



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

N240156

Received by email

1. REPORT DATE 07/21/2024	2. FUNCTION OF REPORT (CHECK ONE) <input checked="" type="checkbox"/> INDEPENDENT EXPENDITURE STATEMENT (S-1) OR <input type="checkbox"/> INTERNAL DISSEMINATION REPORT (S-2)	OFFICE USE ONLY 7/21/24
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3. NAME OF PERSON OR ENTITY MAKING EXPENDITURE(S) Rhonda Denman	
4. MAILING ADDRESS ADDRESS: 1067 Madison 335 CITY / STATE / ZIP: Fredericktown MO 63645	5. TELEPHONE NUMBER 5737839739
6. TYPE OF ELECTION (CHECK ONE) <input checked="" type="checkbox"/> PRIMARY <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIAL <input type="checkbox"/> CAUCUS	7. DATE OF ELECTION August 6, 2024
8. TYPE OF REPORT (CHECK ONE) <input checked="" type="checkbox"/> INITIAL REPORT <input type="checkbox"/> REPORT WITHIN 14 DAYS OF ELECTION <input 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				
Rhonda Denman, Madison County Public Administrator	Madison County Public Administrator	<input checked="" type="checkbox"/>		Democrat News 131 S Main Fredericktown MO 63645	Campaign yard signs	06/07/2024	360.46
Rhonda Denman Madison County Public Administrator	Madison County Public Admin	<input checked="" type="checkbox"/>		Democrat News 131 S. Main Fredericktown MO 63645	Banner	06/13/2024	48.06
Rhonda Denman Madison County Public Administrator	Madison Count Public Admin	<input checked="" type="checkbox"/>		SAMS CLUB	Gum/Candy	06/26/2024	29.61
Rhonda Denman Madison County Public Administrator	Madison County Public Admin	<input checked="" type="checkbox"/>		Democrat News 131 S. Main Fredericktown MO 63645	Push Cards	07/03/2024	120.15

16. TOTAL EXPENDITURES MADE (TOTAL COLUMN 15) \$ 558.28

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: *Rhonda Denman* DATE: 07/21/2024