



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

M.E.C. ID NO. C121133

1. DATE OF REPORT  7/30/2012	OFFICE USE ONLY
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INSTRUCTIONS ON REVERSE SIDE

2. FULL NAME OF COMMITTEE  
 CITIZENS FOR ROSS

3. COMMITTEE MAILING ADDRESS  
 19420 EVANS ROAD

4. COMMITTEE TELEPHONE NUMBER  
 (417) 247-2020

CITY / STATE / ZIP  
 YUKON MO 65589

5. TREASURER'S NAME  
 DR I C KEENEY

6. TREASURER'S MAILING ADDRESS  
 8214 KEENVIEW ROAD

7. TREASURER'S TELEPHONE NUMBER  
 HOME: (417) 967-4744

CITY / STATE / ZIP  
 HOUSTON MO 65483

WORK:

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

9. DEPUTY TREASURER'S MAILING ADDRESS  
 19420 EVANS ROAD YUKON MO 65589

10. DEPUTY TREASURER'S TELEPHONE NUMBER  
 HOME: (417) 247-2020

CITY / STATE / ZIP

WORK:

11. DATE OF ELECTION  
 8/7/2012

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

13. TIME PERIOD COVERED BY THIS STATEMENT  
 FROM 6/30/2012 THROUGH 7/26/2012

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

ROBERT ROSS  
 19420 EVANS ROAD  
 YUKON MO 65589  
 (417) 247-2020  
 STATE REPRESENTATIVE

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 30 2012 12:56PM  
 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 30 2012 12:56PM  
 CANDIDATE'S SIGNATURE



Missouri Ethics Commission

**REPORT SUMMARY**

Instructions on Reverse Side

Name of Committee CITIZENS FOR ROSS	Date of Report 7/30/2012	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		\$ 11,758.00	<b>Money On Hand</b>			
2. All Monetary Contributions Received This Period	\$ 1,150.00					
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)	\$ 1,150.00				24. Money On Hand at the beginning of this reporting period (Including funds in depository, cash, savings accounts and all other investments)	\$ 4,748.33
6. In-kind Contributions Received This Period	+ 0.00				25. Monetary Receipts this Period (From Item 5 - this page)	+ 1,150.00
7. <b>Total</b> All Receipts This Period (Sum 5A + 6A)	\$ 1,150.00				26. Monetary Disbursements Made This Period (Sum 10 + 16A + 23)	- 2,449.92
8. <b>Total All Receipts This Election</b> (Sum 1B + 7A)		\$ 12,908.00			a) Disbursements By Check \$ 2,449.92 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		\$ 6,409.67	27. Money On Hand at the close of this reporting period (SUM 24 + 25 - 26)	\$ 3,448.41		
10. Expenditures made by cash or check this period	\$ 2,449.92		28. Outstanding Indebtedness at the beginning of this period	\$ 3,000.00		
11. In-Kind Expenditures made this period	+ 0.00		29. Loans Received This Period	+ 0.00		
12. Expenditures incurred this period (not including loans) including payments made by credit card (line 17 CD3)	+ 0.00		30. A. New Expenditures Incurred This Period (include payments 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)	\$ 2,449.92		B. New Contributions Made by Credit Card (Line 25B CD3)	+ 0.00		
14. <b>Total Expenditures This Election</b> (Sum 9B + 13A)		\$ 8,859.59	31. Payments Made on Loans This Period	- 0.00		
Contributions Made	A. This Period	B. This Calendar Yr or Election Cycle	32. Debt Forgiven on Loans This Period	- 0.00		
15. Total Contributions Made For This Election Previously Reported		\$ 0.00	33. Payments Made This Period on Expenditures Incurred in Previous Period (Paid by Cash/Check Only) (Line 21 this page)	- 0.00		
16. All Contributions Made This Period (25A or 25B of CD3)	A 0.00	← Cash/Check	34. Total Indebtedness at the Close of This Reporting Period (Sum 28 + 29 + 30A + 30B - 31 - 32 - 33)	\$ 3,000.00		
	B 0.00	← Credit Card				
17. All In-Kind Contributions Made This Period	+ 0.00					
18. <b>Total</b> Contributions Made This Period (Sum 16A + 17A)	\$ 0.00					
19. <b>Total All Contributions Made This Election</b> (Sum 15B + 18A)		\$ 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					
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 CITIZENS FOR ROSS		2. REPORT DATE 7/30/2012	
<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
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		+	\$ 1,150.00
8. TOTAL: ITEMIZED CONTRIBUTIONS THIS PERIOD (SUM 6 + 7)		\$	1,150.00
9. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS <b>MONETARY</b> CONTRIBUTIONS		\$	1,150.00
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		\$	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		\$	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)		\$	1,150.00
23. MONETARY CONTRIBUTIONS & LOANS RECEIVED REQUIRING A RECORD OF NAME & ADDRESS (SUM 9, 13 & 20)		\$	1,150.00



**MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

OFFICE USE ONLY

NAME OF COMMITTEE CITIZENS FOR ROSS	DATE 7/30/2012
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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: Rick Thornberg CITY / STATE: 2900 Amon Dr. EMPLOYER: Summersville MO 65571 Retired -- Farmer <input type="checkbox"/> COMMITTEE:	7/5/2012 \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Gina Baney CITY / STATE: 5514 Gaston Rd EMPLOYER: Eunice MO 65468 TCMH -- Nurse <input type="checkbox"/> COMMITTEE:	7/12/2012 \$ 225.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Danny Ross CITY / STATE: 5515 Gaston Rd EMPLOYER: Eunice MO 65468 Self/Harper Logging -- Farmer/Truck Driver <input type="checkbox"/> COMMITTEE:	7/18/2012 \$ 700.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Bernadine Holt CITY / STATE: RR1 Box 1479 EMPLOYER: Winona MO 65588 Retired -- Retired <input type="checkbox"/> COMMITTEE:	7/21/2012 \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: David Barnett CITY / STATE: PO Box 101 EMPLOYER: Summersville MO 65571 Community Bank -- Banker <input type="checkbox"/> COMMITTEE:	7/24/2012 \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Charles Manier CITY / STATE: 5265 Hwy 63 EMPLOYER: Houston MO 65483 Manier Surveying -- Land Surveyor <input type="checkbox"/> COMMITTEE:	7/25/2012 \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ralph Riggs CITY / STATE: 7858 County Rd. 1100 EMPLOYER: West Plains MO 65775 Riggs and Associates -- Land Surveyor <input type="checkbox"/> COMMITTEE:	7/26/2012 \$ 300.00	\$ 300.00 <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

**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 CITIZENS FOR ROSS		2. Report Date 7/30/2012	
<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			
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		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			+ 2,449.92
14. Total: Itemized Expenditures This Period (Sum 12 + 13)			\$ 2,449.92
15. Total: Monetary Expenditures This Period (Sum 7 + 14)			\$ 2,449.92
16. Amount of Line 15 Above which was Paid Out This Period			\$ 2,449.92
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:			<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 CITIZENS FOR ROSS		REPORT DATE 7/30/2012		
<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)	AMOUNT THIS PERIOD
NAME AND ADDRESS OF RECIPIENT				
NAME: Houston Herald ADDRESS: 113 N Grand CITY/STATE: Houston MO 65483		7/3/2012	Advertisement \$ 551.80	\$ <input checked="" type="checkbox"/> PAID 52.00 <input type="checkbox"/> INCURRED
NAME: Ozark Radio Network ADDRESS: 983 US Hwy E 160 CITY/STATE: West Plains MO 65775		7/7/2012	Advertisement \$ 589.33	\$ <input checked="" type="checkbox"/> PAID 589.33 <input type="checkbox"/> INCURRED
NAME: Murphy USA ADDRESS: 1431 Sam Houston Blvd CITY/STATE: Houston MO 65483		7/17/2012	Fuel \$ 272.08	\$ <input checked="" type="checkbox"/> PAID 7.03 <input type="checkbox"/> INCURRED
NAME: Murphy USA ADDRESS: 1431 Sam Houston Blvd CITY/STATE: Houston MO 65483		7/17/2012	Fuel \$ 272.08	\$ <input checked="" type="checkbox"/> PAID 75.00 <input type="checkbox"/> INCURRED
NAME: Signal ADDRESS: PO Box 57 CITY/STATE: Mountain View MO 65548		7/24/2012	Fuel \$ 80.11	\$ <input checked="" type="checkbox"/> PAID 80.11 <input type="checkbox"/> INCURRED
NAME: Summersville Beacon ADDRESS: PO Box 272 CITY/STATE: Summersville MO 65571		7/23/2012	Advertisement \$ 287.30	\$ <input checked="" type="checkbox"/> PAID 287.30 <input type="checkbox"/> INCURRED
NAME: Houston Herald ADDRESS: 113 N Grand CITY/STATE: Houston MO 65483		7/25/2012	Advertisement \$ 551.80	\$ <input checked="" type="checkbox"/> PAID 499.80 <input type="checkbox"/> INCURRED
NAME: Dollar General ADDRESS: 523 Ozark Ave CITY/STATE: Cabool MO 65689		7/26/2012	Office Supply \$ 7.88	\$ <input checked="" type="checkbox"/> PAID 2.14 <input type="checkbox"/> INCURRED
NAME: Casey's General Store ADDRESS: 316 Ozark St. CITY/STATE: Cabool MO 65689		7/26/2012	Fuel \$ 181.48	\$ <input checked="" type="checkbox"/> PAID 88.61 <input type="checkbox"/> INCURRED
NAME: Mountain View Standard ADDRESS: PO Box 79 CITY/STATE: Mountain View MO 65548		7/24/2012	Advertisement \$ 315.00	\$ <input checked="" type="checkbox"/> PAID 315.00 <input type="checkbox"/> INCURRED
NAME: Cabool Enterprise ADDRESS: 525 Main CITY/STATE: Cabool MO 65689		7/25/2012	Advertisement \$ 453.60	\$ <input checked="" type="checkbox"/> PAID 453.60 <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
<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>				--