CIDIDIM



MISSOURI ETHICS COMMISSION NON-COMMITTEE EXPENDITURE REPORT

INDEPENDENT EXPENDITURE
STATEMENT (S-1)
OR
Receiv

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

Ω	05	
	OHFICE	9° 2025
		4023

INSTRUCT	TION	relived by Email				
3. NAME OF PERSON OR $AFL-C$:NDITURE(S)				
4. MAILING ADDRESS ADDRESS: 815 16	Sto Storest	. 1/./4/		5. TELEPHONE NUMBER		
CITY / STATE / ZIP: 1/00	7-500	٥				
TYPE OF ELECTION (C	CHECK ONÉ) GENERAL [SPECIAL	CAUCUS	7. DATE OF ELECTION	25	
B. TYPE OF REPORT (CH INITIAL REPO		/ITHIN 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 12	SCHEDULE OF EXPENDITURES 2. PAYEE NAME AND ADDRESS	13. NATURE AND PURPOSE OF EXPENDITURE	14. DATE MADE	15. AMOUNT
	EL		# 7	MAC	H	
•			·			
16. TOTAL EXPEND	······································		***************************************		\$	11,328-00
17. VERIFICATION:		. ,		PLETE M.E.	.C. ID NO	
SIGNATURE OF PERSON	12/59/36					

9. Name of Candidate or Ballot Measure	10. Office Sought And Subdivision		12. Payee Name and Address	13. Nature and Purpose of Expenditure		15. Amount
SOS Ballot Title House Bill 1	Statewide	Oppose	Mosaic 4801 Viewpoint Place Cheverly, MD 20781	Member Education	10/28/2025	\$11,328.00
					Total	11,328.00