



Missouri Ethics Commission
COMMITTEE DISCLOSURE REPORT COVER PAGE

M.E.C. ID NO. A180260

1. DATE OF REPORT	OFFICE USE ONLY
7/16/2018	

INSTRUCTIONS ON REVERSE SIDE

2. FULL NAME OF COMMITTEE
 Committee to Elect Susan Faulkner

3. COMMITTEE MAILING ADDRESS 5 Marlin Lane	4. COMMITTEE TELEPHONE NUMBER (417) 345-5767
CITY / STATE / ZIP Buffalo MO 65622	

5. TREASURER'S NAME
Mindy Starkey

6. TREASURER'S MAILING ADDRESS 61 Cat Hollow Trail	7. TREASURER'S TELEPHONE NUMBER HOME: (417) 224-6174
CITY / STATE / ZIP Lebanon MO 65536	WORK:

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

9. DEPUTY TREASURER'S MAILING ADDRESS 5 Marlin Lane Buffalo MO 65622	10. DEPUTY TREASURER'S TELEPHONE NUMBER HOME: (417) 327-3408
CITY / STATE / ZIP	WORK:

11. DATE OF ELECTION	12. TYPE OF ELECTION (CHECK ONE) <input type="radio"/> PRIMARY <input type="radio"/> GENERAL <input type="radio"/> SPECIAL
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13. TIME PERIOD COVERED BY THIS STATEMENT
 FROM 4/1/2018 THROUGH 6/30/2018

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

Susan Faulkner
 5 Marlin Lane
 Buffalo MO 65622
 (417) 327-3408
 Circuit Clerk
 Dallas County

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.

ELECTRONICALLY FILED Jul 16 2018 6:58AM

 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.

ELECTRONICALLY FILED Jul 16 2018 6:58AM

 CANDIDATE'S SIGNATURE



Missouri Ethics Commission

REPORT SUMMARY

Instructions on Reverse Side

Name of Committee Committee to Elect Susan Faulkner	Date of Report 7/16/2018	Office Use Only
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Receipts	A. This Period	B. This Calendar Yr or Election Cycle	Statement of Beginning and Ending Financial Condition	
1. Total Receipts For This Election Previously Reported		\$ 600.00	Money On Hand	
2. All Monetary Contributions Received This Period	\$ 4,385.00			
3. All Loans Received This Period	+ 0.00			
4. Miscellaneous Receipts This Period	+ 0.00			
5. Subtotal Monetary Receipts This Period (Sum 2A + 3A + 4A)	\$ 4,385.00			
6. In-kind Contributions Received This Period	+ 200.00		25. Monetary Receipts this Period (From Item 5 - this page)	+ 4,385.00
7. Total All Receipts This Period (Sum 5A + 6A)	\$ 4,585.00		26. Monetary Disbursements Made This Period (Sum 10 + 16A + 23)	- 3,251.70
8. Total All Receipts This Election (Sum 1B + 7A)		\$ 5,185.00	a) Disbursements By Check \$ 3,251.70 b) Disbursements By Cash \$ 0.00	
Expenditures	A. This Period	B. This Calendar Yr or Election Cycle	Indebtedness	
9. Total Expenditures for this election previously reported		\$ 528.63	27. Money On Hand at the close of this reporting period (SUM 24 + 25 - 26)	\$ 1,204.67
10. Expenditures made by cash or check this period	\$ 3,251.70		Indebtedness	
11. In-Kind Expenditures made this period	+ 0.00			
12. Expenditures incurred this period (not including loans) including payments made by credit card (line 17 CD3)	+ 0.00			
13. Total All expenditures made this period (Sum 10A + 11A + 12A) Including payments made by Credit Card (line 17 CD3)	\$ 3,251.70		28. Outstanding Indebtedness at the beginning of this period	\$ 0.00
14. Total Expenditures This Election (Sum 9B + 13A)		\$ 3,780.33	29. Loans Received This Period	+ 0.00
Contributions Made	A. This Period	B. This Calendar Yr or Election Cycle	30. A. New Expenditures Incurred This Period (include payments by Credit Card (Line 17 CD3)	
15. Total Contributions Made For This Election Previously Reported		\$ 0.00	+ 0.00	
16. All Contributions Made This Period (25A or 25B of CD3)	A	0.00 ← Cash/Check	B. New Contributions Made by Credit Card (Line 25B CD3)	
	B	0.00 ← Credit Card		
17. All In-Kind Contributions Made This Period	+ 0.00		31. Payments Made on Loans This Period	- 0.00
18. Total Contributions Made This Period (Sum 16A + 17A)	\$ 0.00		32. Debt Forgiven on Loans This Period	- 0.00
19. Total All Contributions Made This Election (Sum 15B + 18A)		\$ 0.00	33. Payments Made This Period on Expenditures Incurred in Previous Period (Paid by Cash/Check Only) (Line 21 this page)	- 0.00
Other Disbursements	A. This Period	B. This Calendar Yr or Election Cycle	34. Total Indebtedness at the Close of This Reporting Period (Sum 28 + 29 + 30A + 30B - 31 - 32 - 33)	
20. Funds Used For Paying Loans This Period Including Credit Card Payments	+ 0.00		\$ 0.00	
21. Payments This Period on Prev Reported Expend Incurred (Paid by Cash/Check Only)	+ 0.00			
22. Any Miscellaneous Disbursement Not Reported Elsewhere	+ 0.00			
23. Total Other Disbursements This Period (Sum 20A + 21A + 22A)	\$ 0.00			



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS AND LOANS RECEIVED
 INSTRUCTIONS ON REVERSE SIDE

OFFICE USE ONLY

1. NAME OF COMMITTEE Committee to Elect Susan Faulkner		2. REPORT DATE 7/16/2018	
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: View Supplemental Form(s) 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)		\$	0.00
7. SUBTOTAL: ITEMIZED CONTRIBUTIONS ANY ATTACHED PAGES		+	\$ 4,585.00
8. TOTAL: ITEMIZED CONTRIBUTIONS THIS PERIOD (SUM 6 + 7)		\$	4,585.00
9. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS MONETARY CONTRIBUTIONS		\$	4,385.00
10. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS IN-KIND CONTRIBUTIONS		\$	200.00
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		\$	0.00
12. TOTAL ANONYMOUS CONTRIBUTIONS RECEIVED FROM PERSON GIVING \$25 OR LESS		\$	0.00
13. TOTAL MONETARY CONTRIBUTIONS RECEIVED FROM PERSONS GIVING \$100 OR LESS		\$	0.00
14. TOTAL IN-KIND CONTRIBUTIONS RECEIVED FROM PERSONS (NOT COMMITTEES) GIVING \$100 OR LESS		\$	0.00
C. LOANS RECEIVED			
15. NAME AND ADDRESS OF LENDER		16. DATE RECEIVED	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)		\$	0.00
19. SUBTOTAL: LOANS FROM ANY ATTACHED PAGES		\$	0.00
20. TOTAL: LOANS THIS PERIOD (SUM 18 + 19)		\$	0.00
21. TOTAL: ALL IN-KIND CONTRIBUTIONS (SUM 10 + 14)		\$	200.00
22. TOTAL: ALL MONETARY CONTRIBUTIONS (SUM 9, 11, 12 & 13)		\$	4,385.00
23. MONETARY CONTRIBUTIONS & LOANS RECEIVED REQUIRING A RECORD OF NAME & ADDRESS (SUM 9, 13 & 20)		\$	4,385.00



**MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

OFFICE USE ONLY

NAME OF COMMITTEE Committee to Elect Susan Faulkner	DATE 7/16/2018
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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. 3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)	4. DATE RECEIVED AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
NAME: ADDRESS: Donna Durrington CITY / STATE: 37 Holly Loop EMPLOYER: Buffalo MO 65622 retired <input type="checkbox"/> COMMITTEE:	4/11/2018 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Troy Faulkner CITY / STATE: 5 Marlin Lane EMPLOYER: Buffalo MO 65622 self -- car sales <input type="checkbox"/> COMMITTEE:	5/1/2018 ----- \$ 1,123.00	\$ 673.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Tom Smith CITY / STATE: 70 Hollowberry EMPLOYER: Louisburg MO 65685 retired <input type="checkbox"/> COMMITTEE:	5/21/2018 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Susan Faulkner CITY / STATE: 5 Marlin Lane EMPLOYER: Buffalo MO 65622 State of Mo -- deputy clerk <input type="checkbox"/> COMMITTEE:	5/19/2018 ----- \$ 782.00	\$ 632.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Susan Faulkner CITY / STATE: 5 Marlin Lane EMPLOYER: Buffalo MO 65622 State of Mo -- deputy clerk <input type="checkbox"/> COMMITTEE:	5/21/2018 ----- \$ 1,282.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Troy Faulkner CITY / STATE: 5 Marlin Lane EMPLOYER: Buffalo MO 65622 self -- car sales <input type="checkbox"/> COMMITTEE:	5/26/2018 ----- \$ 1,323.00	\$ 200.00 <input type="checkbox"/> MONETARY <input checked="" type="checkbox"/> IN-KIND
NAME: ADDRESS: Ann Hawkins CITY / STATE: POB 526 EMPLOYER: Buffalo MO 65622 retired <input type="checkbox"/> COMMITTEE:	5/29/2018 ----- \$ 300.00	\$ 300.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Susan Faulkner CITY / STATE: 5 Marlin Lane EMPLOYER: Buffalo MO 65622 State of Mo -- deputy clerk <input type="checkbox"/> COMMITTEE:	6/11/2018 ----- \$ 1,937.00	\$ 655.00 <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)



**MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

OFFICE USE ONLY

NAME OF COMMITTEE Committee to Elect Susan Faulkner	DATE 7/16/2018
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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. 3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)	4. DATE RECEIVED AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
NAME: ADDRESS: Tom Smith CITY / STATE: 70 Hollowberry EMPLOYER: Louisburg MO 65685 retired <input type="checkbox"/> COMMITTEE:	6/18/2018 ----- \$ 400.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Thomas Lento CITY / STATE: POB 1790 EMPLOYER: Buffalo MO 65622 retired <input type="checkbox"/> COMMITTEE:	6/20/2018 ----- \$ 150.00	\$ 150.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Janel Sims CITY / STATE: 248 Darter Road EMPLOYER: Ekland MO 65644 Sephora -- sales <input type="checkbox"/> COMMITTEE:	6/26/2018 ----- \$ 125.00	\$ 125.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: James Price CITY / STATE: 1010 W 57th Street EMPLOYER: KansasCity MO 64113 SpencerFane -- attorney <input type="checkbox"/> COMMITTEE:	6/29/2018 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Tom Smith CITY / STATE: 70 Hollowberry EMPLOYER: Louisburg MO 65685 retired <input type="checkbox"/> COMMITTEE:	6/29/2018 ----- \$ 600.00	\$ 200.00 <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 --

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
EXPENDITURES AND CONTRIBUTIONS MADE
 Instructions on Reverse Side

Office Use Only

1. Name of Committee Committee to Elect Susan Faulkner		2. Report Date 7/16/2018	
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 Ad- Event Calendar- Long Lane Fireworks			25.00
5. Subtotal: Non-Itemized Expenditures This Page (Sum Column 4)			\$ 25.00
6. Subtotal: Non-Itemized Expenditures Any Attached Pages			+ 0.00
7. Total: Non-Itemized Expenditures This Period (Sum 5 + 6)			\$ 25.00
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: View Supplemental Form(s)			<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)			\$ 0.00
13. Subtotal: Any Attached Pages			+ 3,226.70
14. Total: Itemized Expenditures This Period (Sum 12 + 13)			\$ 3,226.70
15. Total: Monetary Expenditures This Period (Sum 7 + 14)			\$ 3,251.70
16. Amount of Line 15 Above which was Paid Out This Period			\$ 3,251.70
17. Amount of Line 15 Which Were Expenditures Incurred This Period Including Payments Made by Credit Cards			\$ 0.00
18. If Committee Made Any In-Kind Expenditures This Period, List Amount			\$ 0.00
19. Funds Used For Paying Loans/Credit Cards This Period (Attach Form CD1B - amount goes to Line 5 / Part II)			\$ 0.00
C. Contributions Made (Regardless of Amount)		21. Date	22. Amount
20. Name and Address of Candidate or Committee			\$
Name:			<input type="checkbox"/> Monetary
Address:			<input type="checkbox"/> In-Kind
City / State:			\$
Name:			<input type="checkbox"/> Monetary
Address:			<input type="checkbox"/> In-Kind
City / State:			\$
Name:			<input type="checkbox"/> Monetary
Address:			<input type="checkbox"/> In-Kind
City / State:			\$
23. Subtotal: This Page (Sum Column 22)			\$ 0.00
24. Subtotal: Any Attached Pages			\$ 0.00
25. Total: Monetary Contributions Made This Period		A. By Cash / Check	\$ 0.00
		B. By Credit Card	\$ 0.00
26. If Committee Made Any Loans This Period, List Amount			\$
27. Total: All Monetary Contributions and Loans Made This Period (Sum 25 + 26)			\$ 0.00
28. Total: In-Kind Contributions Made This Period, List Amount			\$ 0.00



**MISSOURI ETHICS COMMISSION
ITEMIZED EXPENDITURES OVER \$100 SUPPLEMENTAL FORM**

OFFICE USE ONLY

NAME OF COMMITTEE Committee to Elect Susan Faulkner		REPORT DATE 7/16/2018	
ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS		DATE	PURPOSE - (IF PAYMENT WAS TO A CAMPAIGN WORKER, SHOW AGGREGATE PAID)
NAME AND ADDRESS OF RECIPIENT			AMOUNT THIS PERIOD
NAME: My Campaign Store ADDRESS: 304 Whittington Pkwy #201 CITY/STATE: Louisville KY 40222		4/3/2018	emery board \$ <input checked="" type="checkbox"/> PAID 319.13 <input type="checkbox"/> INCURRED
NAME: Dallas Co Clerk ADDRESS: 108 S Maple CITY/STATE: Buffalo MO 65622		4/30/2018	voter list \$ <input checked="" type="checkbox"/> PAID 2.20 <input type="checkbox"/> INCURRED
NAME: Capitol Promotion ADDRESS: POB231 CITY/STATE: Glenside PA 19038		5/3/2018	signs \$ <input checked="" type="checkbox"/> PAID 673.00 <input type="checkbox"/> INCURRED
NAME: Capitol Promotion ADDRESS: POB231 CITY/STATE: Glenside PA 19038		5/19/2018	signs \$ <input checked="" type="checkbox"/> PAID 632.00 <input type="checkbox"/> INCURRED
NAME: Capitol Promotion ADDRESS: POB231 CITY/STATE: Glenside PA 19038		6/1/2018	signs \$ <input checked="" type="checkbox"/> PAID 385.00 <input type="checkbox"/> INCURRED
NAME: Results Advertising ADDRESS: 130 W Fremont CITY/STATE: Lebanon MO 65536		6/7/2018	signs \$ <input checked="" type="checkbox"/> PAID 270.68 <input type="checkbox"/> INCURRED
NAME: Dallas Co Clerk ADDRESS: 108 S Maple CITY/STATE: Buffalo MO 65622		5/18/2018	voter list \$ <input checked="" type="checkbox"/> PAID 33.20 <input type="checkbox"/> INCURRED
NAME: Buffalo Reflex ADDRESS: 114 W Lincon CITY/STATE: Buffalo MO 65622		5/23/2018	ads \$ <input checked="" type="checkbox"/> PAID 261.30 <input type="checkbox"/> INCURRED
NAME: Dallas Co Fair Board ADDRESS: POB 661 CITY/STATE: Buffalo MO 65622		5/9/2018	ad/sponsorship \$ <input checked="" type="checkbox"/> PAID 180.00 <input type="checkbox"/> INCURRED
NAME: Pink Lady Graphics ADDRESS: POB 327 CITY/STATE: Buffalo MO 65622		6/22/2018	tee shirts \$ <input checked="" type="checkbox"/> PAID 161.59 <input type="checkbox"/> INCURRED
NAME: Buffalo Reflex ADDRESS: 114 W Lincoln CITY/STATE: Buffalo MO 65622		6/27/2018	ads \$ <input checked="" type="checkbox"/> PAID 308.60 <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
TOTAL: ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS (CARRY TO ITEM 13. "SUBTOTAL: ANY ATTACHED PAGES" ON FORM CD-3)			\$ --