



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

M.E.C. ID NO. C121482

1. DATE OF REPORT 12/27/2012	OFFICE USE ONLY
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INSTRUCTIONS ON REVERSE SIDE

2. FULL NAME OF COMMITTEE  
 JONES FOR COLUMBIA

3. COMMITTEE MAILING ADDRESS 1151 WEST AZOROS CITY / STATE / ZIP COLUMBIA MO 65203	4. COMMITTEE TELEPHONE NUMBER  (573) 825-7160
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5. TREASURER'S NAME  
 ANGELA M HULL

6. TREASURER'S MAILING ADDRESS 6703 MADISON CREEK CITY / STATE / ZIP COLUMBIA MO 65203	7. TREASURER'S TELEPHONE NUMBER HOME: (573) 814-9878 WORK:
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8. DEPUTY TREASURER'S NAME  CHECK IF NO DEPUTY TREASURER  
 SHARON JONES

9. DEPUTY TREASURER'S MAILING ADDRESS 1151 WEST AZOROS COLUMBIA MO 65203 CITY / STATE / ZIP	10. DEPUTY TREASURER'S TELEPHONE NUMBER HOME: (573) 808-2156 WORK:
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11. DATE OF ELECTION 2/5/2013	12. TYPE OF ELECTION ( CHECK ONE ) <input type="radio"/> PRIMARY <input type="radio"/> GENERAL <input checked="" type="radio"/> SPECIAL
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13. TIME PERIOD COVERED BY THIS STATEMENT  
 FROM 12/4/2012 THROUGH 12/22/2012

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

MARK JONES  
 1151 WEST AZOROS  
 COLUMBIA MO 65203  
 (573) 825-7160  
 COUNCIL PERSON  
 CITY OF COLUMBIA

CHECK IF INCUMBENT

REPUBLICAN     DEMOCRAT     NON-PARTISAN

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 40 Day Before Special Charter Election-2/5/

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 Dec 27 2012 4:48PM

\_\_\_\_\_  
 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 Dec 27 2012 4:48PM

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



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

Name of Committee JONES FOR COLUMBIA	Date of Report 12/27/2012	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		\$ 0.00	<b>Money On Hand</b>	
2. All Monetary Contributions Received This Period	\$ 8,830.00			
3. All Loans Received This Period	+ 2,000.00			
4. Miscellaneous Receipts This Period	+ 0.00			
5. <b>Subtotal</b> Monetary Receipts This Period (Sum 2A + 3A + 4A)	\$ 10,830.00			
6. In-kind Contributions Received This Period	+ 500.00		25. Monetary Receipts this Period (From Item 5 - this page)	+ 10,830.00
7. <b>Total</b> All Receipts This Period (Sum 5A + 6A)	\$ 11,330.00		26. Monetary Disbursements Made This Period (Sum 10 + 16A + 23)	- 325.19
8. <b>Total All Receipts This Election</b> (Sum 1B + 7A)		\$ 11,330.00	a) Disbursements By Check \$ 325.19 b) Disbursements By Cash \$ 0.00	
Expenditures	A. This Period	B. This Calendar Yr or Election Cycle		
9. Total Expenditures for this election previously reported		\$ 0.00	27. Money On Hand at the close of this reporting period (SUM 24 + 25 - 26)	\$ 10,504.81
10. Expenditures made by cash or check this period	\$ 325.19		<b>Indebtedness</b>	
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)	+ 205.47			
13. <b>Total</b> All expenditures made this period (Sum 10A + 11A + 12A) Including payments made by Credit Card (line 17 CD3)	\$ 530.66		28. Outstanding Indebtedness at the beginning of this period	\$ 0.00
14. <b>Total Expenditures This Election</b> (Sum 9B + 13A)		\$ 530.66	29. Loans Received This Period	+ 2,000.00
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)	+ 205.47
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		
20. Funds Used For Paying Loans This Period Including Credit Card Payments	+ 0.00		34. Total Indebtedness at the Close of This Reporting Period (Sum 28 + 29 + 30A + 30B - 31 - 32 - 33)	\$ 2,205.47
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 JONES FOR COLUMBIA		2. REPORT DATE 12/27/2012	
<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		+	\$ 9,330.00
8. TOTAL: ITEMIZED CONTRIBUTIONS THIS PERIOD (SUM 6 + 7)		\$	9,330.00
9. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS <b>MONETARY</b> CONTRIBUTIONS		\$	8,830.00
10. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS <b>IN-KIND</b> CONTRIBUTIONS		\$	500.00
<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		\$	0.00
14. TOTAL IN-KIND CONTRIBUTIONS RECEIVED FROM PERSONS (NOT COMMITTEES) GIVING \$100 OR LESS		\$	0.00
<b>C. LOANS RECEIVED</b>			
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		\$	2,000.00
20. TOTAL: LOANS THIS PERIOD (SUM 18 + 19)		\$	2,000.00
21. TOTAL: ALL IN-KIND CONTRIBUTIONS (SUM 10 + 14)		\$	500.00
22. TOTAL: ALL MONETARY CONTRIBUTIONS (SUM 9, 11, 12 & 13)		\$	8,830.00
23. MONETARY CONTRIBUTIONS & LOANS RECEIVED REQUIRING A RECORD OF NAME & ADDRESS (SUM 9, 13 & 20)		\$	10,830.00



**MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

OFFICE USE ONLY

NAME OF COMMITTEE JONES FOR COLUMBIA	DATE 12/27/2012
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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.	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
<b>3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)</b> NAME: ADDRESS: Leila Medley CITY/STATE: 4 Wincanton Lane EMPLOYER: Bella Vista AR 72715 Retired <input type="checkbox"/> COMMITTEE:	12/11/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Sean Hinga CITY/STATE: 3137 fulton st EMPLOYER: denver CO 80238 AFSCME <input type="checkbox"/> COMMITTEE:	12/13/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jillian Matundan CITY/STATE: 134 North Pine Ave EMPLOYER: Albany NY 12203 AFSCME <input type="checkbox"/> COMMITTEE:	12/17/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Margaret Omero CITY/STATE: 1508 Monroe Street NW EMPLOYER: Washington DC 20010 Small Business Owner <input type="checkbox"/> COMMITTEE:	12/18/2012 ----- \$ 1,000.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: sean gagen CITY/STATE: 20324 Medalist Drive EMPLOYER: Ashburn VA 20147 GRASSROOTS SOLUTIONS <input type="checkbox"/> COMMITTEE:	12/13/2012 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Michele Lewis CITY/STATE: 205 Franklin Avenue EMPLOYER: Silver Spring MD 20901 AFSCME <input type="checkbox"/> COMMITTEE:	12/18/2012 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Linda Canan Stephens CITY/STATE: 9013 Advantage Ct EMPLOYER: Burke VA 22015 AFSCME <input type="checkbox"/> COMMITTEE:	12/19/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Brandon Bull CITY/STATE: 116 Ivy Dr. EMPLOYER: Charlottesville VA 22903 Student <input type="checkbox"/> COMMITTEE:	12/7/2012 ----- \$ 50.00	\$ 50.00 <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 JONES FOR COLUMBIA	DATE 12/27/2012
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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.

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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)
<b>3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)</b> NAME: ADDRESS: James Kottmeyer CITY/STATE: 100 East Grand Des Moines IA 50309 EMPLOYER: Business Owner <input type="checkbox"/> COMMITTEE:	12/14/2012 \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mark Moreland CITY/STATE: 4045 Affirmed Florrisan MO 63034 EMPLOYER: Attorney <input type="checkbox"/> COMMITTEE:	12/19/2012 \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Citizens for Colona CITY/STATE: 4387 Laclede EMPLOYER: St. Louis MO 63108 <input checked="" type="checkbox"/> COMMITTEE:	12/17/2012 \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Nancy Cross CITY/STATE: 18 S. Kingshighway Blvd. Saint Louis MO 63108 EMPLOYER: SEIU <input type="checkbox"/> COMMITTEE:	12/19/2012 \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Stephen Conway CITY/STATE: 3908 Flora Pl. St. Louis MO 63110 EMPLOYER: CITY OF ST LOUIS <input type="checkbox"/> COMMITTEE:	12/12/2012 \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Lara Granich CITY/STATE: 4557 Tower Grove Pl. St. Louis MO 63110 EMPLOYER: JWJ <input type="checkbox"/> COMMITTEE:	12/17/2012 \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Brad Ketcher CITY/STATE: 28 Plant Avenue Webster Groves MO 63119 EMPLOYER: Attorney <input type="checkbox"/> COMMITTEE:	12/10/2012 \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jackson and Associates CITY/STATE: 23 Midpark Ln. St. Louis MO 63124 EMPLOYER: <input type="checkbox"/> COMMITTEE:	12/19/2012 \$ 100.00	\$ 100.00 <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 JONES FOR COLUMBIA	DATE 12/27/2012
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**INSTRUCTIONS**

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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: Joan Bray CITY / STATE: 7166 Pershing Avenue Saint Louis MO 63130 EMPLOYER: Self-Employed <input type="checkbox"/> COMMITTEE:	12/15/2012 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Tracy McCreery CITY / STATE: 41 Rye Lane Saint Louis MO 63132 EMPLOYER: State of Missouri <input type="checkbox"/> COMMITTEE:	12/11/2012 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Brian Millner CITY / STATE: 1124 Indian Trails Olivette MO 63132 EMPLOYER: Bardgett & Associates <input type="checkbox"/> COMMITTEE:	12/20/2012 ----- \$ 10.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: jim faul CITY / STATE: 6431 scanlan Saint Louis MO 63139 EMPLOYER: KORTE LAW FIRM <input type="checkbox"/> COMMITTEE:	12/19/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Chere Chaney CITY / STATE: 1933 S. W. Second St. Lees Summit MO 64081 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	12/21/2012 ----- \$ 10.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Randy James CITY / STATE: 218 NE Tudor Rd. Lee's Summit MO 64086 EMPLOYER: Attorney <input type="checkbox"/> COMMITTEE:	12/21/2012 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Larry Jacob CITY / STATE: 43 L Street Lake Lotawana MO 64086 EMPLOYER: DOVER STRATEGIES <input type="checkbox"/> COMMITTEE:	12/10/2012 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Clark Brown CITY / STATE: 305 E Walnut St. Springfield MO 65806 EMPLOYER: SEIU <input type="checkbox"/> COMMITTEE:	12/17/2012 ----- \$ 100.00	\$ 100.00 <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 JONES FOR COLUMBIA	DATE 12/27/2012
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**INSTRUCTIONS**

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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)
<b>3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)</b> NAME: ADDRESS: Stephen Bough CITY/STATE: 917 w. 43rd Kansas City MO 64111 EMPLOYER: Attorney <input type="checkbox"/> COMMITTEE:	12/11/2012 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jason Dalen CITY/STATE: 3666 Belleview Avenue Kansas City MO 64111 EMPLOYER: CIVIC COUNCIL <input type="checkbox"/> COMMITTEE:	12/10/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mindy Brissey CITY/STATE: 3416 N Bellefontaine Ave Kansas City MO 64117 EMPLOYER: Consultant <input type="checkbox"/> COMMITTEE:	12/20/2012 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jeffrey Mazur CITY/STATE: 6700 Hunters Bnd Ashland MO 65010 EMPLOYER: AFSCME <input type="checkbox"/> COMMITTEE:	12/20/2012 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Flotron & McIntosh LLC Richard McIntosh CITY/STATE: PO Box 2051 EMPLOYER: Jefferson City MO 65102 <input type="checkbox"/> COMMITTEE:	12/19/2012 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Sara Schuett CITY/STATE: 125 West Circle Drive Jefferson City MO 65109 EMPLOYER: MATA <input type="checkbox"/> COMMITTEE:	12/11/2012 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jim Kreider CITY/STATE: 3030 DuPont Circle Jefferson City MO 65109 EMPLOYER: MRTA <input type="checkbox"/> COMMITTEE:	12/11/2012 ----- \$ 125.00	\$ 125.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Deeann Aull CITY/STATE: PO Box104536 Jefferson City MO 65109 EMPLOYER: MNEA <input type="checkbox"/> COMMITTEE:	12/20/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

<b>TOTAL: ITEMIZED CONTRIBUTIONS</b>	-----	-----
<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 JONES FOR COLUMBIA	DATE 12/27/2012
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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: Charles Gentry CITY/STATE: 815 Nob Hill EMPLOYER: Jefferson City MO 65109 CARSON & COIL <input type="checkbox"/> COMMITTEE:	12/13/2012 \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: AFSCME People CITY/STATE: 2419 B Hyde Park Road EMPLOYER: Jefferson City MO 65109 <input type="checkbox"/> COMMITTEE:	12/13/2012 \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Kale Gosney CITY/STATE: 3518 Marquis Ct. EMPLOYER: Columbia MO 65201 US Army <input type="checkbox"/> COMMITTEE:	12/21/2012 \$ 10.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Karen Krone CITY/STATE: 17 N Ninth St. EMPLOYER: Columbia MO 65201 Small Business Owner <input type="checkbox"/> COMMITTEE:	12/21/2012 \$ 5.00	\$ 5.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Scott Wilson CITY/STATE: The Hines Law Firm EMPLOYER: Columbia MO 65201 Attorney <input type="checkbox"/> COMMITTEE:	12/12/2012 \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Josh McCarroll CITY/STATE: 3801 Cooper Dr East EMPLOYER: Columbia MO 65201 AFSCME <input type="checkbox"/> COMMITTEE:	12/19/2012 \$ 10.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Joseph Cardetti CITY/STATE: 2865 S Gopher Dr EMPLOYER: Columbia MO 65201 Small Business Owner <input type="checkbox"/> COMMITTEE:	12/14/2012 \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Gary McLaughlin CITY/STATE: 2808 Jacobs Pl EMPLOYER: Columbia MO 65201 Restaurateur <input type="checkbox"/> COMMITTEE:	12/19/2012 \$ 10.00	\$ 10.00 <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 JONES FOR COLUMBIA	DATE 12/27/2012
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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.	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
<b>3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)</b> NAME: ADDRESS: Charles Hatcher CITY / STATE: 4815 E Turkey Trail Dr Columbia MO 65201 EMPLOYER: STATE OF MISSOURI <input type="checkbox"/> COMMITTEE:	12/21/2012 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Abe Rakov CITY / STATE: 807 E Green Meadows Columbia MO 65201 EMPLOYER: Kander for Missouri <input type="checkbox"/> COMMITTEE:	12/6/2012 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Faydre McGennis CITY / STATE: 1503 Preakness Dr Columbia MO 65202 EMPLOYER: University of Missouri <input type="checkbox"/> COMMITTEE:	12/21/2012 ----- \$ 5.00	\$ 5.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Sean Nicholson CITY / STATE: 26 E Thurman Columbia MO 65202 EMPLOYER: Consultant <input type="checkbox"/> COMMITTEE:	12/21/2012 ----- \$ 500.00	\$ 500.00 <input type="checkbox"/> MONETARY <input checked="" type="checkbox"/> IN-KIND
NAME: ADDRESS: Michael McGennis CITY / STATE: 1503 Preakness Dr Columbia MO 65202 EMPLOYER: Consultant <input type="checkbox"/> COMMITTEE:	12/21/2012 ----- \$ 5.00	\$ 5.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: michael campbell CITY / STATE: 2503 Gabrianna CT Columbia MO 65203 EMPLOYER: Attorney <input type="checkbox"/> COMMITTEE:	12/19/2012 ----- \$ 10.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Steve McLuckie CITY / STATE: 4600 Manhasset Dr. Columbia MO 65203 EMPLOYER: MNEA <input type="checkbox"/> COMMITTEE:	12/19/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Alexandra Townsend CITY / STATE: 124 Hollyridge Ln Columbia MO 65203 EMPLOYER: AFSCME MO <input type="checkbox"/> COMMITTEE:	12/20/2012 ----- \$ 25.00	\$ 25.00 <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 JONES FOR COLUMBIA	DATE 12/27/2012
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**INSTRUCTIONS**

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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: Stessie Bill CITY / STATE: 3107 Woodbine Dr Columbia MO 65203 EMPLOYER: Attorney <input type="checkbox"/> COMMITTEE:	12/20/2012 ----- \$ 10.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ron Leone CITY / STATE: 108 E Burnam Rd #A Columbia MO 65203 EMPLOYER: MPCA <input type="checkbox"/> COMMITTEE:	12/4/2012 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Robert Harry CITY / STATE: 500 S. Glenwood Ave Columbia MO 65203 EMPLOYER: Attorney <input type="checkbox"/> COMMITTEE:	12/20/2012 ----- \$ 20.00	\$ 20.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Patricia Butera CITY / STATE: 1605 Dunhill Way Columbia MO 65203 EMPLOYER: Small Business Owner <input type="checkbox"/> COMMITTEE:	12/8/2012 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Nicole Galloway CITY / STATE: 115 Crestmere Ave Columbia MO 65203 EMPLOYER: Boone County <input type="checkbox"/> COMMITTEE:	12/16/2012 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mark Jones CITY / STATE: 1151 Azoros Columbia MO 65203 EMPLOYER: MNEA <input type="checkbox"/> COMMITTEE:	12/7/2012 ----- \$ 10.00	\$ 5.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mark Jones CITY / STATE: 1151 West Azoros Columbia MO 65203 EMPLOYER: MNEA <input type="checkbox"/> COMMITTEE:	12/18/2012 ----- \$ 10.00	\$ 5.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Kenneth Townsend CITY / STATE: 17 west parkway dr columbia MO 65203 EMPLOYER: Small Business Owner <input type="checkbox"/> COMMITTEE:	12/19/2012 ----- \$ 100.00	\$ 100.00 <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 JONES FOR COLUMBIA	DATE 12/27/2012
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**INSTRUCTIONS**

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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: John Scott CITY/STATE: 4305 Glen Eagle Drive Columbia MO 65203 EMPLOYER: STATE OF MISSOURI <input type="checkbox"/> COMMITTEE:	12/20/2012 \$ 20.00	\$ 20.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Citizens for Stephen Webber CITY/STATE: 907 Forest Hill Ct. Columbia MO 65203 EMPLOYER: <input checked="" type="checkbox"/> COMMITTEE:	12/5/2012 \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Brianna Lennon CITY/STATE: 2269 Concordia Drive Columbia MO 65203 EMPLOYER: STATE OF MISSOURI <input type="checkbox"/> COMMITTEE:	12/19/2012 \$ 20.00	\$ 20.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Alex Eaton CITY/STATE: 115 N. West Blvd Columbia MO 65203 EMPLOYER: Consultant <input type="checkbox"/> COMMITTEE:	12/19/2012 \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Phyllis Fugit CITY/STATE: PO Box 70 Rocheport MO 65279 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	12/7/2012 \$ 50.00	\$ 50.00 <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  
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 JONES FOR COLUMBIA	REPORT DATE 12/27/2012
---	---------------------------

**I. LOAN RECEIVED (LOAN OF MORE THAN \$100)**

1. NAME AND ADDRESS OF LENDER  
Sharon Jones  
1151 W Azoros  
Columbia MO 65203

2. NAME(S) AND ADDRESS(ES) OF PERSON(S) LIABLE FOR THE LOAN  
Mark Jones  
1151 W Azoros Dr  
Columbia MO 65203

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

4. DATE OF LOAN  
12/4/2012

5. AMOUNT OF LOAN  
\$ 2,000.00

6. ANNUAL RATE OF INTEREST  
0 %

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

8. DESCRIBE REPAYMENT SCHEDULE (MONTHLY, SEMI-ANNUALLY, ETC.)  
None

**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 JONES FOR COLUMBIA		2. Report Date 12/27/2012	
<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 Transaction Fees			165.19
5. Subtotal: Non-Itemized Expenditures This Page (Sum Column 4)			\$ 165.19
6. Subtotal: Non-Itemized Expenditures Any Attached Pages			+ 0.00
7. Total: Non-Itemized Expenditures This Period (Sum 5 + 6)			\$ 165.19
<b>B. Itemized Expenditures All Over \$100</b> 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)			\$ 365.47
13. Subtotal: Any Attached Pages			+ 0.00
14. Total: Itemized Expenditures This Period (Sum 12 + 13)			\$ 365.47
15. Total: Monetary Expenditures This Period (Sum 7 + 14)			\$ 530.66
16. Amount of Line 15 Above which was Paid Out This Period			\$ 325.19
17. Amount of Line 15 Which Were Expenditures Incurred This Period Including Payments Made by Credit Cards			\$ 205.47
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:			<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 JONES FOR COLUMBIA		REPORT DATE 12/27/2012	
<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)
NAME AND ADDRESS OF RECIPIENT			AMOUNT THIS PERIOD
NAME: Landmark Bank ADDRESS: 400 E Broadway CITY/STATE: Ashland MO 65010		12/12/2012	Check Order \$ 10.00 <input checked="" type="checkbox"/> PAID 10.00 <input type="checkbox"/> INCURRED
NAME: David Owens Photography ADDRESS: 5604 Pinehurst LN CITY/STATE: Columbia MO 65202		12/18/2012	Photo Shoot \$ 150.00 <input checked="" type="checkbox"/> PAID 150.00 <input type="checkbox"/> INCURRED
NAME: MNEA Print Shop ADDRESS: 1810 E Elm CITY/STATE: Jefferson City MO 65102		12/12/2012	Printing \$ 46.09 <input type="checkbox"/> PAID 46.09 <input checked="" type="checkbox"/> INCURRED
NAME: MNEA Print Shop ADDRESS: 1810 E Elm CITY/STATE: Jefferson City MO 65102		12/19/2012	Printing \$ 159.38 <input type="checkbox"/> PAID 159.38 <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
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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
<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>			\$ --