

N250199



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

|                               |                                                                                                                                                                                     |                                                            |
|-------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| 1. REPORT DATE<br><br>7/16/26 | 2. FUNCTION OF REPORT (CHECK ONE)<br><input checked="" type="checkbox"/> INDEPENDENT EXPENDITURE STATEMENT (S-1) OR<br><input type="checkbox"/> INTERNAL DISSEMINATION REPORT (S-2) | OFFICE USE ONLY<br><b>JUL 16 2026</b><br>Received by Email |
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| 3. NAME OF PERSON OR ENTITY MAKING EXPENDITURE(S)<br>Abortion Action Missouri Foundation                                                                                                                                 |                                          |
| 4. MAILING ADDRESS<br>ADDRESS: 3735 Connecticut Street<br>CITY / STATE / ZIP: Saint Louis, MO 63116                                                                                                                      | 5. TELEPHONE NUMBER<br><br>314-571-9169  |
| 6. TYPE OF ELECTION (CHECK ONE)<br><input type="checkbox"/> PRIMARY <input checked="" type="checkbox"/> GENERAL <input type="checkbox"/> SPECIAL <input type="checkbox"/> CAUCUS                                         | 7. DATE OF ELECTION<br>November 3rd 2026 |
| 8. TYPE OF REPORT (CHECK ONE)<br><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 |                                                           |                                       |               |            |
| Amendment 3                            |                                                |               | ✓   | The Copy Shoppe 1446 E Sunshine St, Springfield, MO 65804 | Printing                              | 5/26/2026     | \$270.20   |
| Amendment 3                            |                                                |               | ✓   | FedEx 8425 State Line Rd Kansas City, MO 64114            | Printing                              | 5/27/2026     | \$48.80    |
| Amendment 3                            |                                                |               | ✓   | USPS 3198 S Grand Blvd, Saint Louis, MO 63118             | Postage                               | 5/28/2026     | \$12.30    |
|                                        |                                                |               |     |                                                           |                                       |               |            |
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| 16. TOTAL EXPENDITURES MADE (TOTAL COLUMN 15) \$ 331.30                                      |                  |
| 17. VERIFICATION: I CERTIFY THAT THIS REPORT IS TRUE AND COMPLETE M.E.C. ID NO. N250199      |                  |
| SIGNATURE OF PERSON MAKING THE EXPENDITURE(S) OR AN AUTHORIZED AGENT<br><br>Mariceli Alegria | DATE<br>07/16/26 |