

MISSOURI ETHICS COMMISSION

1. REPORT DATE | 2. FUNCTION OF REPORT (CHECK ONE) | OFFICE USE ONLY |

1. REPORT DATE | 2. FUNCTION OF REPORT (CHECK ONE) | OFFICE USE ONLY |

1. REPORT DATE | 2. FUNCTION OF REPORT (CHECK ONE) | OFFICE USE ONLY |

1. REPORT DATE | 2. FUNCTION OF REPORT (CHECK ONE) | OFFICE USE ONLY |

1. REPORT DATE | 2. FUNCTION OF REPORT (CHECK ONE) | OFFICE USE ONLY |

1. REPORT DATE | 2. FUNCTION OF REPORT (CHECK ONE) | OFFICE USE ONLY |

1. REPORT DATE | 2. FUNCTION OF REPORT (CHECK ONE) | OFFICE USE ONLY |

1. REPORT DATE | 2. FUNCTION OF REPORT (CHECK ONE) | OFFICE USE ONLY |

1. REPORT DATE | 2. FUNCTION OF REPORT (CHECK ONE) | OFFICE USE ONLY |

2. FUNCTION OF REPORT (CHECK ONE) | OFFICE USE ONLY |

3. FUNCTION OF REPORT (CHECK ONE) | OFFICE USE ONLY |

3. FUNCTION OF REPORT (CHECK ONE) | OFFICE USE ONLY |

4. FUNCTION OF REPORT (CHECK ONE) | OFFICE USE ONLY |

5. FUNCTION OF REPORT (CHECK ONE) | OFFICE USE ONLY |

5. FUNCTION OF REPORT (CHECK ONE) | OFFICE USE ONLY |

5. FUNCTION OF REPORT (CHECK ONE) | OFFICE USE ONLY |

5. FUNCTION OF REPORT (CHECK ONE) | OFFICE USE ONLY |

5. FUNCTION OF REPORT (CHECK ONE) | OFFICE USE ONLY |

5. FUNCTION OF REPORT (CHECK ONE) | OFFICE USE ONLY |

5. FUNCTION OF REPORT (CHECK ONE) | OFFICE USE ONLY |

5. FUNCTION OF REPORT (CHECK ONE) | OFFICE USE ONLY |

5. FUNCTION OF REPORT (CHECK ONE) | OFFICE USE ONLY |

5. FUNCTION OF REPORT (CHECK ONE) | OFFICE USE ONLY |

5. FUNCTION OF REPORT (CHECK ONE) | OFFICE USE ONLY |

5. FUNCTION OF REPORT (CHECK ONE) | OFFICE USE ONLY |

5. FUNCTION OF REPORT (CHECK ONE) | OFFICE USE ONLY |

5. FUNCTION OF REPORT (CHECK ONE) | OFFICE USE ONLY |

5. FUNCTION OF REPORT (CHECK ONE) | OFFICE USE ONLY |

5. FUNCTION OF REPORT (CHECK ONE) |

5. FUNCTION OF REPOR

INSTRUCTIONS ON REVERSE SIDE					STATEMENT (S-1) OR SEP 1 3 2022 REPORT (S-2)			
3. NAME OF PERSON OF	Rec'd by email							
Gallo 4. MAILING ADDRESS	oway Villag	e Neig	hbor	hood Asso	ociation			
ADDRESS: 3417 S. Lone Pine Ave.						ONE NUMBER		
CITY/STATE/ZIP: Springfield, MO 65804					417-883-7134			
X PRIMARY GENERAL SPECIAL CAUCUS					7. DATE OF ELECTION 11/08/22			
8. TYPE OF REPORT (CH		/ITHIN 14 DA	YS OF ELE	CTION A	ADDITIONAL REPORT	OTHER	į	
9. NAME OF CANDIDATE OR BALLOT MEASURE	10. OFFICE SOUGHT AND/OR POLITICAL SUBDIVISION	11.CHECK ONE SUPP OPP	EXF 12. PA	HEDULE OF PENDITURES YEE NAME AND ADDRESS	13. NATURE AND PURPOSE OF EXPENDITURE	14. DATE MADE	15. AMOUNT	
Question 1	City of Springfield Missouri	X	Delivery Signs 40 W. Crystal Lake St. #100 Orlando, FL 32806		Yard Signs	9/2/22	\$2,350.00	
Question 1	City of Springfield Missouri	X	7409 Te	nt Company rry Street ith, AR 72916	T-Shirts	9/22/22	\$1,816.50	
// 								
						·		

16. TOTAL EXPENDITURES MADE (TOTAL COLUMN 15)						\$	\$4,166.50	
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 Wendy Huschl?						DATE 9/12/22		
	- 4 ' '							