



Missouri Ethics Commission
COMMITTEE DISCLOSURE REPORT COVER PAGE

M.E.C. ID NO. A180078

1. DATE OF REPORT 7/16/2018	OFFICE USE ONLY
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INSTRUCTIONS ON REVERSE SIDE

2. FULL NAME OF COMMITTEE
 Friends of Brett R. Harrison

3. COMMITTEE MAILING ADDRESS
 69 Pleasant Ridge Drive

4. COMMITTEE TELEPHONE NUMBER
 (417) 840-5480

CITY / STATE / ZIP
 Urbana MO 65767

5. TREASURER'S NAME
 Mark A Elliott

6. TREASURER'S MAILING ADDRESS
 1172 South Locust Street

7. TREASURER'S TELEPHONE NUMBER
 HOME: (417) 733-3008

CITY / STATE / ZIP
 Buffalo MO 65622

WORK:

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

9. DEPUTY TREASURER'S MAILING ADDRESS

10. DEPUTY TREASURER'S TELEPHONE NUMBER
 HOME:

CITY / STATE / ZIP

WORK:

11. DATE OF ELECTION

12. TYPE OF ELECTION (CHECK ONE)
 PRIMARY GENERAL SPECIAL

13. TIME PERIOD COVERED BY THIS STATEMENT
 FROM 4/16/2018 THROUGH 6/30/2018

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

Brett R. Harrison
 69 Pleasant Ridge Drive
 Urbana MO 65767
 (417) 840-5480
 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 4:19PM

 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 4:19PM

 CANDIDATE'S SIGNATURE



Missouri Ethics Commission

REPORT SUMMARY

Instructions on Reverse Side

Name of Committee	Date of Report	Office Use Only
Friends of Brett R. Harrison	7/16/2018	

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			\$ 700.00	Money On Hand	
2. All Monetary Contributions Received This Period	\$ 750.00				
3. All Loans Received This Period	+ 5,000.00				
4. Miscellaneous Receipts This Period	+ 0.00				
5. Subtotal Monetary Receipts This Period (Sum 2A + 3A + 4A)	\$ 5,750.00				
6. In-kind Contributions Received This Period	+ 0.00			24. Money On Hand at the beginning of this reporting period (Including funds in depository, cash, savings accounts and all other investments)	\$ 245.70
7. Total All Receipts This Period (Sum 5A + 6A)	\$ 5,750.00			25. Monetary Receipts this Period (From Item 5 - this page)	+ 5,750.00
8. Total All Receipts This Election (Sum 1B + 7A)			\$ 6,450.00	26. Monetary Disbursements Made This Period (Sum 10 + 16A + 23)	- 3,431.63
Expenditures		A. This Period	B. This Calendar Yr or Election Cycle		
9. Total Expenditures for this election previously reported			\$ 454.30	27. Money On Hand at the close of this reporting period (SUM 24 + 25 - 26)	\$ 2,564.07
10. Expenditures made by cash or check this period	\$ 2,115.63			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)	+ 1,316.00				
13. Total All expenditures made this period (Sum 10A + 11A + 12A) Including payments made by Credit Card (line 17 CD3)	\$ 3,431.63			28. Outstanding Indebtedness at the beginning of this period	\$ 0.00
14. Total Expenditures This Election (Sum 9B + 13A)			\$ 3,885.93	29. Loans Received This Period	+ 5,000.00
Contributions Made		A. This Period	B. This Calendar Yr or Election Cycle		
15. Total Contributions Made For This Election Previously Reported			\$ 0.00	30. A. New Expenditures Incurred This Period (include payments by Credit Card (Line 17 CD3)	+ 1,316.00
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)	+ 0.00
	B	0.00	← Credit Card		
17. All In-Kind Contributions Made This Period	+ 0.00			31. Payments Made on Loans This Period	- 1,316.00
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		
20. Funds Used For Paying Loans This Period Including Credit Card Payments	+ 1,316.00			34. Total Indebtedness at the Close of This Reporting Period (Sum 28 + 29 + 30A + 30B - 31 - 32 - 33)	\$ 5,000.00
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)	\$ 1,316.00				



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS AND LOANS RECEIVED
 INSTRUCTIONS ON REVERSE SIDE

OFFICE USE ONLY

1. NAME OF COMMITTEE Friends of Brett R. Harrison		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
6. SUBTOTAL: ITEMIZED CONTRIBUTIONS THIS PAGE (SUM COLUMN 5)		\$	0.00
7. SUBTOTAL: ITEMIZED CONTRIBUTIONS ANY ATTACHED PAGES		+ \$	750.00
8. TOTAL: ITEMIZED CONTRIBUTIONS THIS PERIOD (SUM 6 + 7)		\$	750.00
9. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS MONETARY CONTRIBUTIONS		\$	750.00
10. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS IN-KIND CONTRIBUTIONS		\$	0.00
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		\$	5,000.00
20. TOTAL: LOANS THIS PERIOD (SUM 18 + 19)		\$	5,000.00
21. TOTAL: ALL IN-KIND CONTRIBUTIONS (SUM 10 + 14)		\$	0.00
22. TOTAL: ALL MONETARY CONTRIBUTIONS (SUM 9, 11, 12 & 13)		\$	750.00
23. MONETARY CONTRIBUTIONS & LOANS RECEIVED REQUIRING A RECORD OF NAME & ADDRESS (SUM 9, 13 & 20)		\$	5,750.00



**MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

OFFICE USE ONLY

NAME OF COMMITTEE Friends of Brett R. Harrison	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: James Rivers CITY / STATE: 1508 Gaslight Drive Springfield MO 65810 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	4/16/2018 ----- \$ 200.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Kathryn Strom CITY / STATE: 3808 South Shore Hartsburg MO 65039 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	4/16/2018 ----- \$ 150.00	\$ 150.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Darrin Lewis CITY / STATE: 211 Johnson Drive Buffalo MO 65622 EMPLOYER: Over The Road Trucking <input type="checkbox"/> COMMITTEE:	4/16/2018 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Todd Schludt CITY / STATE: 147 Stirling Lane Schaumburg IL 60194 EMPLOYER: Stenograph <input type="checkbox"/> COMMITTEE:	6/25/2018 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: James Rivers CITY / STATE: 1508 Gaslight Drive Springfield MO 65810 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	6/25/2018 ----- \$ 300.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Rivers James CITY / STATE: 1508 Gaslight Drive Springfield MO 65810 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	6/25/2018 ----- \$ 400.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:	----- \$	\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:	----- \$	\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS --

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



**MISSOURI ETHICS COMMISSION
SUPPLEMENTAL LOAN INFORMATION**

INSTRUCTIONS ON REVERSE SIDE

CHECK TYPE OF FORM	OFFICE USE ONLY
<input type="checkbox"/> LOAN RECEIVED	
<input checked="" type="checkbox"/> LOAN REPAYMENT	

NAME OF COMMITTEE Friends of Brett R. Harrison	REPORT DATE 7/16/2018
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I. LOAN RECEIVED (LOAN OF MORE THAN \$100)

1. NAME AND ADDRESS OF LENDER		
2. NAME(S) AND ADDRESS(ES) OF PERSON(S) LIABLE FOR THE LOAN		
3. LOAN I.D. NUMBER (IF ANY)	4. DATE OF LOAN	5. AMOUNT OF LOAN \$
6. ANNUAL RATE OF INTEREST %	7. TIME PERIOD OF LOAN (MONTH, YEARS, ETC.)	
8. DESCRIBE REPAYMENT SCHEDULE (MONTHLY, SEMI-ANNUALLY, ETC.)		

II. SCHEDULE OF REPAYMENT (PAYMENT MADE OR CREDIT RECEIVED)

1. DATE OF PAYMENT OR CREDIT	2. NAME AND ADDRESS OF LENDER	3. AMOUNT OF PAYMENT OR CREDIT
6/20/2018	Capital One P.O.Box 30285 Salt Lake City, UT 84130	1,316.00
4. TOTAL PAYMENT OR CREDIT ON LOANS THIS PERIOD (SUM ITEM 3)		\$ 1,316.00
5. AMOUNT OF ITEM 4 THAT WAS PAYMENT MADE		\$ 1,316.00
6. AMOUNT OF ITEM 4 THAT WAS CREDIT RECEIVED		\$



**MISSOURI ETHICS COMMISSION
SUPPLEMENTAL LOAN INFORMATION**

INSTRUCTIONS ON REVERSE SIDE

CHECK TYPE OF FORM	OFFICE USE ONLY
<input checked="" type="checkbox"/> LOAN RECEIVED	
<input type="checkbox"/> LOAN REPAYMENT	

NAME OF COMMITTEE Friends of Brett R. Harrison	REPORT DATE 7/16/2018
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I. LOAN RECEIVED (LOAN OF MORE THAN \$100)

1. NAME AND ADDRESS OF LENDER
Brett Harrison
69 Pleasant Ridge Drive
Urbana MO 65767

2. NAME(S) AND ADDRESS(ES) OF PERSON(S) LIABLE FOR THE LOAN
Brett Harrison
69 Pleasant Ridge Drive
Urbana MO 65767

3. LOAN I.D. NUMBER (IF ANY)

4. DATE OF LOAN
4/27/2018

5. AMOUNT OF LOAN
\$ 5,000.00

6. ANNUAL RATE OF INTEREST
0 %

7. TIME PERIOD OF LOAN (MONTH, YEARS, ETC.)
none

8. DESCRIBE REPAYMENT SCHEDULE (MONTHLY, SEMI-ANNUALLY, ETC.)
unknown

II. SCHEDULE OF REPAYMENT (PAYMENT MADE OR CREDIT RECEIVED)

1. DATE OF PAYMENT OR CREDIT	2. NAME AND ADDRESS OF LENDER	3. AMOUNT OF PAYMENT OR CREDIT

4. TOTAL PAYMENT OR CREDIT ON LOANS THIS PERIOD (SUM ITEM 3)	\$
5. AMOUNT OF ITEM 4 THAT WAS PAYMENT MADE	\$
6. AMOUNT OF ITEM 4 THAT WAS CREDIT RECEIVED	\$



MISSOURI ETHICS COMMISSION
EXPENDITURES AND CONTRIBUTIONS MADE
 Instructions on Reverse Side

Office Use Only

1. Name of Committee Friends of Brett R. Harrison		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 View Supplemental Form(s)			
5. Subtotal: Non-Itemized Expenditures This Page (Sum Column 4)			\$ 0.00
6. Subtotal: Non-Itemized Expenditures Any Attached Pages			+ 264.05
7. Total: Non-Itemized Expenditures This Period (Sum 5 + 6)			\$ 264.05
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: 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)			\$ 0.00
13. Subtotal: Any Attached Pages			+ 3,167.58
14. Total: Itemized Expenditures This Period (Sum 12 + 13)			\$ 3,167.58
15. Total: Monetary Expenditures This Period (Sum 7 + 14)			\$ 3,431.63
16. Amount of Line 15 Above which was Paid Out This Period			\$ 2,115.63
17. Amount of Line 15 Which Were Expenditures Incurred This Period Including Payments Made by Credit Cards			\$ 1,316.00
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)			\$ 1,316.00
C. Contributions Made (Regardless of Amount)		21. Date	22. Amount
20. Name and Address of Candidate or Committee			
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)			\$ 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 Friends of Brett R. Harrison		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: Buffalo Reflex ADDRESS: 114 Lincoln CITY/STATE: Buffalo MO 65622		4/19/2018	Newspaper Ad \$ <input checked="" type="checkbox"/> PAID 290.00 <input type="checkbox"/> INCURRED
NAME: Buffalo Reflex ADDRESS: 114 Lincoln CITY/STATE: Buffalo MO 65622		4/27/2018	Newspaper Ad \$ <input checked="" type="checkbox"/> PAID 203.00 <input type="checkbox"/> INCURRED
NAME: Buffalo Reflex ADDRESS: 114 Lincoln CITY/STATE: Buffalo MO 65622		5/25/2018	Newspaper Ads \$ <input checked="" type="checkbox"/> PAID 580.40 <input type="checkbox"/> INCURRED
NAME: ABC Motors ADDRESS: 813 South Ash CITY/STATE: Buffalo MO 65622		6/1/2018	Electronic Sign \$ <input checked="" type="checkbox"/> PAID 250.00 <input type="checkbox"/> INCURRED
NAME: Buffalo Reflex ADDRESS: 114 Lincoln CITY/STATE: Buffalo MO 65622		6/14/2018	Push cards and Newspaper ad \$ <input checked="" type="checkbox"/> PAID 366.60 <input type="checkbox"/> INCURRED
NAME: Shirts and Giggles ADDRESS: 311 West Broadway Street CITY/STATE: Urbana MO 65767		6/26/2018	Yard Signs \$ <input checked="" type="checkbox"/> PAID 161.58 <input type="checkbox"/> INCURRED
NAME: A.G.E. Graphics ADDRESS: 678 Collins Road CITY/STATE: Little Hocking OH 45742		5/4/2018	Campaign Signs \$ <input type="checkbox"/> PAID 1,316.00 <input checked="" 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
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
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)			\$ --