, and 24A and enter the total. This reflects total monetary disbursements made this reporting period.
- Item 27A -** From committee records, enter the amount of monetary disbursements made this period by check.
- Item 27B -** From committee records, enter the amount of monetary disbursements made this period by cash.
- NOTE:** Items 27A and 27B, when added together, should equal Item 27.
- Item 28:** Add the amounts entered for Items 25 and 26, then subtract the amount entered for Item 27 and enter the total. This reflects the amount of money on hand at the end of this reporting period.

### INDEBTEDNESS

- Item 29:** From Item 35 of your last Report Summary, enter the amount of indebtedness at the beginning of this reporting period.
- Item 30:** From Item 20 of Form CD1 for this reporting period, enter the amount of loans received during the period (same as Item 13 of this form).
- Item 31:** From Item 17 of Form CD3 for this reporting period, enter the amount of new debts incurred this period (same as Item 13 of this form).
- Item 32:** From Item 19 of Form CD3 for this reporting period, enter the amount used for repaying loans this period (same as Items 21 and 8 of this form).
- Item 33:** From committee records, enter the amount of any credits received on loans during the period (i.e. loans forgiven or paid by someone else, in whole or in part).
- Item 34:** From committee records, enter the amount used during this reporting period to repay debts which were incurred and reported previously (same as Item 22 of this form).
- Item 35:** Add the amounts entered for Items 29, 30, and 31, then subtract the amounts entered for Items 32, 33, and 34 and enter the total. This reflects total amount of indebtedness at the end of the reporting period.



**MISSOURI ETHICS COMMISSION**  
**CONTRIBUTIONS AND LOANS RECEIVED**  
 INSTRUCTIONS ON REVERSE SIDE

OFFICE USE ONLY

1. NAME OF COMMITTEE		2. REPORT DATE	
<b>A. ITEMIZED CONTRIBUTIONS RECEIVED</b> FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.		4. DATE RECEIVED	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)		----- AGGREGATE TO DATE	
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
6. SUBTOTAL: ITEMIZED CONTRIBUTIONS THIS PAGE (SUM COLUMN 5)			\$
7. SUBTOTAL: ITEMIZED CONTRIBUTIONS ANY ATTACHED PAGES			+ \$
8. TOTAL: ITEMIZED CONTRIBUTIONS THIS PERIOD (SUM 6 + 7)			\$
9. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS <b>MONETARY</b> CONTRIBUTIONS			\$
10. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS <b>IN-KIND</b> CONTRIBUTIONS			\$
<b>B. NON-ITEMIZED CONTRIBUTIONS RECEIVED</b> (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			\$
<b>C. LOANS RECEIVED</b>		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)			\$
23. MONETARY CONTRIBUTIONS & LOANS RECEIVED REQUIRING A RECORD OF NAME & ADDRESS (SUM 9, 13 & 20)			\$

# CONTRIBUTIONS AND LOANS RECEIVED INSTRUCTIONS

**PURPOSE:** CD1 is a comprehensive form used for reporting all types of contributions received from all sources during the reporting period covered.

**CONTENT OF FORM:**

- Item 1:** Enter the full name of the committee.  
**Item 2:** Enter the date the report is being submitted.

**SECTION A:** **ITEMIZED CONTRIBUTIONS RECEIVED**

- Column 3:** Enter the full name and address of any person or committee from whom a contribution in excess of \$100 was received. List the occupation/business of contributor. If a contract is indicated complete form CD7 to describe the contract. If a contributor has a contractual relationship in the amount of \$500 or more with the political entity in which you seek office, complete form CD7 to describe the contract.
- Column 4:** Enter the date on which the contribution (listed in Column 3) was received.
- Column 5:** Enter the amount of the contribution received. In-kind contributions should be reported at the fair-market value of the goods or service received.

Below the amount, indicate whether the contribution was in the form of money (monetary), or in a form other than money (in-kind).

- Item 6:** Add the amounts entered in Column 5 on this page and enter the total.
- Item 7:** Enter the total of itemized contributions received from any attached pages.
- Item 8:** Add the amounts entered on Items 6 and 7 and enter the total amount of itemized contributions received
- Item 9:** Add the amounts in Column 5 which you have indicated were in-kind contributions (including attached pages), and enter the total.
- Item 10:** Add the amounts in Column 5 which you have indicated were monetary contributions (including attached pages), and enter the total.

**SECTION B:** **NON-ITEMIZED CONTRIBUTIONS**

- Item 11:** If your committee conducted a fund-raising activity or event during the reporting period where contributions (limited to \$100 or less per person) were received from persons whose names and addresses could not be obtained, enter the total of these contributions. A statement of fundraising activities (Form CD1A) explaining these events must be attached to this report. If the name and address of all sources of contributions to a fund-raising activity are known, those contributions should not be included in the amount entered on item 11, and a *Statement of Fundraising Activity need not be filed*.
- Item 12:** Enter the total of anonymous contributions (limited to \$25 or less per person) received during the reporting period.
- Item 13:** Enter the total of monetary contributions from persons for whom you have a record of names, addresses, and occupation/business, but who have contributed an aggregate of \$100 or less. Do not repeat information reported on items 11 and 12.
- Item 14:** Enter the total fair market value of all in-kind contributions received from persons contributing an aggregate of \$100 or less.

**SECTION C:** **LOANS RECEIVED**

- Column 15:** Enter the full name and address of any lender from whom a loan was received during the reporting period, regardless of the amount.
- Column 16:** Enter the date the individual loan was received.
- Column 17:** Enter the amount of the individual loan. *For each loan of more than \$100, additional information is required (see Form CD1B).*
- Item 18:** Add the amounts entered in Column 17 on this page, and enter the total.
- Item 19:** Enter the total amount of loans received from any attached pages.
- Item 20:** Add items 18 and 19 and enter the total amount of in-kind contributions received this period.

**SUMMARY SECTION:**

- Item 21:** Add Items 10 and 14 and enter the total amount of in-kind contributions received this period.
- Item 22:** Add Items 9, 11, 12, and 13, and enter the total amount of monetary contributions received this period.
- Item 23:** Add Items 9, 13, and 20, and enter the total amount of contributions and loans received that require a record of name and address this period.





**MISSOURI ETHICS COMMISSION**  
**EXPENDITURES AND CONTRIBUTIONS MADE**  
 INSTRUCTIONS ON REVERSE SIDE

OFFICE USE ONLY

1. NAME OF COMMITTEE		2. REPORT DATE	
<b>A. EXPENDITURES OF \$100 OR LESS BY CATEGORY</b> (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>B. ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS</b>		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
12. SUBTOTAL: THIS PAGE (SUM COLUMN 11)			\$
13. SUBTOTAL: ANY ATTACHED PAGES			+ \$
14. TOTAL: ITEMIZED EXPENDITURES THIS PERIOD (SUM 12 +13)			\$
15. TOTAL: MONETARY EXPENDITURES THIS PERIOD (SUM 7 + 14)			\$
16. AMOUNT OF LINE 15 WHICH WAS PAID OUT THIS PERIOD			\$
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)			\$
<b>C. MONETARY CONTRIBUTIONS MADE (REGARDLESS OF AMOUNT)</b>		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			\$

# EXPENDITURES AND CONTRIBUTIONS MADE

## INSTRUCTIONS

**PURPOSE:** CD3 is used to report all expenditures (paid and incurred) and all contributions made by your committee during the reporting period.

### CONTENT OF FORM:

**Item 1:** Enter the full committee name.

**Item 2:** Enter the date this report is being submitted.

### SECTION A:

#### NON-ITEMIZED EXPENDITURES

**Column 3:** Individual expenditures of \$100 or less may be grouped into categories (i.e. office supplies, postage, etc.). Enter each group in Column 3. Do not include payments made to campaign workers in this section.

**Column 4:** Enter the dollar amount of each category listed in Column 3. Include expenditures which were paid as well as those which were incurred by not paid during the reporting period.

**Item 5:** Enter the total of the amounts entered in Column 4 on this page only.

**Item 6:** Enter the total of the amounts of each category from any attached pages.

### SECTION B:

#### ITEMIZED EXPENDITURES

**Column 8:** Enter the name and address of any person, organization, or business to whom an expenditure of more than \$100 was made during the reporting period.

Enter the name and address of any campaign worker to whom an expenditure was made during the reporting period, *regardless of the amount.*

**Column 9:** Enter the date the individual expenditure listed in Column 8 was made.

**Column 10:** Enter the purpose of the expenditure listed in Column 8.

If the expenditure was to a campaign worker, below the purpose of the expenditure (in this case, "salary"), enter the aggregate amount paid to this worker for this election to date.

**Column 11:** Enter the dollar amount, indicating paid or incurred for the individual expenditure for this reporting period.

**Item 12:** Enter the total of the amounts listed in Column 11 for this page only.

**Item 13:** Enter the total of all itemized expenditures from any attached pages.

**Item 14:** Add Items 12 and 13 and enter the total of itemized expenditures.

**Item 15:** Add Items 7 and 14 and enter the total of all expenditures made this period.

**Item 16:** Enter the amount of total expenditures made this period which were actually paid during the period.

**Item 17:** Enter the amount of total expenditures for this period which were incurred but not actually paid during this period.

**Item 18:** Enter the amount of any in-kind expenditures made during this reporting period.

**Item 19:** Enter the total amount used to repay any loans during this reporting period.

### SECTION C:

#### MONETARY CONTRIBUTIONS MADE

**Column 20:** Enter the name and address of any candidate or committee to whom your committee made a monetary contribution during the reporting period, regardless of the amount. Do not include transfers of funds to candidate committees controlled by the same candidate.

**Column 21:** Enter the date the contribution was made.

**Column 22:** Enter the amount of the contribution.

**Item 23:** Add the amounts entered in Column 22 on this page only, and enter the total.

**Item 24:** Add the total amount of any contributions made from any attached pages, and enter the total.

**Item 25:** Add Items 23 and 24; enter the total of monetary contributions made.

**Item 26:** Enter the total amount of loans made during this reporting period (if any). Name and address of the recipient should be listed on an attached sheet.

**Item 27:** Add items 25 and 26; enter the total of all monetary contributions or loans made.

**Item 28:** Enter the total of any in-kind contributions made by the committee during the reporting period.