



MISSOURI ETHICS COMMISSION
NON-COMMITTEE EXPENDITURE REPORT
 INSTRUCTIONS ON REVERSE SIDE

1. REPORT DATE 11/30/20	2. FUNCTION OF REPORT (CHECK ONE) <input type="checkbox"/> INDEPENDENT EXPENDITURE STATEMENT (S-1) OR <input checked="" type="checkbox"/> INTERNAL DISSEMINATION REPORT (S-2)	OFFICE USE ONLY <i>Rcvd</i> 11/30/2020 <i>via Email</i> @10:13 AM
-----------------------------------	---	---

3. NAME OF PERSON OR ENTITY MAKING EXPENDITURE(S)
NARAL Pro-Choice Missouri *N200076*

4. MAILING ADDRESS ADDRESS: 1210 S. Vandeventer CITY / STATE / ZIP: St. Louis, MO 63110	5. TELEPHONE NUMBER 314-531-8616
---	--

6. TYPE OF ELECTION (CHECK ONE) <input type="checkbox"/> PRIMARY <input checked="" type="checkbox"/> GENERAL <input type="checkbox"/> SPECIAL <input type="checkbox"/> CAUCUS	7. DATE OF ELECTION 11/3/2020
--	---

8. TYPE OF REPORT (CHECK ONE)
 INITIAL REPORT REPORT WITHIN 14 DAYS OF ELECTION ADDITIONAL REPORT OTHER

9. NAME OF CANDIDATE OR BALLOT MEASURE	10. OFFICE SOUGHT AND/OR POLITICAL SUBDIVISION	11. CHECK ONE		12. PAYEE NAME AND ADDRESS	13. NATURE AND PURPOSE OF EXPENDITURE	14. DATE MADE	15. AMOUNT
		SUPP	OPP				
Nicole Galloway	Governor	<input checked="" type="checkbox"/>		Alex Cook 2101 Arsenal Street St. Louis MO 63118	Staff hours/ canvass	11/20/20	48.21
Yinka Faleti	Secretary of State	<input checked="" type="checkbox"/>		Alex Cook 2101 Arsenal Street St. Louis MO 63118	Staff hours/ canvass	11/20/20	48.21
Vicki Lorenz Englund	State Treasurer	<input checked="" type="checkbox"/>		Alex Cook 2101 Arsenal Street St. Louis MO 63118	Staff hours/ canvass	11/20/20	48.21
Rich Finneran	Attorney General	<input checked="" type="checkbox"/>		Alex Cook 2101 Arsenal Street St. Louis MO 63118	Staff hours/ canvass	11/20/20	48.21
Deb Lavender	State Senate District 15	<input checked="" type="checkbox"/>		Alex Cook 2101 Arsenal Street St. Louis MO 63118	Staff hours/ canvass	11/20/20	48.21
Nicole Galloway	Governor	<input checked="" type="checkbox"/>		Brian Wingbermuehle 2134 Avalon Ridge Circle Fenton Missouri 63026	Staff hours/ canvass	11/20/20	36.42
Yinka Faleti	Secretary of State	<input checked="" type="checkbox"/>		Brian Wingbermuehle 2134 Avalon Ridge Circle Fenton Missouri 63026	Staff hours/ canvass	11/20/20	36.42
Vicki Lorenz Englund	State Treasurer	<input checked="" type="checkbox"/>		Brian Wingbermuehle 2134 Avalon Ridge Circle Fenton Missouri 63026	Staff hours/ canvass	11/20/20	36.42

16. TOTAL EXPENDITURES MADE (TOTAL COLUMN 15) \$ **313.34**

17. VERIFICATION: I CERTIFY THAT THIS REPORT IS TRUE AND COMPLETE M.E.C. ID NO. _____

SIGNATURE OF PERSON MAKING THE EXPENDITURE(S) OR AN AUTHORIZED AGENT <i>Malley K. Schwarz</i>	DATE 11/30/2020
--	---------------------------



MISSOURI ETHICS COMMISSION
NON-COMMITTEE EXPENDITURE REPORT
 INSTRUCTIONS ON REVERSE SIDE

1. REPORT DATE 11/30/2020	2. FUNCTION OF REPORT (CHECK ONE) <input type="checkbox"/> INDEPENDENT EXPENDITURE STATEMENT (S-1) OR <input checked="" type="checkbox"/> INTERNAL DISSEMINATION REPORT (S-2)	OFFICE USE ONLY
-------------------------------------	---	-----------------

3. NAME OF PERSON OR ENTITY MAKING EXPENDITURE(S)
NARAL Pro-Choice Missouri

4. MAILING ADDRESS ADDRESS: 1210 S. Vandeventer CITY / STATE / ZIP: St. Louis, MO 63110	5. TELEPHONE NUMBER 314-531-8616
---	--

6. TYPE OF ELECTION (CHECK ONE) <input type="checkbox"/> PRIMARY <input checked="" type="checkbox"/> GENERAL <input type="checkbox"/> SPECIAL <input type="checkbox"/> CAUCUS	7. DATE OF ELECTION 11/3/2020
--	---

8. TYPE OF REPORT (CHECK ONE)
 INITIAL REPORT REPORT WITHIN 14 DAYS OF ELECTION ADDITIONAL REPORT OTHER

9. NAME OF CANDIDATE OR BALLOT MEASURE	10. OFFICE SOUGHT AND/OR POLITICAL SUBDIVISION	11. CHECK ONE		12. PAYEE NAME AND ADDRESS	13. NATURE AND PURPOSE OF EXPENDITURE	14. DATE MADE	15. AMOUNT
		SUPP	OPP				
Rich Finneran	Attorney General	✓		Brian Wingbermuehle 2134 Avalon Ridge Circle Fenton Missouri 63026	Staff hours/ canvass	11/20/20	36.42
Deb Lavender	State Senate District 15	✓		Brian Wingbermuehle 2134 Avalon Ridge Circle Fenton Missouri 63026	Staff hours/ canvass	11/20/20	36.42
Nicole Galloway	Governor	✓		Romana Mrzljak 2865 Salena St. Backhouse St. Louis MO 63014	Staff hours/ canvass	11/20/20	37.71
Yinka Faleti	Secretary of State	✓		Romana Mrzljak 2865 Salena St. Backhouse St. Louis MO 63014	Staff hours/ canvass	11/20/20	37.71
Vicki Lorenz Englund	State Treasurer	✓		Romana Mrzljak 2865 Salena St. Backhouse St. Louis MO 63014	Staff hours/ canvass	11/20/20	37.71
Rich Finneran	Attorney General	✓		Romana Mrzljak 2865 Salena St. Backhouse St. Louis MO 63014	Staff hours/ canvass	11/20/20	37.71
Deb Lavender	State Senate District 15	✓		Romana Mrzljak 2865 Salena St. Backhouse St. Louis MO 63014	Staff hours/ canvass	11/20/20	37.71
Nicole Galloway	Governor	✓		Allison Klinghammer 2329A Michigan Ave St. Louis MO 63014	Staff hours/ canvass	11/20/20	23.62

16. TOTAL EXPENDITURES MADE (TOTAL COLUMN 15) \$ **281.96**

17. VERIFICATION: I CERTIFY THAT THIS REPORT IS TRUE AND COMPLETE M.E.C. ID NO. _____

SIGNATURE OF PERSON MAKING THE EXPENDITURE(S) OR AN AUTHORIZED AGENT <i>Mallory Sking</i>	DATE 11/30/20
--	-------------------------



MISSOURI ETHICS COMMISSION
NON-COMMITTEE EXPENDITURE REPORT
 INSTRUCTIONS ON REVERSE SIDE

1. REPORT DATE 11/30/2020	2. FUNCTION OF REPORT (CHECK ONE) <input type="checkbox"/> INDEPENDENT EXPENDITURE STATEMENT (S-1) OR <input checked="" type="checkbox"/> INTERNAL DISSEMINATION REPORT (S-2)	OFFICE USE ONLY
------------------------------	---	-----------------

3. NAME OF PERSON OR ENTITY MAKING EXPENDITURE(S) NARAL Pro-Choice Missouri	
4. MAILING ADDRESS ADDRESS: 1210 S. Vandeventer CITY / STATE / ZIP: St. Louis, MO 63110	5. TELEPHONE NUMBER 314-531-8616
6. TYPE OF ELECTION (CHECK ONE) <input type="checkbox"/> PRIMARY <input checked="" type="checkbox"/> GENERAL <input type="checkbox"/> SPECIAL <input type="checkbox"/> CAUCUS	7. DATE OF ELECTION 11/3/2020
8. TYPE OF REPORT (CHECK ONE) <input type="checkbox"/> INITIAL REPORT <input type="checkbox"/> REPORT WITHIN 14 DAYS OF ELECTION <input checked="" type="checkbox"/> ADDITIONAL REPORT <input type="checkbox"/> OTHER	

9. NAME OF CANDIDATE OR BALLOT MEASURE	10. OFFICE SOUGHT AND/OR POLITICAL SUBDIVISION	11. CHECK ONE		12. PAYEE NAME AND ADDRESS	13. NATURE AND PURPOSE OF EXPENDITURE	14. DATE MADE	15. AMOUNT
		SUPP	OPP				
Yinka Faleti	Secretary of State	✓		Allison Klinghammer 2329A Michigan Ave St. Louis MO 63014	Staff hours/ canvass	11/20/2020	23.62
Vicki Lorenz Englund	State Treasurer	✓		Allison Klinghammer 2329A Michigan Ave St. Louis MO 63014	Staff hours/ canvass	11/20/2020	23.62
Rich Finneran	Attorney General	✓		Allison Klinghammer 2329A Michigan Ave St. Louis MO 63014	Staff hours/ canvass	11/20/2020	23.62
Deb Lavender	State Senate District 15	✓		Allison Klinghammer 2329A Michigan Ave St. Louis MO 63014	Staff hours/ canvass	11/20/2020	23.62
Judy Baker	State Senate District 19	✓		Alayna Jenkins 3536 Hempstead St. St. Charles, MO 63301	Staff time/ phonebank	11/20/2020	45.00
Judy Baker	State Senate District 19	✓		Megan Owens 3748 B Dunnica Ave St. Louis MO 63116	Staff time/ phonebank	11/20/2020	48.00
Nicole Galloway	Governor	✓		Helmi Henkin 40 N. Euclid Ave Apt 510 St. Louis MO 63108	Staff time/ phonebank	11/20/2020	1.87
Yinka Faleti	Secretary of State	✓		Helmi Henkin 40 N. Euclid Ave Apt 510 St. Louis MO 63108	Staff time/ phonebank	11/20/2020	1.87

16. TOTAL EXPENDITURES MADE (TOTAL COLUMN 15) \$ 191.22

17. VERIFICATION: I CERTIFY THAT THIS REPORT IS TRUE AND COMPLETE M.E.C. ID NO. _____

SIGNATURE OF PERSON MAKING THE EXPENDITURE(S) OR AN AUTHORIZED AGENT
Mallory K. Schy DATE 11/30/2020



MISSOURI ETHICS COMMISSION
NON-COMMITTEE EXPENDITURE REPORT
 INSTRUCTIONS ON REVERSE SIDE

1. REPORT DATE 11/30/20	2. FUNCTION OF REPORT (CHECK ONE) <input type="checkbox"/> INDEPENDENT EXPENDITURE STATEMENT (S-1) OR <input checked="" type="checkbox"/> INTERNAL DISSEMINATION REPORT (S-2)	OFFICE USE ONLY
-----------------------------------	---	-----------------

3. NAME OF PERSON OR ENTITY MAKING EXPENDITURE(S)
NARAL Pro-Choice Missouri

4. MAILING ADDRESS
 ADDRESS: **1210 S. Vandeventer**
 CITY / STATE / ZIP: **St. Louis, MO 63110**

5. TELEPHONE NUMBER
314-531-8616

6. TYPE OF ELECTION (CHECK ONE)
 PRIMARY GENERAL SPECIAL CAUCUS

7. DATE OF ELECTION
11/3/2020

8. TYPE OF REPORT (CHECK ONE)
 INITIAL REPORT REPORT WITHIN 14 DAYS OF ELECTION ADDITIONAL REPORT OTHER

9. NAME OF CANDIDATE OR BALLOT MEASURE	10. OFFICE SOUGHT AND/OR POLITICAL SUBDIVISION	11. CHECK ONE		12. PAYEE NAME AND ADDRESS	13. NATURE AND PURPOSE OF EXPENDITURE	14. DATE MADE	15. AMOUNT
		SUPP	OPP				
Rich Finneran	Attorney General	✓		Helmi Henkin 40 N. Euclid Ave Apt 510 St. Louis MO 63108	Staff time/ phonebank	11/20/20	1.87
Deb Lavender	State Senate District 15	✓		Helmi Henkin 40 N. Euclid Ave Apt 510 St. Louis MO 63108	Staff time/ phonebank	11/20/20	1.87
Vicki Lorenz Englund	State Treasurer	✓		Helmi Henkin 40 N. Euclid Ave Apt 510 St. Louis MO 63108	Staff time/ phonebank	11/20/20	1.87
Alan Gray	State House District 75	✓		Helmi Henkin 40 N. Euclid Ave Apt 510 St. Louis MO 63108	Staff time/ phonebank	11/20/20	1.87
Andy Leighton	State House District 147	✓		Helmi Henkin 40 N. Euclid Ave Apt 510 St. Louis MO 63108	Staff time/ phonebank	11/20/20	1.87
Angie Schaefer	State House	✓		Helmi Henkin 40 N. Euclid Ave Apt 510 St. Louis MO 63108	Staff time/ phonebank	11/20/20	1.87
Ashley Aune	State House	✓		Helmi Henkin 40 N. Euclid Ave Apt 510 St. Louis MO 63108	Staff time/ phonebank	11/20/20	1.87
Barbara Phifer	State House District 90	✓		Helmi Henkin 40 N. Euclid Ave Apt 510 St. Louis MO 63108	Staff time/ phonebank	11/20/20	1.87

16. TOTAL EXPENDITURES MADE (TOTAL COLUMN 15) \$ **14.96**

17. VERIFICATION: I CERTIFY THAT THIS REPORT IS TRUE AND COMPLETE M.E.C. ID NO. _____

SIGNATURE OF PERSON MAKING THE EXPENDITURE(S) OR AN AUTHORIZED AGENT
Mallory K. S. G.

DATE
11/30/20



MISSOURI ETHICS COMMISSION
NON-COMMITTEE EXPENDITURE REPORT
 INSTRUCTIONS ON REVERSE SIDE

1. REPORT DATE 11/30/20	2. FUNCTION OF REPORT (CHECK ONE) <input type="checkbox"/> INDEPENDENT EXPENDITURE STATEMENT (S-1) OR <input checked="" type="checkbox"/> INTERNAL DISSEMINATION REPORT (S-2)	OFFICE USE ONLY
-----------------------------------	---	-----------------

3. NAME OF PERSON OR ENTITY MAKING EXPENDITURE(S)
NARAL Pro-Choice Missouri

4. MAILING ADDRESS
 ADDRESS: **1210 S. Vandeventer**
 CITY / STATE / ZIP: **St. Louis, MO 63110**

5. TELEPHONE NUMBER
314-531-8616

6. TYPE OF ELECTION (CHECK ONE)
 PRIMARY GENERAL SPECIAL CAUCUS

7. DATE OF ELECTION
11/3/2020

8. TYPE OF REPORT (CHECK ONE)
 INITIAL REPORT REPORT WITHIN 14 DAYS OF ELECTION ADDITIONAL REPORT OTHER

9. NAME OF CANDIDATE OR BALLOT MEASURE	10. OFFICE SOUGHT AND/OR POLITICAL SUBDIVISION	11. CHECK ONE		12. PAYEE NAME AND ADDRESS	13. NATURE AND PURPOSE OF EXPENDITURE	14. DATE MADE	15. AMOUNT
		SUPP	OPP				
Bill Otto	State House District 65		<input checked="" type="checkbox"/>	Helmi Henkin 40 N. Euclid Ave Apt 510 St. Louis MO 63108	Staff time/ phonebank	11/20/20	1.87
Bridget Walsh Moore	State House District 93		<input checked="" type="checkbox"/>	Helmi Henkin 40 N. Euclid Ave Apt 510 St. Louis MO 63108	Staff time/ phonebank	11/20/20	1.87
Doug Beck	State Senate District 1		<input checked="" type="checkbox"/>	Helmi Henkin 40 N. Euclid Ave Apt 510 St. Louis MO 63108	Staff time/ phonebank	11/20/20	1.87
Jacque Sample	State House District 44		<input checked="" type="checkbox"/>	Helmi Henkin 40 N. Euclid Ave Apt 510 St. Louis MO 63108	Staff time/ phonebank	11/20/20	1.87
James Shackelford	State House District 16		<input checked="" type="checkbox"/>	Helmi Henkin 40 N. Euclid Ave Apt 510 St. Louis MO 63108	Staff time/ phonebank	11/20/20	1.87
Jean Pretto	State House District 94		<input checked="" type="checkbox"/>	Helmi Henkin 40 N. Euclid Ave Apt 510 St. Louis MO 63108	Staff time/ phonebank	11/20/20	1.87
Judy Baker	State Senate District 19		<input checked="" type="checkbox"/>	Helmi Henkin 40 N. Euclid Ave Apt 510 St. Louis MO 63108	Staff time/ phonebank	11/20/20	1.87
Kari Chesney	State House District 50		<input checked="" type="checkbox"/>	Helmi Henkin 40 N. Euclid Ave Apt 510 St. Louis MO 63108	Staff time/ phonebank	11/20/20	1.87

16. TOTAL EXPENDITURES MADE (TOTAL COLUMN 15) \$ **14.96**

17. VERIFICATION: I CERTIFY THAT THIS REPORT IS TRUE AND COMPLETE M.E.C. ID NO. _____

SIGNATURE OF PERSON MAKING THE EXPENDITURE(S) OR AN AUTHORIZED AGENT
Mallon K. St...

DATE
11/30/2020



MISSOURI ETHICS COMMISSION
NON-COMMITTEE EXPENDITURE REPORT
 INSTRUCTIONS ON REVERSE SIDE

1. REPORT DATE 11/30/2020	2. FUNCTION OF REPORT (CHECK ONE) <input type="checkbox"/> INDEPENDENT EXPENDITURE STATEMENT (S-1) OR <input checked="" type="checkbox"/> INTERNAL DISSEMINATION REPORT (S-2)	OFFICE USE ONLY
------------------------------	---	-----------------

3. NAME OF PERSON OR ENTITY MAKING EXPENDITURE(S) NARAL Pro-Choice Missouri	
4. MAILING ADDRESS ADDRESS: 1210 S. Vandeventer CITY / STATE / ZIP: St. Louis, MO 63110	5. TELEPHONE NUMBER 314-531-8616
6. TYPE OF ELECTION (CHECK ONE) <input type="checkbox"/> PRIMARY <input checked="" type="checkbox"/> GENERAL <input type="checkbox"/> SPECIAL <input type="checkbox"/> CAUCUS	7. DATE OF ELECTION 11/3/2020
8. TYPE OF REPORT (CHECK ONE) <input type="checkbox"/> INITIAL REPORT <input type="checkbox"/> REPORT WITHIN 14 DAYS OF ELECTION <input checked="" type="checkbox"/> ADDITIONAL REPORT <input type="checkbox"/> OTHER	

9. NAME OF CANDIDATE OR BALLOT MEASURE	10. OFFICE SOUGHT AND/OR POLITICAL SUBDIVISION	11. CHECK ONE		12. PAYEE NAME AND ADDRESS	13. NATURE AND PURPOSE OF EXPENDITURE	14. DATE MADE	15. AMOUNT
		SUPP	OPP				
Keri Ingle	State House District 35	✓		Helmi Henkin 40 N. Euclid Ave Apt 510 St. Louis MO 63108	Staff time/ phonebank	11/20/20	1.87
Lauren Arthur	State Senate District 17	✓		Helmi Henkin 40 N. Euclid Ave Apt 510 St. Louis MO 63108	Staff time/ phonebank	11/20/20	1.87
Susan Schumway	State House District 108	✓		Helmi Henkin 40 N. Euclid Ave Apt 510 St. Louis MO 63108	Staff time/ phonebank	11/20/20	1.87
Tracy Grundy	State House District 102	✓		Helmi Henkin 40 N. Euclid Ave Apt 510 St. Louis MO 63108	Staff time/ phonebank	11/20/20	1.87
Trish Gunby	State House District 99	✓		Helmi Henkin 40 N. Euclid Ave Apt 510 St. Louis MO 63108	Staff time/ phonebank	11/20/20	1.87
Nicole Galloway	Governor	✓		Katie Greenstein 17914 Homestead Bluffs Wildwood MO 63005	Staff time/ phonebank	11/20/20	1.87
Yinka Faleti	Secretary of State	✓		Katie Greenstein 17914 Homestead Bluffs Wildwood MO 63005	Staff time/ phonebank	11/20/20	1.87
Trish Gunby	State House District 99	✓		Katie Greenstein 17914 Homestead Bluffs Wildwood MO 63005	Staff time/ phonebank	11/20/20	1.87

16. TOTAL EXPENDITURES MADE (TOTAL COLUMN 15) \$ 14.96

17. VERIFICATION: I CERTIFY THAT THIS REPORT IS TRUE AND COMPLETE M.E.C. ID NO. _____

SIGNATURE OF PERSON MAKING THE EXPENDITURE(S) OR AN AUTHORIZED AGENT: *Mallory L. Schuy* DATE: 11/30/2020



MISSOURI ETHICS COMMISSION
NON-COMMITTEE EXPENDITURE REPORT
 INSTRUCTIONS ON REVERSE SIDE

1. REPORT DATE 11/30/20	2. FUNCTION OF REPORT (CHECK ONE) <input type="checkbox"/> INDEPENDENT EXPENDITURE STATEMENT (S-1) OR <input checked="" type="checkbox"/> INTERNAL DISSEMINATION REPORT (S-2)	OFFICE USE ONLY
-----------------------------------	---	-----------------

3. NAME OF PERSON OR ENTITY MAKING EXPENDITURE(S)
NARAL Pro-Choice Missouri

4. MAILING ADDRESS
 ADDRESS: **1210 S. Vandeventer**
 CITY / STATE / ZIP: **St. Louis, MO 63110**

5. TELEPHONE NUMBER
314-531-8616

6. TYPE OF ELECTION (CHECK ONE)
 PRIMARY GENERAL SPECIAL CAUCUS

7. DATE OF ELECTION
11/3/2020

8. TYPE OF REPORT (CHECK ONE)
 INITIAL REPORT REPORT WITHIN 14 DAYS OF ELECTION ADDITIONAL REPORT OTHER

9. NAME OF CANDIDATE OR BALLOT MEASURE	10. OFFICE SOUGHT AND/OR POLITICAL SUBDIVISION	11. CHECK ONE		12. PAYEE NAME AND ADDRESS	13. NATURE AND PURPOSE OF EXPENDITURE	14. DATE MADE	15. AMOUNT
		SUPP	OPP				
Rich Finneran	Attorney General	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Katie Greenstein 17914 Homestead Bluffs Wildwood MO 63005	Staff time/ phonebank	11/20/20	1.87
Deb Lavender	State Senate District 15	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Katie Greenstein 17914 Homestead Bluffs Wildwood MO 63005	Staff time/ phonebank	11/20/20	1.87
Vicki Lorenz Englund	State Treasurer	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Katie Greenstein 17914 Homestead Bluffs Wildwood MO 63005	Staff time/ phonebank	11/20/20	1.87
Alan Gray	State House District 75	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Katie Greenstein 17914 Homestead Bluffs Wildwood MO 63005	Staff time/ phonebank	11/20/20	1.87
Andy Leighton	State House District 147	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Katie Greenstein 17914 Homestead Bluffs Wildwood MO 63005	Staff time/ phonebank	11/20/20	1.87
Angie Schaefer	State House	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Katie Greenstein 17914 Homestead Bluffs Wildwood MO 63005	Staff time/ phonebank	11/20/20	1.87
Ashley Aune	State House	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Katie Greenstein 17914 Homestead Bluffs Wildwood MO 63005	Staff time/ phonebank	11/20/20	1.87
Barbara Phifer	State House District 90	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Katie Greenstein 17914 Homestead Bluffs Wildwood MO 63005	Staff time/ phonebank	11/20/20	1.87

16. TOTAL EXPENDITURES MADE (TOTAL COLUMN 15) \$ **14.96**

17. VERIFICATION: I CERTIFY THAT THIS REPORT IS TRUE AND COMPLETE M.E.C. ID NO. _____

SIGNATURE OF PERSON MAKING THE EXPENDITURE(S) OR AN AUTHORIZED AGENT
Molly K. Shy

DATE
11/30/20



MISSOURI ETHICS COMMISSION
NON-COMMITTEE EXPENDITURE REPORT
 INSTRUCTIONS ON REVERSE SIDE

1. REPORT DATE 11/30/20	2. FUNCTION OF REPORT (CHECK ONE) <input type="checkbox"/> INDEPENDENT EXPENDITURE STATEMENT (S-1) OR <input checked="" type="checkbox"/> INTERNAL DISSEMINATION REPORT (S-2)	OFFICE USE ONLY
-----------------------------------	---	-----------------

3. NAME OF PERSON OR ENTITY MAKING EXPENDITURE(S) NARAL Pro-Choice Missouri	
4. MAILING ADDRESS ADDRESS: 1210 S. Vandeventer CITY / STATE / ZIP: St. Louis, MO 63110	5. TELEPHONE NUMBER 314-531-8616
6. TYPE OF ELECTION (CHECK ONE) <input type="checkbox"/> PRIMARY <input checked="" type="checkbox"/> GENERAL <input type="checkbox"/> SPECIAL <input type="checkbox"/> CAUCUS	7. DATE OF ELECTION 11/3/2020
8. TYPE OF REPORT (CHECK ONE) <input type="checkbox"/> INITIAL REPORT <input type="checkbox"/> REPORT WITHIN 14 DAYS OF ELECTION <input checked="" type="checkbox"/> ADDITIONAL REPORT <input type="checkbox"/> OTHER	

9. NAME OF CANDIDATE OR BALLOT MEASURE	10. OFFICE SOUGHT AND/OR POLITICAL SUBDIVISION	11. CHECK ONE		12. PAYEE NAME AND ADDRESS	13. NATURE AND PURPOSE OF EXPENDITURE	14. DATE MADE	15. AMOUNT
		SUPP	OPP				
Bill Otto	State House District 65	✓		Katie Greenstein 17914 Homestead Bluffs Wildwood MO 63005	Staff time/ phonebank	11/20/20	1.87
Bridget Walsh Moore	State House District 93	✓		Katie Greenstein 17914 Homestead Bluffs Wildwood MO 63005	Staff time/ phonebank	11/20/20	1.87
Doug Beck	State Senate District 1	✓		Katie Greenstein 17914 Homestead Bluffs Wildwood MO 63005	Staff time/ phonebank	11/20/20	1.87
Jacque Sample	State House District 44	✓		Katie Greenstein 17914 Homestead Bluffs Wildwood MO 63005	Staff time/ phonebank	11/20/20	1.87
James Shackelford	State House District 16	✓		Katie Greenstein 17914 Homestead Bluffs Wildwood MO 63005	Staff time/ phonebank	11/20/20	1.87
Jean Pretto	State House District 94	✓		Katie Greenstein 17914 Homestead Bluffs Wildwood MO 63005	Staff time/ phonebank	11/20/20	1.87
Judy Baker	State Senate District 19	✓		Katie Greenstein 17914 Homestead Bluffs Wildwood MO 63005	Staff time/ phonebank	11/20/20	1.87
Kari Chesney	State House District 50	✓		Katie Greenstein 17914 Homestead Bluffs Wildwood MO 63005	Staff time/ phonebank	11/20/20	1.87

16. TOTAL EXPENDITURES MADE (TOTAL COLUMN 15) \$ 14.96

17. VERIFICATION: I CERTIFY THAT THIS REPORT IS TRUE AND COMPLETE M.E.C. ID NO. _____

SIGNATURE OF PERSON MAKING THE EXPENDITURE(S) OR AN AUTHORIZED AGENT: *Malloy & Shy* DATE: 11/30/2020



MISSOURI ETHICS COMMISSION
NON-COMMITTEE EXPENDITURE REPORT
 INSTRUCTIONS ON REVERSE SIDE

1. REPORT DATE 11/30/2020	2. FUNCTION OF REPORT (CHECK ONE) <input type="checkbox"/> INDEPENDENT EXPENDITURE STATEMENT (S-1) OR <input checked="" type="checkbox"/> INTERNAL DISSEMINATION REPORT (S-2)	OFFICE USE ONLY
-------------------------------------	---	-----------------

3. NAME OF PERSON OR ENTITY MAKING EXPENDITURE(S)
NARAL Pro-Choice Missouri

4. MAILING ADDRESS ADDRESS: 1210 S. Vandeventer CITY / STATE / ZIP: St. Louis, MO 63110	5. TELEPHONE NUMBER 314-531-8616
---	--

6. TYPE OF ELECTION (CHECK ONE) <input type="checkbox"/> PRIMARY <input checked="" type="checkbox"/> GENERAL <input type="checkbox"/> SPECIAL <input type="checkbox"/> CAUCUS	7. DATE OF ELECTION 11/3/2020
--	---

8. TYPE OF REPORT (CHECK ONE)
 INITIAL REPORT REPORT WITHIN 14 DAYS OF ELECTION ADDITIONAL REPORT OTHER

9. NAME OF CANDIDATE OR BALLOT MEASURE	10. OFFICE SOUGHT AND/OR POLITICAL SUBDIVISION	11. CHECK ONE		12. PAYEE NAME AND ADDRESS	13. NATURE AND PURPOSE OF EXPENDITURE	14. DATE MADE	15. AMOUNT
		SUPP	OPP				
Keri Ingle	State House District 35	<input checked="" type="checkbox"/>		Katie Greenstein 17914 Homestead Bluffs Wildwood MO 63005	Staff time/ phonebank	11/20/20	1.87
Lauren Arthur	State Senate District 17	<input checked="" type="checkbox"/>		Katie Greenstein 17914 Homestead Bluffs Wildwood MO 63005	Staff time/ phonebank	11/20/20	1.87
Susan Schumway	State House District 108	<input checked="" type="checkbox"/>		Katie Greenstein 17914 Homestead Bluffs Wildwood MO 63005	Staff time/ phonebank	11/20/20	1.87
Tracy Grundy	State House District 102	<input checked="" type="checkbox"/>		Katie Greenstein 17914 Homestead Bluffs Wildwood MO 63005	Staff time/ phonebank	11/20/20	1.87

16. TOTAL EXPENDITURES MADE (TOTAL COLUMN 15) \$ **7.48**

17. VERIFICATION: I CERTIFY THAT THIS REPORT IS TRUE AND COMPLETE M.E.C. ID NO. _____

SIGNATURE OF PERSON MAKING THE EXPENDITURE(S) OR AN AUTHORIZED AGENT <i>Mallory K. Schumway</i>	DATE 11/30/2020
--	---------------------------