

MISSOURI ETHICS COMMISSION NON-COMMITTEE EXPENDITURE REPORT

| . REPORT DATE | 2. FUNCTION OF REPORT (CHECK ONE) | OFFICE USE ONLY |
|---------------|--|-------------------|
| | INDEPENDENT EXPENDITURE STATEMENT (S-1) OR | Rovd |
| 11/6/2020 | INTERNAL DISSEMINATION | 11/06/2020 |
| | REPORT (S-2) | — Vía Emaíl |
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| INSTRUCT | IONS ON REVERSE SI | DE | 11/6/2020 | REPORT (S-2) | IION | 11/00/2020 |
|---|--|-----------------------------|--|--|------------------|-------------------------|
| 3. NAME OF PERSON OR ENTITY MAKING EXPENDITURE(S) STL CBTU Community Project N200071 | | | | | | - Vía Emaíl @1:51 PM |
| 4. MAILING ADDRESS | 5. TELEPHONE NUMBER | | | | | |
| ADDRESS: 4472 | | | | | | |
| CITY / STATE / ZIP: St. L | ouis, MO 63115 | 314 | /495/5635 | | | |
| 6. TYPE OF ELECTION (CHECK ONE) 7. DATE OF | | | | | | 41 |
| | / GENERAL | SPECIAL | CAUCUS | Nover | mber 3, 2020 | |
| 8. TYPE OF REPORT (CH | | /ITHIN 14 DA | AYS OF ELECTION | ADDITIONAL REPORT | OTHER | |
| 9. NAME OF CANDIDATE OR BALLOT MEASURE | 10. OFFICE SOUGHT AND/OR POLITICAL SUBDIVISION | 11.CHECK ONE SUPP OPP | SCHEDULE OF EXPENDITURES 12. PAYEE NAME AND ADDRESS | 13. NATURE AND PURPOSE OF EXPENDITURE | 14. DATE MADE | 15. AMOUNT |
| Amendment 3 | | ~ | Pelican Print 3930 Flagstone Ct. Florissant, MO 63033 | 1000 "Vote" Yard Signs Received 10/27/20 | 11/5/2020 | \$2,710.00 |
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| 16 TOTAL EVDEND | ITURES MADE (TO | TAL COLL | JMN 15) | | \$ | 2,710.00 |
| 16. TOTAL EXPENDITURES MADE (TOTAL COLUMN 15) \$ 2,710.00 17. VERIFICATION: I CERTIFY THAT THIS REPORT IS TRUE AND COMPLETE M.E.C. ID NO | | | | | | |
| 17. VERIFICATION: | I WAKING THE EXPEND | ITURE(S),O | R AN AUTHORIZED AGENT | | DATE | |
| SIGNATURE OF PERSON MAKING THE EXPENDITURE(S), OR AN AUTHORIZED AGENT REWIS MOYE | | | | | 11/6/2020 | |