



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

M.E.C. ID NO. A171436

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

2. FULL NAME OF COMMITTEE  
 Barker for Prosecutor

3. COMMITTEE MAILING ADDRESS  
 PO Box 1676

4. COMMITTEE TELEPHONE NUMBER  
 (417) 988-2649

CITY / STATE / ZIP  
 Buffalo MO 65622

5. TREASURER'S NAME  
 Ron Locke

6. TREASURER'S MAILING ADDRESS  
 93 State Rd V

7. TREASURER'S TELEPHONE NUMBER  
 HOME: (417) 345-4800

CITY / STATE / ZIP  
 Long Lane MO 65590

WORK: (417) 880-5317

8. DEPUTY TREASURER'S NAME  CHECK IF NO DEPUTY TREASURER  
 Tiffany L. Barker

9. DEPUTY TREASURER'S MAILING ADDRESS  
 17 Jared Lane Fair Grove MO 65648

10. DEPUTY TREASURER'S TELEPHONE NUMBER  
 HOME: (417) 988-2648

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 4/1/2018 THROUGH 6/30/2018

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

Jonathan D. Barker  
 17 Jared Lane  
 Fair Grove MO 65648  
 (417) 988-2649  
 Prosecuting Attorney  
 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 10:56PM

\_\_\_\_\_  
 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 10:56PM

\_\_\_\_\_  
 CANDIDATE'S SIGNATURE



**Missouri Ethics Commission**  
**REPORT SUMMARY**  
 Instructions on Reverse Side

Name of Committee Barker for Prosecutor	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		\$ 2,930.00	<b>Money On Hand</b>	
2. All Monetary Contributions Received This Period	\$ 6,985.50			
3. All Loans Received This Period	+ 0.00			
4. Miscellaneous Receipts This Period	+ 0.00			
5. <b>Subtotal</b> Monetary Receipts This Period (Sum 2A + 3A + 4A)	\$ 6,985.50			
6. In-kind Contributions Received This Period	+ 0.00		25. Monetary Receipts this Period (From Item 5 - this page)	+ 6,985.50
7. <b>Total</b> All Receipts This Period (Sum 5A + 6A)	\$ 6,985.50		26. Monetary Disbursements Made This Period (Sum 10 + 16A + 23)	- 2,579.40
8. <b>Total All Receipts This Election</b> (Sum 1B + 7A)		\$ 9,915.50	a) Disbursements By Check \$ 2,529.40 b) Disbursements By Cash \$ 50.00	
Expenditures	A. This Period	B. This Calendar Yr or Election Cycle	27. Money On Hand at the close of this reporting period (SUM 24 + 25 - 26)	\$ 6,297.32
9. Total Expenditures for this election previously reported		\$ 1,038.78	<b>Indebtedness</b>	
10. Expenditures made by cash or check this period	\$ 2,579.40			
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. <b>Total</b> All expenditures made this period (Sum 10A + 11A + 12A) Including payments made by Credit Card (line 17 CD3)	\$ 2,579.40		28. Outstanding Indebtedness at the beginning of this period	\$ 0.00
14. <b>Total Expenditures This Election</b> (Sum 9B + 13A)		\$ 3,618.18	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)	+ 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)	+ 0.00
	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. <b>Total</b> Contributions Made This Period (Sum 16A + 17A)	\$ 0.00		32. Debt Forgiven on Loans This Period	- 0.00
19. <b>Total All Contributions Made This Election</b> (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)	\$ 0.00
20. Funds Used For Paying Loans This Period Including Credit Card Payments	+ 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. <b>Total Other Disbursements This Period</b> (Sum 20A + 21A + 22A)	\$ 0.00			



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

OFFICE USE ONLY

1. NAME OF COMMITTEE Barker for Prosecutor		2. REPORT DATE 7/16/2018	
<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 ----- 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		+	\$ 6,885.50
8. TOTAL: ITEMIZED CONTRIBUTIONS THIS PERIOD (SUM 6 + 7)		\$	6,885.50
9. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS <b>MONETARY</b> CONTRIBUTIONS		\$	6,885.50
10. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS <b>IN-KIND</b> CONTRIBUTIONS		\$	0.00
<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		\$	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		\$	100.00
14. TOTAL IN-KIND CONTRIBUTIONS RECEIVED FROM PERSONS (NOT COMMITTEES) GIVING \$100 OR LESS		\$	0.00
<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)		\$	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)		\$	0.00
22. TOTAL: ALL MONETARY CONTRIBUTIONS (SUM 9, 11, 12 & 13)		\$	6,985.50
23. MONETARY CONTRIBUTIONS & LOANS RECEIVED REQUIRING A RECORD OF NAME & ADDRESS (SUM 9, 13 & 20)		\$	6,985.50



**MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

OFFICE USE ONLY

NAME OF COMMITTEE Barker for Prosecutor	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: Michael Barker CITY/STATE: 77 East 36 South EMPLOYER: Valparaiso IN 46383 Federal Bureau of Investigation -- Federal Agent <input type="checkbox"/> COMMITTEE:	4/3/2018 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Andrew Barker CITY/STATE: 3221 Mitchell Street EMPLOYER: Tullahoma TN 37388 United States Air Force -- Major Judge Advocate General <input type="checkbox"/> COMMITTEE:	4/3/2018 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Emily Monroe CITY/STATE: 301 East 68th Terrace EMPLOYER: Kansas City MO 64113 Self -- Attorney <input type="checkbox"/> COMMITTEE:	4/11/2018 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Larry Tyrell CITY/STATE: 430 South Glenstone EMPLOYER: Springfield MO 65802 self -- Attorney <input type="checkbox"/> COMMITTEE:	4/11/2018 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Donald Cooley CITY/STATE: 901 E St. Louis St EMPLOYER: Springfield MO 65806 Self -- Attorney <input type="checkbox"/> COMMITTEE:	4/11/2018 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: John Newman CITY/STATE: 1222 W Stone Meadow Way EMPLOYER: Springfield MO 65810 Newman Law Firm (SELF) -- Attorney <input type="checkbox"/> COMMITTEE:	4/11/2018 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: David Willingham CITY/STATE: PO BOX 289 EMPLOYER: Buffalo MO 65622 Self - AMERICAN FAMILY INSURANCE -- Insurance Agent <input type="checkbox"/> COMMITTEE:	4/11/2018 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: John Kail CITY/STATE: 939 N Boonville Ave EMPLOYER: Springfield MO 65802 Self -- Attorney <input type="checkbox"/> COMMITTEE:	4/19/2018 ----- \$ 250.00	\$ 250.00 <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 Barker for Prosecutor	DATE 7/16/2018
--------------------------------------------	-------------------

**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: Gary Wilson CITY / STATE: 1736 E Sunshine Springfield MO 65804 EMPLOYER: Self -- Attorney <input type="checkbox"/> COMMITTEE:	4/19/2018 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Stacy Bilyeu CITY / STATE: 216 W Commercial St Springfield MO 65803 EMPLOYER: Self -- Attorney <input type="checkbox"/> COMMITTEE:	4/19/2018 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Phillip Fuhrman CITY / STATE: 3938 W. Durango Ct Springfield MO 65810 EMPLOYER: Greene County Prosecutor's Office -- Attorney <input type="checkbox"/> COMMITTEE:	4/19/2018 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Nick Bergerone CITY / STATE: 1010 N Boonville Springfield MO 65802 EMPLOYER: Greene County Prosecutor's Office -- Attorney <input type="checkbox"/> COMMITTEE:	4/1/2018 ----- \$ 20.00	\$ 20.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Benjamin McBride CITY / STATE: 2021 E Norshire St Springfield MO 65804 EMPLOYER: McBride Law (SELF) -- attorney <input type="checkbox"/> COMMITTEE:	4/19/2018 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Emily Shook CITY / STATE: 962 South Hickory Trace Ct Springfield MO 65809 EMPLOYER: Greene County Prosecutor's Office -- Attorney <input type="checkbox"/> COMMITTEE:	5/15/2018 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Nathan Duncan CITY / STATE: 4749 South 156th Road Bolivar MO 65613 EMPLOYER: Douglas Haun Heidemann -- Attorney <input type="checkbox"/> COMMITTEE:	5/15/2018 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Larry Catt CITY / STATE: 365 Ridgecrest Dr Saddlebrook MO 65630 EMPLOYER: Larry Catt Law Office (SELF) -- Attorney <input type="checkbox"/> COMMITTEE:	5/15/2018 ----- \$ 150.00	\$ 150.00 <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 Barker for Prosecutor	DATE 7/16/2018
--------------------------------------------	-------------------

**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: Daniel Barker CITY/STATE: 1011 Star Rd Helena MT 59602 EMPLOYER: Crowley Fleck PLLP -- Attorney <input type="checkbox"/> COMMITTEE:	6/1/2018 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Scott Hill CITY/STATE: 853 E Apollo Ct Nixa MO 65714 EMPLOYER: Springfield Police Department -- Detective <input type="checkbox"/> COMMITTEE:	6/1/2018 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Nicholas Jain CITY/STATE: 2200 South Avenue Kennett MO 63857 EMPLOYER: Self -- Attorney <input type="checkbox"/> COMMITTEE:	6/1/2018 ----- \$ 150.00	\$ 150.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Brandon Twibell CITY/STATE: 901 E St. Louis St Springfield MO 65806 EMPLOYER: Self -- Attorney <input type="checkbox"/> COMMITTEE:	6/1/2018 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Roger Jones CITY/STATE: 601 S Grant Ave Springfield MO 65806 EMPLOYER: Self -- Attorney <input type="checkbox"/> COMMITTEE:	6/7/2018 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Daniel Barker CITY/STATE: 1011 Star Rd Helena MT 59602 EMPLOYER: Crowley Fleck PLLP -- Attorney <input type="checkbox"/> COMMITTEE:	6/7/2018 ----- \$ 615.50	\$ 515.50 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: J Daniel Patterson CITY/STATE: 1100 W Shawnee St Springfield MO 65810 EMPLOYER: Greene County Prosecutor's Office -- Prosecutor <input type="checkbox"/> COMMITTEE:	6/21/2018 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: David Barker CITY/STATE: 2088 Barker Rd West Valley City UT 84119 EMPLOYER: Retired -- attorney <input type="checkbox"/> COMMITTEE:	6/21/2018 ----- \$ 2,200.00	\$ 1,200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

<b>TOTAL: ITEMIZED CONTRIBUTIONS</b>		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;">--</div>
<b>(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)</b>		



**MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

OFFICE USE ONLY

NAME OF COMMITTEE Barker for Prosecutor	DATE 7/16/2018
--------------------------------------------	-------------------

**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: Tara Blaser CITY / STATE: 3637 S newton Ave Springfield MO 65807 EMPLOYER: Greene County Prosecutor's Office -- attorney <input type="checkbox"/> COMMITTEE:	6/21/2018 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Kevin Young CITY / STATE: 800 E Portland St Springfield MO 65807 EMPLOYER: Morrissey Law Firm -- attorney <input type="checkbox"/> COMMITTEE:	6/21/2018 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Dara Lindsay CITY / STATE: 33154 Paterson Cr Waukee IA 50263 EMPLOYER: Greene County Prosecutor's Office -- Attorney <input type="checkbox"/> COMMITTEE:	6/21/2018 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:	----- \$	\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:	----- \$	\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:	----- \$	\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:	----- \$	\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
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 Barker for Prosecutor		2. Report Date 7/16/2018	
<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)			\$ 0.00
6. Subtotal: Non-Itemized Expenditures Any Attached Pages			+ 0.00
7. Total: Non-Itemized Expenditures This Period (Sum 5 + 6)			\$ 0.00
<b>B. Itemized Expenditures All Over \$100</b> 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: View Supplemental Form(s) 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			+ 2,579.40
14. Total: Itemized Expenditures This Period (Sum 12 + 13)			\$ 2,579.40
15. Total: Monetary Expenditures This Period (Sum 7 + 14)			\$ 2,579.40
16. Amount of Line 15 Above which was Paid Out This Period			\$ 2,579.40
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
<b>C. Contributions Made (Regardless of Amount)</b>		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 Barker for Prosecutor		REPORT DATE 7/16/2018		
<b>ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS</b>		DATE	PURPOSE - (IF PAYMENT WAS TO A CAMPAIGN WORKER, SHOW AGGREGATE PAID)	AMOUNT THIS PERIOD
NAME AND ADDRESS OF RECIPIENT				
NAME: Dallas County Fair ADDRESS: Park Drive CITY/STATE: Buffalo MO 65622		4/1/2018	Marketing \$	\$ <input checked="" type="checkbox"/> PAID 180.00 <input type="checkbox"/> INCURRED
NAME: Vistaprint ADDRESS: 342 Shelbyville Mills Rd CITY/STATE: Shelbyville TN 37160		4/11/2018	Marketing \$	\$ <input checked="" type="checkbox"/> PAID 317.60 <input type="checkbox"/> INCURRED
NAME: USPS ADDRESS: 215 S Pine CITY/STATE: Buffalo MO 65622		4/11/2018	postage \$	\$ <input checked="" type="checkbox"/> PAID 50.00 <input type="checkbox"/> INCURRED
NAME: Vistaprint ADDRESS: 342 Shelbyville Mills Rd CITY/STATE: Shelbyville TN 37160		5/15/2018	Marketing \$	\$ <input checked="" type="checkbox"/> PAID 72.48 <input type="checkbox"/> INCURRED
NAME: Buildasign ADDRESS: 11525 Stonehollow Dr Ste a100 CITY/STATE: Austin TX 78758		5/15/2018	marketing \$	\$ <input checked="" type="checkbox"/> PAID 247.97 <input type="checkbox"/> INCURRED
NAME: Signs on the cheap ADDRESS: 11525 Stonehollow Dr Ste A100 CITY/STATE: Austin TX 78758		6/4/2018	Marketing \$	\$ <input checked="" type="checkbox"/> PAID 1,143.81 <input type="checkbox"/> INCURRED
NAME: Long Lane Lions Club ADDRESS: 415 Four Mile Rd CITY/STATE: Long Lane MO 65590		5/23/2018	Marketing \$	\$ <input checked="" type="checkbox"/> PAID 50.00 <input type="checkbox"/> INCURRED
NAME: Signs on the Cheap ADDRESS: 11525 Stonehollow Dr Ste A100 CITY/STATE: Austin TX 78758		6/14/2018	Marketing \$	\$ <input checked="" type="checkbox"/> PAID 517.54 <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
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NAME: ADDRESS: CITY/STATE:			\$ \$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
<b>TOTAL: ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS</b>				\$
<b>(CARRY TO ITEM 13. "SUBTOTAL: ANY ATTACHED PAGES" ON FORM CD-3)</b>				--