

DISCLOSURE SUMMARY PAGE

FOR STATEWIDE AND GENERAL ASSEMBLY CANDIDATES

FORM DR-2SC CANDIDATE	DISCLOSURE REPORT
For office use only	
Comm. No. <u>806</u>	
Indexed <u>SW</u>	
Audited _____	
Checked _____	
Computer _____	

CANDIDATE'S COMMITTEE NAME (Must be same as on Statement of Organization)

Brunkhorst for Senate

MAY 22 2006
 CM 5-19

SIGNATURE OF TREASURER (or person filing this report) Bob Brunkhorst TELEPHONE 314-351-0003

DATE SIGNED 5/18/06

ELECTION YEAR REPORTING DATES	
Report Due	Covered Period-Inclusive
<input checked="" type="checkbox"/> May 20, 1994	Jan. 1-May 15, 1994
<input type="checkbox"/> Friday preceding primary	May 16-Tuesday preceding primary
<input type="checkbox"/> July 20, 1994	May 16 or Wednesday preceding primary - July 15, 1994
<input type="checkbox"/> Oct. 20, 1994	July 16 - Oct. 15, 1994
<input type="checkbox"/> Friday preceding general	Oct. 16 - Tuesday preceding general
<input type="checkbox"/> Jan. 20, 1995	Oct. 16 or Wednesday preceding general - Dec. 31, 1994

SPECIAL ELECTION REPORTING DATES	
DATE OF ELECTION _____, 19__	
Report Due	Covered Period-Inclusive
<input type="checkbox"/> 14th day prior to election	Current thru 19 days prior to election
<input type="checkbox"/> Friday preceding election	18th day preceding election thru Tuesday preceding election

NONELECTION YEAR REPORTING DATES	
Report Due	Covered Period-Inclusive
<input type="checkbox"/> Jan. 20, 1994	Oct 16 - Dec 31, 1993 or Tues. Preceding Election thru Dec. 31, 1993 or Jan. 1 - Dec. 31, 1993

- Check if Amendment to report dated _____, 19__
- Check if final (termination) report. (Attach Notice of Dissolution Form DR-3)

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed)

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) \$0.00

Schedule C: Fundraising Events total (Attach Schedule D) _____

Schedule F: Loans Received total (Attach Schedule F) _____

\$38.17

\$0.00

\$38.17

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) \$0.00

Schedule F: Loan Repayments total (Attach Schedule F) \$0.00

\$0.00

\$0.00

CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)..... \$38.17

UNPAID BILLS (From Schedule D - Attach Schedule D)	<u>\$0.00</u>
IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	<u>\$0.00</u>
OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	<u>\$0.00</u>
CONSULTANT BREAKDOWN (Schedule G Attached ?)	<input type="checkbox"/> Yes <input type="checkbox"/> No
ONGOING EQUIPMENT PURCHASED INVENTORY (Schedule H)	_____