

Missouri Ethics Commission COMMITTEE DISCLOSURE REPORT COVER PAGE

1. DATE OF REPORT	OFFICE USE ONLY
2/24/2022	

COMMITTEE DISCLOSURE RE		PAGE	2/24/2022	
M.E.C. ID NO.	C211676			
INSTRUCTIONS ON REVERSE SIDE				
2. FULL NAME OF COMMITTEE				
Francis Howell Families				
3. COMMITTEE MAILING ADDRESS		4. CC	MMITTEE TELEPHO	NE NUMBER
PO Box 1672				
CITY / STATE / ZIP			(636) 578-7947	
St. Charles MO 63302				
5. TREASURER'S NAME				
Vivian Gontarz				
6. TREASURER'S MAILING ADDRESS		7. TR	EASURER'S TELEPH	ONE NUMBER
PO Box 1672		НОМІ	E: (636) 578-7947	
CITY / STATE / ZIP		WOR	K:	
St. Charles MO 63302				
8. DEPUTY TREASURER'S NAME CHECK IF NO DE	PUTY TREASURE	R		
9. DEPUTY TREASURER'S MAILING ADDRESS		10. D	EPUTY TREASURER	'S TELEPHONE NUMBER
		ном	E:	
CITY / STATE / ZIP		WOR	K:	
11. DATE OF ELECTION 12	. TYPE OF ELECT	ON (CHECK ONE	:)	
4/5/2022	O PR	IMARY	O GENERAL	O SPECIAL
13. TIME PERIOD COVERED BY THIS STATEMENT				
FROM 1/1/2022	THRC	UGH 2/19/2022		
14. CANDIDATE COMMITTEES ONLY: LIST CANDIDATE'S NA ADDRESS, PHONE, OFFICE SOUGHT, POLITICAL SUBDIVISI POLITICAL PARTY	ON AND	COMMITTEE QUAR Jan 15 8 DAYS BEFORE 30 DAYS AFTER EL TERMINATION (A SEMIANNUAL DEB' Jan 15 ANNUAL SUPPLEM	Apr 15 ECTION TTACH FORM CO-3) REPORT Jul 15	Jul 15
CHECK IF INCUMBENT		OTHER AMENDE	D 40 Day Before G	eneral Municipal Ele
_		AMENDING PREVIO	OUS REPORT DATED	
REPUBLICAN DEMOCRAT Z	_	February		, 20 22
16. COMMITTEE TREASURER'S SIGNATURE	17. C <i>l</i>	ANDIDATE'S SIGNA	TURE (CANDIDATE	COMMITTEES ONLY)
I CERTIFY THAT THIS REPORT, COMPRISED OF THIS CO PAGE AND ALL ATTACHED FORMS, IS COMPLETE, TRUE ACCURATE.	AND PA		REPORT, COMPRISE CHED FORMS, IS COM	
ELECTRONICALLY FILED Feb 24 2022 5:09PM		ELECTRONICALL	Y FILED Feb 24 20)22 5:09PM
TREASURER'S SIGNATURE		CANDIDATE'S S	GNATURE	



OFFICE	USE	ONLY

MEC ID #:_____

This form is to be used when amending a previously filed Campaign Finance Disclosure Report.	
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1. Name of Committee

2. Date of Report

Francis Howell Families

2/24/2022

3. Type and Date of Previously Filed Report

02/24/2022 AMENDED 40 Day Before General Municipal Election-4/5/2022

4. Reason for Amendment

I am amending the Direct Expenditure Report, Part A to include additional money spent for printed material to support candidates Adam Bertrand and Randy Cook. I am adding \$1049.26 of expenditures for printed materials to each candidate's figure.

5. Amendment Detail

View Supplemental Form(s)

(09-10) (AMD-EXP)



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C211676

	MEC ID #:	
5. Amendment Detail - Continued		
Direct Expenditure for a Candidate Added-Randy Cook		
Direct Expenditure for a Candidate Added-Adam Bertrand		
Direct Expenditure for a Candidate Added-Randy Cook		
Direct Expenditure for a Candidate Added-Adam Bertrand		
Direct Expenditure for a Candidate Added-Randy Cook		

(09-10) (AMD-EXP)



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C211676 MEC ID #:_____

E. Amandment Datail. Continued	
5. Amendment Detail - Continued	
Direct Expenditure for a Candidate	
Direct Expenditure for a Candidate Added-Adam Bertrand	
Tradea Tradiii Belletaria	

(09-10) (AMD-EXP)



Missouri Ethics Commission REPORT SUMMARY

Instructions on Reverse Side

Name of Committee

Francis Howell
Families

Date of Report

Office Use Only

2/24/2022

		B. This Calendar Yr		l	
Receipts	A. This Period	or Election Cycle	Beginning and Ending		
Total Receipts For This Election Previously Reported		\$ 8,189.87			
All Monetary Contributions Received This Period	\$ 12,840.00		Money On Hand		
3. All Loans Received This Period	+ 0.00		money on rial	TG .	
Miscellaneous Receipts This Period	+ 0.00		24. Money On Hand at the beginning of this reporting period (Including funds	\$ 1,851.10	
 Subtotal Monetary Receipts This Period (Sum 2A + 3A + 4A) 	\$ 12,840.00		in depository, cash, savings accounts and all other investments)	Ψ 1,631.10	
 In-kind Contributions Received This Period 	+ 413.31		25. Monetary Receipts this Period	+ 12 040 00	
7. Total All Receipts This Period (Sum 5A + 6A)	\$ 13,253.31		(From Item 5 - this page)	+ 12,840.00	
 Total All Receipts This Election (Sum 1B + 7A) 		\$ 21,443.18	^{26.} Monetary Disbursements Made This Period (Sum 10 + 16A + 23)	- 2,414.51	
Expenditures	A. This Period	B. This Calendar Yr or Election Cycle	a) Disbursements By Check \$2,414.51 b) Disbursements By Cash \$0.00	- 2,414.51	
Total Expenditures for this election previously reported		\$ 1,892.90	27. Money On Hand at the close of this reporting period	\$ 12,276.59	
 Expenditures made by cash or check this period 	\$ 2,414.51		(SUM 24 + 25 - 26)	12,270.33	
In-Kind Expenditures made this period	+ 0.00				
 Expenditures incurred this period (not including loans) including payments made by credit card (line 17 CD3) 	+ 0.00		Indebtednes	S	
 Total All expenditures made this period (Sum 10A + 11A + 12A) Including payments made by Credit Card (line 17 CD3) 	\$ 2,414.51		28. Outstanding Indebtedness at the beginning of this period	\$ 0.00	
14. Total Expenditures This Election (Sum 9B + 13A)		\$ 4,307.41	29. Loans Received This Period	+ 0.00	
Contributions Made	A. This Period	B. This Calendar Yr or Election Cycle	Loans Received This Period	+ 0.00	
15. Total Contributions Made For This Election Previously Reported16.		\$ 3,000.00	30. A. New Expenditures Incurred This Period (include payments by Credit Card (Line 17 CD3)	+ 0.00	
All Contributions Made This Period (25A or 25B of CD3)	0.00	← Cash/Check ← Credit Card	B. New Contributions Made by Credit Card (Line 25B CD3)	+ 0.00	
17. All In-Kind Contributions Made This Period	+ 0.00	, , , , , , , , , , , , , , , , , , , ,	31.		
18. Total Contributions Made This Period (Sum 16A + 17A)	\$ 0.00		Payments Made on Loans This Period	- 0.00	
19. Total All Contributions Made This Election (Sum 15B + 18A)		\$ 3,000.00	32. Debt Forgiven on Loans This Period	- 0 00	
Other Disbursements	A. This Period	B. This Calendar Yr or Election Cycle	Debt Forgiver on Loans This Feriod	- 0.00	
Funds Used For Paying Loans This Period Including Credit Card Payments	+ 0.00		33. Payments Made This Period on Expenditures Incurred in Previous	- 0.00	
Payments This Period on Prev Reported Expend Incurred (Paid by Cash/Check Only)	+ 0.00		Period (Paid by Cash/Check Only) (Line 21 this page)	- 0.00	
22. Any Miscellaneous Disbursement Not Reported Elsewhere	+ 0.00		34. Total Indebtedness at the Close of This Reporting Period (Sum 28 + 29 +	\$ 0.00	
23. Total Other Disbursements This Period (Sum 20A + 21A + 22A)	\$ 0.00		30A + 30B - 31 - 32 - 33)	\$ U.UU	
MO 200 4244 (4 44)				00.0	



MISSOURI ETHICS COMMISSION **CONTRIBUTIONS AND LOANS RECEIVED**

INSTRUCTIONS ON REVERSE SIDE

OFFICE USE ONLY

RFROM COMMITTEE REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN 500 TO A COMMITTEE MONETARY OR INMINION	1. NAME OF COMMITTEE	2. REPORT DATE	
RFROM COMMITTEE REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN 500 TO A COMMITTEE MONETARY OR INMINION	Francis Howell Families	2/24/2022	
MORE THAN \$100 TO A COMMITTEE. AGGREGATE TO DATE	A. ITEMIZED CONTRIBUTIONS RECEIVED	4. DATE RECEIVED	5. AMOUNT RECEIVED
3. NAME. ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) DATE OR IN-KINO) MAME: ADDRESS:	FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING		,
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12. TOTAL ANONYMOUS CONTRIBUTIONS RECEIVED FROM PERSON GIVING \$25 OR LESS \$ 0.00 13. TOTAL MONETARY CONTRIBUTIONS RECEIVED FROM PERSONS GIVING \$100 OR LESS \$ 840.00 14. TOTAL IN-KIND CONTRIBUTIONS RECEIVED FROM PERSONS (NOT COMMITTEES) GIVING \$100 OR LESS \$ 0.00 C. LOANS RECEIVED 16. DATE RECEIVED RECEIVED RECEIVED RECEIVED RECEIVED 17. AMOUNT OF LOAN (IF MORE THAN \$100 ATTACH CD-1B) NAME: ADDRESS: CITY / STATE: \$ 17. AMOUNT OF LOAN (IF MORE THAN \$100 ATTACH CD-1B) NAME: ADDRESS: CITY / STATE: \$ 18. SUBTOTAL: LOANS THIS PAGE (SUM COLUMN 17) \$ 0.00 19. SUBTOTAL: LOANS THIS PERIOD (SUM 18 + 19) \$ 0.00 20. TOTAL: ALL IN-KIND CONTRIBUTIONS (SUM 10 + 14) \$ 413.31 22. TOTAL: ALL MONETARY CONTRIBUTIONS (SUM 9, 11, 12 & 13) \$ 12,840.00 23. MONETARY CONTRIBUTIONS & LOANS RECEIVED REQUIRING A RECORD OF NAME & ADDRESS (SUM 9, 13 & 20) \$ 12,840.00	· · · · · · · · · · · · · · · · · · ·	M CD1A	
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### C. LOANS RECEIVED 16. DATE RECEIVED 17. AMOUNT OF LOAN (IF MORE THAN \$100 ATTACHED PAGES) **CITY / STATE:** **ADDRESS:** **CITY / STATE:** **ADDRESS:** **CITY / STATE:** **BUBTOTAL: LOANS THIS PAGE (SUM COLUMN 17) 19. SUBTOTAL: LOANS FROM ANY ATTACHED PAGES 20. TOTAL: LOANS THIS PERIOD (SUM 18 + 19) 21. TOTAL: ALL IN-KIND CONTRIBUTIONS (SUM 10 + 14) 22. TOTAL: ALL MONETARY CONTRIBUTIONS (SUM 9, 11, 12 & 13) 23. MONETARY CONTRIBUTIONS & LOANS RECEIVED REQUIRING A RECORD OF NAME & ADDRESS (SUM 9, 13 & 20) **TOTAL SUBTOTAL SUBT	14. TOTAL IN-KIND CONTRIBUTIONS RECEIVED FROM PERSONS (NOT COMMITTEES) GIVING	G \$100 OR LESS	Φ
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	22. TOTAL: ALL MONETARY CONTRIBUTIONS (SUM 9, 11, 12 & 13)		
	23. MONETARY CONTRIBUTIONS & LOANS RECEIVED REQUIRING A RECORD OF NAME & AL	DDRESS (SUM 9, 13 & 20)	\$ 12,840.00



MISSOURI ETHICS COMMISSION CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE

Francis Howell Families

DATE

2/24/2022

INSTRUCTIONS

PURPOSE: The purpose of the Contributions Received supplement is to provide a printed outline for attaching additional pages to Form CD1 (Contributions Received). This form should be used as additional space for reporting persons contributing more than \$100 and for committee contributions. This form may be reproduced as needed.

Total all itemized contributions at the bottom of the page and carry to item 7 (Subtotal: Itemized Contributions From Any Attached Pages) on Form CD-1.

If further information is needed concerning reporting itemized expenditures, see Form CD-1 Instructions.

If further informat	tion is needed concerning reporting itemized expenditures, see Form C	CD-1 Instructions.	
FROM COMMITTE MORE THAN \$100 3. NAME, ADDRESS	RIBUTIONS RECEIVED EES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING TO A COMMITTEE. AND OCCUPATION (LIST COMMITTEES FIRST)	4. DATE RECEIVED AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
NAME: ADDRESS: CITY / STATE: EMPLOYER: COMMITTEE:	Kirk Wolf 305 Willowpointe Drive St Charles MO 63304 self software developer	1/10/2022 \$ 5,787.39	\$ 4,000.00 MONETARY IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: COMMITTEE:	Maria Winstead PO Box 725 Chesterfield MO 63006 Bankers Life and Casualty insurance agent	1/19/2022 \$ 1,000.00	\$ 1,000.00 MONETARY IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: COMMITTEE:	Chris Knauper 5852 Hidden Creek Drive St Charles MO 63304 Midibeacon Engineer	1/21/2022 \$ 300.00	\$ 100.00 MONETARY IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: COMMITTEE:	Katie Rash 419 Park Charles Blvd S St Peters MO 63376 none homemaker	1/21/2022 \$ 194.57	\$ 100.00 MONETARY IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: COMMITTEE:	Kelly Brazil 601 Stone Ridge Lane Augusta MO 63332 self life and career coach	1/21/2022 \$ 300.00	\$ 200.00 MONETARY IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: COMMITTEE:	Vivian Gontarz 525 Lexington Landing Dr St Charles MO 63303 retired retired	\$ 4,231.00	\$ 4,000.00 MONETARY IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: COMMITTEE:	Adam Wolf 363 Carriage Trail Court OFallon MO 63368 Automation and Control Concepts Engineer	1/21/2022 \$ 200.00	\$ 200.00 MONETARY IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: COMMITTEE:	Jeanine Wolf 305 Willowpointe Drive St Charles MO 63304 retired retired secretary	1/21/2022 \$ 383.31	\$ 383.31 MONETARY IN-KIND
COMMITTEE:	D CONTRIBUTIONS TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS EDOM ANY ATTA		<u></u>

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE

Francis Howell Families

DATE

2/24/2022

INSTRUCTIONS

PURPOSE: The purpose of the Contributions Received supplement is to provide a printed outline for attaching additional pages to Form CD1 (Contributions Received). This form should be used as additional space for reporting persons contributing more than \$100 and for committee contributions. This form may be reproduced as needed.

Total all itemized contributions at the bottom of the page and carry to item 7 (Subtotal: Itemized Contributions From Any Attached Pages) on Form CD-1.

If further information is needed concerning reporting itemized expenditures, see Form CD-1 Instructions.

If further information is needed concerning reporting itemized expenditures, see Form CD-1 Instructions.						
A. ITEMIZED CONT	RIBUTIONS RECEIVED	4. DATE RECEIVED	5. AMOUNT RECEIVED			
FROM COMMITT	EES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING		(CHECK IF MONETARY			
MORE THAN \$10	AGGREGATE TO DATE	OR IN-KIND)				
NAME:	S AND OCCUPATION (LIST COMMITTEES FIRST)	DATE				
ADDRESS:	Kirk Wolf		\$ 30.00			
CITY / STATE:	305 Willowpointe Drive	1/31/2022	Ψ			
EMPLOYER:	St Charles MO 63304 self software developer		MONETARY			
COMMITTEE:	Sell Soltware developer	\$ 5,817.39	IN-KIND			
NAME:						
ADDRESS:	Stephen Goetze	2/4/2022	\$ 1,000.00			
CITY / STATE:	191 Rock Harbor Road	2/4/2022	·			
EMPLOYER:	Orleans MA 02653 self software developer	_	✓ MONETARY			
COMMITTEE:	BOIL BOILMARC MOVELOPEL	\$ 1,000.00	☐ IN-KIND			
NAME:						
ADDRESS:	Penny Henke		\$ 1,000.00			
CITY / STATE:	770 Meadow Cliff Drive	2/15/2022	·			
EMPLOYER:	St Charles MO 63303 retired retired	C 1 100 00	✓ MONETARY			
COMMITTEE:		\$ 1,100.00	☐ IN-KIND			
NAME:						
ADDRESS:	Becky Main	1 /01 /0000	\$ 200.00			
CITY / STATE:	5 Birch Tree Lane	1/21/2022	·			
EMPLOYER:	St Charles MO 63365 self interior design	Ф 000 00	✓ MONETARY			
COMMITTEE:		\$ 200.00	☐ IN-KIND			
NAME:						
ADDRESS:	Jeanette Wipfler		\$ 50.00			
CITY / STATE:	417 Candlewick Court St Peters MO 63376	1/8/2022				
EMPLOYER:	retired retired	_	✓ MONETARY			
COMMITTEE:		\$ 120.00	IN-KIND			
NAME:						
ADDRESS:	M Jane Puszkar	1 /4 /0000	\$ 150.00			
CITY / STATE:	16 Spring Mill Woods Ct St Charles MO 63303	1/4/2022				
EMPLOYER:	retired retired	•	✓ MONETARY			
COMMITTEE:		\$ 150.00	☐ IN-KIND			
NAME:						
ADDRESS:			\$			
CITY / STATE:						
EMPLOYER:		¢	MONETARY			
COMMITTEE:		\$	☐ IN-KIND			
NAME:						
ADDRESS:			\$			
CITY / STATE:						
EMPLOYER:		\$	MONETARY			
COMMITTEE:		Ψ	☐ IN-KIND			
TOTAL: ITEMIZED CONTRIBUTIONS						
(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)						

	MISSOURI ETHICS COMMISSION EXPENDITURES AND CONTRIBUTIONS MADE Instructions on Reverse Side
Macccx	instructions on reverse olde

Office Use Only

Name of Committee		2. Report Date		
Francis Howell Families		2/24/2022		
A. Expenditures of \$100 or Less by Category (List Payments to Campaign Workers in Section B Below)	Amount Paid or Incurred This Period			
3. Category of Expenditure			+-	
View Supplemental Form(s)			₩	
			<u> </u>	
5. Subtotal: Non-Itemized Expenditures This Page (Sum Column	4)		\$	0.00
Subtotal: Non-Itemized Expenditures Any Attached Pages			+	169.99
7. Total: Non-Itemized Expenditures This Period (Sum 5 + 6)		T -	\$	169.99
B. Itemized Expenditures All Over \$100		10. Purpose - (If Payment was to a		
And All Payments To Campaign Workers 8. Name and Address of Recipient	9. Date	Campaign Worker, Show Aggregate Paid)	11.	Amount This Period
Name:			\$	
Address:				Paid
City / State:				Incurred
Name:			\$	
Address: View Supplemental Form(s)				Paid
City / State:				Incurred
Name:			\$	
Address:				Paid
City / State:			$oxed{\Box}$	Incurred
12. Subtotal: This Page (Sum Column 11)			\$	2,244.52
13. Subtotal: Any Attached Pages			+	0.00
14. Total: Itemized Expenditures This Period (Sum 12 + 13)			\$	2,244.52
15. Total: Monetary Expenditures This Period (Sum 7 + 14)			\$	2,414.51
16. Amount of Line 15 Above which was Paid Out This Period			\$	2,414.51
17. Amount of Line 15 Which Were Expenditures Incurred This Pe	eriod Including Payments	Made by Credit Cards	\$	0.00
18. If Committee Made Any In-Kind Expenditures This Period, List	Amount		\$	0.00
19. Funds Used For Paying Loans/Credit Cards This Period (Attack	ch Form CD1B - amount go	oes to Line 5 / Part II)	\$	0.00
C. Contributions Made (Regardless of Amount)		21. Date		22. Amount
20. Name and Address of Candidate or Committee			Φ.	
Name:			\$	
Address:				Monetary
City / State:			╬	In-Kind
Name: Address:			₽	Manatani
City / State:			H	Monetary In-Kind
Name:			╬	III-NIIIU
Address:			ľ	Monetary
City / State:			H	In-Kind
23. Subtotal: This Page (Sum Column 22)			\$	
24. Subtotal: Any Attached Pages			\$	0.00
21. Subtotal. Ally Attached Lages		A. By Cash / Check	\$	0.00
25. Total: Monetary Contributions Made This Period		B. By Credit Card	\$	0.00
26. If Committee Made Any Loans This Period, List Amount			<u>ψ</u> \$	0.00
27. Total: All Monetary Contributions and Loans Made This Perior	\$	0.00		
28. Total: In-Kind Contributions Made This Period, List Amount	~ (Jan 20 1 20)		\$	0.00
MO 300-1315 (1-10)			Ψ	0.00 Form CD3

OFFICE USE ONLY

NAME OF COMMITTEE DATE Francis Howell Families 2/24/2022 **EXPENDITURES OF \$100 OR LESS BY CATEGORY** AMOUNT PAID OR (LIST PAYMENTS TO CAMPAIGN WORKERS IN SECTION B ON FORM CD3 OR USE FORM CD3 SUP B) INCURRED THIS PERIOD CATEGORY OF EXPENDITURE Credit Card Service charge 98.40 \$ printing 21.59 \$ banner fee 50.00 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ TOTAL: ITEMIZED EXPENDITURES THIS PAGE (CARRY TO ITEM 13. "SUBTOTAL: ANY ATTACHED PAGES" ON FORM CD-3) \$



MISSOURI ETHICS COMMISSION ITEMIZED EXPENDITURES OVER \$100 SUPPLEMENTAL FORM

\cap FI		USE	\cap NI	ıv
011	ICL	OOL	OIV	

NAME OF COMMITTEE REPORT DATE		REPORT DATE		
			2/24/2022	
AND ALL	ED EXPENDITURES ALL OVER \$100 PAYMENTS TO CAMPAIGN WORKERS DRESS OF RECIPIENT	DATE	PURPOSE - (IF PAYMENT WAS TO A CAMPAIGN WORKER, SHOW AGGREGATE PAID)	AMOUNT THIS PERIOD
ADDRESS:	Thomson Printing 601 N Kingshighway St Charles MO 63301	1/4/2022	printing \$	\$ 183.52 PAID 180.52 INCURRED
ADDRESS:	US Postal Service 1890 First Capitol Drive St Charles MO 63301	1/4/2022	PO Box Lease	\$ 146.00 PAID INCURRED
ADDRESS:	Magazine Network 754 Spirit 40 Park Drive Chesterfield MO 63005	2/10/2022	ad in magazine	\$ 995.00 PAID 995.00
ADDRESS:	Survey St Louis 320 Monroe Street St Charles MO 63301	2/14/2022	printing \$	\$ 920.00 PAID 920.00 INCURRED
NAME: ADDRESS: CITY / STATE:			\$	\$ PAID INCURRED
NAME: ADDRESS: CITY / STATE:			\$	\$ PAID INCURRED
NAME: ADDRESS: CITY / STATE:			\$	\$ PAID INCURRED
NAME: ADDRESS: CITY / STATE:			\$	\$ PAID INCURRED
NAME: ADDRESS: CITY / STATE:			\$	\$ PAID INCURRED
NAME: ADDRESS: CITY / STATE:			\$	\$ PAID INCURRED
NAME: ADDRESS: CITY / STATE:			\$	\$ PAID INCURRED
NAME: ADDRESS: CITY / STATE:			\$	\$ PAID INCURRED
NAME: ADDRESS: CITY / STATE:			\$	\$ PAID INCURRED
NAME: ADDRESS: CITY / STATE:			\$	\$ PAID INCURRED
NAME: ADDRESS: CITY / STATE:			\$	\$ PAID INCURRED
	MIZED EXPENDITURES ALL OVER \$100 AND ALL PARRY TO ITEM 13. "SUBTOTAL: ANY ATTACHED PAGE		N WORKERS	\$



MISSOURI ETHICS COMMISSION DIRECT EXPENDITURE REPORT

INSTRUCTIONS ON REVERSE SIDE

TRECENT	
. NAME OF COMMITTEE	REPORT DATE
Francis Howell Families	2/24/2022

DIRECT EXPENDITURE REPORT

This form is used when expenditures listed on form CD3 have been made directly on behalf of a candidate or ballot measure issue. Candidate committees making expenditures only on behalf of the candidate for which their committee was formed do not complete this form.

complete this form.					
A. CANDIDATES					
3. CANDIDATE'S NAME AND ADDRESS	4. OFFICE SOUGHT	5. CHE SUPP.	CK ONE OPP.	6. EXPENDITURE DATE (MM/DD/YY)	7. EXPENDITURE AMOUNT
NAME:					
ADDRESS:					
CITY STATE ZIP:					\$
NAME: View Attached Form(s)					
ADDRESS:					
CITY STATE ZIP:					\$
NAME:					
ADDRESS:					
CITY STATE ZIP:					\$
NAME:					
ADDRESS:					
CITY STATE ZIP:					\$
B. BALLOT MEASURES					
NAME OF BALLOT MEASURE (INCLUDE POLITICAL SUBDIVISION)	9. ELECTION DATE	10. CHE	CK ONE	11. EXPENDITURES THIS PERIOD	12. EXPENDITURES TO DATE
BALLOT MEASURE:					
POLITICAL SUBDIVISION:				\$	\$
BALLOT MEASURE:					
POLITICAL SUBDIVISION:				\$	\$
BALLOT MEASURE:					
POLITICAL SUBDIVISION:				\$	\$

OFFICE USE ONLY



MISSOURI ETHICS COMMISSION DIRECT EXPENDITURE REPORT

INSTRUCTIONS ON REVERSE SIDE

NAME OF COMMITTEE

Francis Howell Families

2. REPORT DATE

OFFICE USE ONLY

2/24/2022

DIRECT EXPENDITURE REPORT

This form is used when expenditures listed on form CD3 have been made directly on behalf of a candidate or ballot measure issue. Candidate committees making expenditures only on behalf of the candidate for which their committee was formed do not complete this form.

complete this fo						
A. CANDIDAT	ES	1	1		T	
3. C	ANDIDATE'S NAME AND ADDRESS	4. OFFICE SOUGHT	5. CHE	CK ONE OPP.	6. EXPENDITURE DATE (MM/DD/YY)	7. EXPENDITURE AMOUNT
NAME: ADDRESS: CITY STATE ZIP:	Randy Cook PO Box 141 Cottleville MO 63338	school board	~		1/21/2022	\$ 191.66
NAME: ADDRESS: CITY STATE ZIP:	Adam Bertrand 5591 Hennsley Circle St Charles MO 63304	school board	~		1/21/2022	\$ 191.65
NAME: ADDRESS: CITY STATE ZIP:	Randy Cook PO Box 141 Cottleville MO 63338	school board	~		1/4/2022	\$ 91.76
NAME: ADDRESS: CITY STATE ZIP:	Adam Bertrand 5591 Hennsley Circle St Charles MO 63304	school board	·		1/4/2022	\$ 91.76
NAME: ADDRESS: CITY STATE ZIP:	Randy Cook PO Box 141 Cottleville MO 63338	school board	~		2/10/2022	\$ 497.50
NAME: ADDRESS: CITY STATE ZIP:	Adam Bertrand 5591 Hennsley Circle St Charles MO 63304	school board	~		2/10/2022	\$ 497.50
NAME: ADDRESS: CITY STATE ZIP:	Randy Cook PO Box 141 Cottleville MO 63338	school board	~		2/14/2022	•
NAME: ADDRESS: CITY STATE ZIP:	Adam Bertrand 5591 Hennsley Circle St Charles MO 63304	school board	~		2/14/2022	