



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

N220105

1. REPORT DATE 7/18/24	2. FUNCTION OF REPORT (CHECK ONE) <input checked="" type="checkbox"/> INDEPENDENT EXPENDITURE STATEMENT (S-1) <input type="checkbox"/> INTERNAL DISSEMINATION REPORT (S-2) OR <input type="checkbox"/> INDEPENDENT EXPENDITURE STATEMENT (S-1) <input type="checkbox"/> INTERNAL DISSEMINATION REPORT (S-2)	OFFICE USE ONLY Received by email 7/17/24
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3. NAME OF PERSON OR ENTITY MAKING EXPENDITURE(S)
QUALITY SCHOOLS COALITION

4. MAILING ADDRESS
 ADDRESS: **1100 MAIN ST FLOOR 4**
 CITY / STATE / ZIP: **KANSAS CITY, MO 64105**

5. TELEPHONE NUMBER
573-255-2445

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

7. DATE OF ELECTION
AUGUST 6, 2024

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 SUPP OPP	SCHEDULE OF EXPENDITURES 12. PAYEE NAME AND ADDRESS	13. NATURE AND PURPOSE OF EXPENDITURE	14. DATE MADE	15. AMOUNT
MARLENE TERRY	STATE REP. DISTRICT 066	✓	Ali Cubba 4673 S. Springs Ave. Apt.	Canvassing	7/16/24	50.00
CHANTELL NIXON-CLARK	STATE SENTATE DISTRICT 13	✓	DAESHA BECTON 1810 Grape Ave. St. Louis, Mo. 63136	PHONE BANKING	7/15/2024	298.35
CHANTELL NIXON-CLARK	STATE SENTATE DISTRICT 13	✓	SANDI BOWERS 3056 Bellerive Dr. St. Louis, Mo. 63121	PHONE BANKING	7/15/2024	913.15
CHANTELL NIXON-CLARK	STATE SENTATE DISTRICT 13	✓	DAHANN BOWERS 1116 Indian Circle Dr. Apt D St. Louis, Mo. 63132	PHONE BANKING	7/15/2024	\$258.70
MARLENE TERRY	STATE REP. DISTRICT 066	✓	Lindsey Forsythe 2620 Louisiana Ave. St. Louis, Mo. 63118	Canvassing	7/16/2024	75.00
MARLENE TERRY	STATE REP. DISTRICT 066	✓	Darrell Huffman 4671 S. Springs Ave. Apt. 3	Canvassing	7/16/2024	75.00
MARLENE TERRY	STATE REP. DISTRICT 066	✓	Robert Davis 8203 Monroe Ave. St. Louis, Mo. 63114	Canvassing	7/16/2024	50.00

16. TOTAL EXPENDITURES MADE (TOTAL COLUMN 15) \$ **1,720.20**

17. VERIFICATION: I CERTIFY THAT THIS REPORT IS TRUE AND COMPLETE M.E.C. ID NO. **L210363**

SIGNATURE OF PERSON MAKING THE EXPENDITURE(S) OR AN AUTHORIZED AGENT
Dean Johnson

DATE
7/18/24