



Missouri Ethics Commission
COMMITTEE DISCLOSURE REPORT COVER PAGE

M.E.C. ID NO. C171117

1. DATE OF REPORT 9/3/2020	OFFICE USE ONLY
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INSTRUCTIONS ON REVERSE SIDE

2. FULL NAME OF COMMITTEE Baker For Missouri	
3. COMMITTEE MAILING ADDRESS PO Box 8031 CITY / STATE / ZIP Columbia MO 65205	4. COMMITTEE TELEPHONE NUMBER (573) 864-5385
5. TREASURER'S NAME Nikki Krawitz	
6. TREASURER'S MAILING ADDRESS 901 Edgewood Ave CITY / STATE / ZIP Columbia MO 65203	7. TREASURER'S TELEPHONE NUMBER HOME: (573) 874-3917 WORK:
8. DEPUTY TREASURER'S NAME <input type="checkbox"/> CHECK IF NO DEPUTY TREASURER Sarah Bantz	
9. DEPUTY TREASURER'S MAILING ADDRESS 1228 Ridge Rd. Columbia MO 65203 CITY / STATE / ZIP	10. DEPUTY TREASURER'S TELEPHONE NUMBER HOME: (573) 874-0692 WORK:
11. DATE OF ELECTION 8/4/2020	12. TYPE OF ELECTION (CHECK ONE) <input checked="" type="radio"/> PRIMARY <input type="radio"/> GENERAL <input type="radio"/> SPECIAL
13. TIME PERIOD COVERED BY THIS STATEMENT FROM 7/24/2020 THROUGH 8/29/2020	
14. CANDIDATE COMMITTEES ONLY: LIST CANDIDATE'S NAME, ADDRESS, PHONE, OFFICE SOUGHT, POLITICAL SUBDIVISION AND POLITICAL PARTY Judy Baker 3075 South Rangeline Road Columbia MO 65201 (573) 864-5385 State Senator Missouri State Senate <input type="checkbox"/> CHECK IF INCUMBENT <input type="checkbox"/> REPUBLICAN <input checked="" type="checkbox"/> DEMOCRAT <input type="checkbox"/>	15. TYPE OF REPORT <input type="checkbox"/> 15 DAYS AFTER CAUCUS NOMINATION <input type="checkbox"/> COMMITTEE QUARTERLY REPORT <input type="checkbox"/> Jan 15 <input type="checkbox"/> Apr 15 <input type="checkbox"/> Jul 15 <input type="checkbox"/> Oct 15 <input type="checkbox"/> 8 DAYS BEFORE <input checked="" type="checkbox"/> 30 DAYS AFTER ELECTION <input type="checkbox"/> TERMINATION (ATTACH FORM CO-3) <input type="checkbox"/> SEMIANNUAL DEBT REPORT <input type="checkbox"/> Jan 15 <input type="checkbox"/> Jul 15 <input type="checkbox"/> ANNUAL SUPPLEMENTAL, JAN 15 <input type="checkbox"/> 15 DAYS AFTER PETITION DEADLINE <input type="checkbox"/> OTHER <input type="checkbox"/> AMENDING PREVIOUS REPORT DATED _____, 20____
16. COMMITTEE TREASURER'S SIGNATURE I CERTIFY THAT THIS REPORT, COMPRISED OF THIS COVER PAGE AND ALL ATTACHED FORMS, IS COMPLETE, TRUE AND ACCURATE. ELECTRONICALLY FILED Sep 3 2020 3:37PM _____ TREASURER'S SIGNATURE	17. CANDIDATE'S SIGNATURE (CANDIDATE COMMITTEES ONLY) I CERTIFY THAT THIS REPORT, COMPRISED OF THIS COVER PAGE AND ALL ATTACHED FORMS, IS COMPLETE, TRUE AND ACCURATE. ELECTRONICALLY FILED Sep 3 2020 3:37PM _____ CANDIDATE'S SIGNATURE



Missouri Ethics Commission

REPORT SUMMARY

Instructions on Reverse Side

Name of Committee	Date of Report	Office Use Only
Baker For Missouri	9/3/2020	

Receipts	A. This Period	B. This Calendar Yr or Election Cycle	Statement of Beginning and Ending Financial Condition	
1. Total Receipts For This Election Previously Reported		\$ 184,620.50		
2. All Monetary Contributions Received This Period	\$ 92,955.98		Money On Hand	
3. All Loans Received This Period	+ 0.00			
4. Miscellaneous Receipts This Period	+ 0.00			
5. Subtotal Monetary Receipts This Period (Sum 2A + 3A + 4A)	\$ 92,955.98		24. Money On Hand at the beginning of this reporting period (Including funds in depository, cash, savings accounts and all other investments)	\$ 143,279.07
6. In-kind Contributions Received This Period	+ 0.00		25. Monetary Receipts this Period (From Item 5 - this page)	+ 92,955.98
7. Total All Receipts This Period (Sum 5A + 6A)	\$ 92,955.98		26. Monetary Disbursements Made This Period (Sum 10 + 16A + 23)	- 19,525.21
8. Total All Receipts This Election (Sum 1B + 7A)		\$ 277,576.48	a) Disbursements By Check \$ 19,525.21 b) Disbursements By Cash \$ 0.00	
Expenditures	A. This Period	B. This Calendar Yr or Election Cycle	27. Money On Hand at the close of this reporting period (SUM 24 + 25 - 26)	\$ 216,709.84
9. Total Expenditures for this election previously reported		\$ 49,547.34	Indebtedness	
10. Expenditures made by cash or check this period	\$ 13,275.22			
11. In-Kind Expenditures made this period	+ 0.00			
12. Expenditures incurred this period (not including loans) including payments made by credit card (line 17 CD3)	+ 3,240.00		28. Outstanding Indebtedness at the beginning of this period	\$ 6,143.50
13. Total All expenditures made this period (Sum 10A + 11A + 12A) Including payments made by Credit Card (line 17 CD3)	\$ 16,515.22		29. Loans Received This Period	+ 0.00
14. Total Expenditures This Election (Sum 9B + 13A)		\$ 66,062.56	30. A. New Expenditures Incurred This Period (include payments by Credit Card (Line 17 CD3)	+ 3,240.00
Contributions Made	A. This Period	B. This Calendar Yr or Election Cycle	B. New Contributions Made by Credit Card (Line 25B CD3)	+ 0.00
15. Total Contributions Made For This Election Previously Reported		\$ 920.00	31. Payments Made on Loans This Period	- 0.00
16. All Contributions Made This Period (25A or 25B of CD3)	A 106.49 B 0.00	↔ Cash/Check ↔ Credit Card	32. Debt Forgiven on Loans This Period	- 0.00
17. All In-Kind Contributions Made This Period	+ 0.00		33. Payments Made This Period on Expenditures Incurred in Previous Period (Paid by Cash/Check Only) (Line 21 this page)	- 6,143.50
18. Total Contributions Made This Period (Sum 16A + 17A)	\$ 106.49		34. Total Indebtedness at the Close of This Reporting Period (Sum 28 + 29 + 30A + 30B - 31 - 32 - 33)	\$ 3,240.00
19. Total All Contributions Made This Election (Sum 15B + 18A)		\$ 1,026.49		
Other Disbursements	A. This Period	B. This Calendar Yr or Election Cycle		
20. Funds Used For Paying Loans This Period Including Credit Card Payments	+ 0.00			
21. Payments This Period on Prev Reported Expend Incurred (Paid by Cash/Check Only)	+ 6,143.50			
22. Any Miscellaneous Disbursement Not Reported Elsewhere	+ 0.00			
23. Total Other Disbursements This Period (Sum 20A + 21A + 22A)	\$ 6,143.50			



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS AND LOANS RECEIVED
 INSTRUCTIONS ON REVERSE SIDE

OFFICE USE ONLY

1. NAME OF COMMITTEE Baker For Missouri		2. REPORT DATE 9/3/2020	
A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.		4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)			
NAME:			
ADDRESS:			\$
CITY / STATE:			
EMPLOYER:			
<input type="checkbox"/> COMMITTEE:		\$	<input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME:			
ADDRESS:			\$
CITY / STATE:			
EMPLOYER:			
<input type="checkbox"/> COMMITTEE:		\$	<input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME:			
ADDRESS:			\$
CITY / STATE:			
EMPLOYER:			
<input type="checkbox"/> COMMITTEE:		\$	<input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME:			
ADDRESS:			\$
CITY / STATE:			
EMPLOYER:			
<input type="checkbox"/> COMMITTEE:		\$	<input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME:			
ADDRESS:			\$
CITY / STATE:			
EMPLOYER:			
<input type="checkbox"/> COMMITTEE:		\$	<input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
6. SUBTOTAL: ITEMIZED CONTRIBUTIONS THIS PAGE (SUM COLUMN 5)		\$ 0.00	
7. SUBTOTAL: ITEMIZED CONTRIBUTIONS ANY ATTACHED PAGES		+ \$ 92,955.98	
8. TOTAL: ITEMIZED CONTRIBUTIONS THIS PERIOD (SUM 6 + 7)		\$ 92,955.98	
9. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS MONETARY CONTRIBUTIONS		\$ 92,955.98	
10. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS IN-KIND CONTRIBUTIONS		\$ 0.00	
B. NON-ITEMIZED CONTRIBUTIONS RECEIVED (LIST BY CATEGORY, NOT BY INDIVIDUAL CONTRIBUTIONS)		AMOUNT RECEIVED	
11. TOTAL CONTRIBUTIONS RECEIVED AT FUND-RAISERS AS REPORTED INLINE 8 ON FORM CD1A		\$ 0.00	
12. TOTAL ANONYMOUS CONTRIBUTIONS RECEIVED FROM PERSON GIVING \$25 OR LESS		\$ 0.00	
13. TOTAL MONETARY CONTRIBUTIONS RECEIVED FROM PERSONS GIVING \$100 OR LESS		\$ 0.00	
14. TOTAL IN-KIND CONTRIBUTIONS RECEIVED FROM PERSONS (NOT COMMITTEES) GIVING \$100 OR LESS		\$ 0.00	
C. LOANS RECEIVED			
15. NAME AND ADDRESS OF LENDER		16. DATE RECEIVED	17. AMOUNT OF LOAN (IF MORE THAN \$100 ATTACH CD-1B)
NAME:			
ADDRESS:			
CITY / STATE:			\$
NAME:			
ADDRESS:			
CITY / STATE:			\$
18. SUBTOTAL: LOANS THIS PAGE (SUM COLUMN 17)		\$ 0.00	
19. SUBTOTAL: LOANS FROM ANY ATTACHED PAGES		\$ 0.00	
20. TOTAL: LOANS THIS PERIOD (SUM 18 + 19)		\$ 0.00	
21. TOTAL: ALL IN-KIND CONTRIBUTIONS (SUM 10 + 14)		\$ 0.00	
22. TOTAL: ALL MONETARY CONTRIBUTIONS (SUM 9, 11, 12 & 13)		\$ 92,955.98	
23. MONETARY CONTRIBUTIONS & LOANS RECEIVED REQUIRING A RECORD OF NAME & ADDRESS (SUM 9, 13 & 20)		\$ 92,955.98	



MISSOURI ETHICS COMMISSION CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE Baker For Missouri	DATE 9/3/2020
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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.

A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Mark Satterwhite CITY/STATE: 815 High St Boonville MO 65233 EMPLOYER: Boone County Family Resources -- Administrator <input type="checkbox"/> COMMITTEE:	8/6/2020 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: United Food & Commercial Workers Local 655 CITY/STATE: 300 Weidman Rd EMPLOYER: Ballwin MO 63011 <input type="checkbox"/> COMMITTEE:	8/29/2020 ----- \$ 2,500.00	\$ 2,500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: NALC Branch 343 STL CITY/STATE: 612 Charleston Oaks Dr EMPLOYER: Ballwin MO 63021 <input type="checkbox"/> COMMITTEE:	8/18/2020 ----- \$ 400.00	\$ 400.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Missouri State Council of Machinist PAC CITY/STATE: 12365 Saint Charles Rock Rd EMPLOYER: Bridgeton MO 63044 <input type="checkbox"/> COMMITTEE:	8/1/2020 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: International Union of Operating Engineers Local 513 CITY/STATE: Political Fund 3449 Hollenberg Dr EMPLOYER: Bridgeton MO 63044 <input type="checkbox"/> COMMITTEE:	8/29/2020 ----- \$ 1,500.00	\$ 1,500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Womens Political Caucus EMPAC CITY/STATE: PO Box 50103 EMPLOYER: Clayton MO 63105 <input type="checkbox"/> COMMITTEE:	8/29/2020 ----- \$ 2,559.00	\$ 2,559.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Missouri National Organization for Women PAC CITY/STATE: 203 Brewer Dr EMPLOYER: Columbia MO 65203 <input type="checkbox"/> COMMITTEE:	8/29/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Rockwood Labor Club CITY/STATE: PO Box 31 EMPLOYER: Eureka MO 63025 <input type="checkbox"/> COMMITTEE:	8/10/2020 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

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(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 Baker For Missouri	DATE 9/3/2020
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INSTRUCTIONS

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A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Greater Kansas City Building & Construction Trades Council CITY/STATE: 400 S Main St Independence MO 64050 EMPLOYER: <input type="checkbox"/> COMMITTEE:	8/10/2020 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: United Transportation Union PAC CITY/STATE: 222A Madison St EMPLOYER: Jefferson City KS 65101 <input type="checkbox"/> COMMITTEE:	7/28/2020 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Majority Forward CITY/STATE: PO Box 1491 EMPLOYER: Jefferson City MO 65102 <input type="checkbox"/> COMMITTEE:	8/1/2020 ----- \$ 2,500.00	\$ 2,500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Majority Forward CITY/STATE: PO Box 1491 EMPLOYER: Jefferson City MO 65102 <input type="checkbox"/> COMMITTEE:	8/29/2020 ----- \$ 2,500.00	\$ 2,500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: IBEW Local 257 CITY/STATE: 209 Flora Dr EMPLOYER: Jefferson City MO 65101 <input type="checkbox"/> COMMITTEE:	8/10/2020 ----- \$ 1,000.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Teamsters Local 541 CITY/STATE: 4501 Emanuel Cleaver II Blvd EMPLOYER: Kansas City MO 64130 <input type="checkbox"/> COMMITTEE:	8/29/2020 ----- \$ 1,000.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: American Federation of Teachers Local 691 CITY/STATE: 300 E 39th St # 1J EMPLOYER: Kansas City MO 64111 <input type="checkbox"/> COMMITTEE:	8/29/2020 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Brotherhood of Locomotive Engineers and Trainmen CITY/STATE: 580 White Oak Ln EMPLOYER: Liberty MO 64068 <input type="checkbox"/> COMMITTEE:	8/27/2020 ----- \$ 1,000.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(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 Baker For Missouri	DATE 9/3/2020
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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.

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A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Missouri Womens Political Caucus PAC CITY/STATE: PO Box 890 EMPLOYER: Rocky Mount MO 65072 <input type="checkbox"/> COMMITTEE:	8/19/2020 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Sheet Metal Workers Local 36 CITY/STATE: 2319 Chouteau Ave Ste 100 EMPLOYER: Saint Louis MO 63103 <input type="checkbox"/> COMMITTEE:	8/1/2020 ----- \$ 1,000.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: International Union of Elevator Constructors Local No. 3 CITY/STATE: PAC Fund 5916 Wilson Ave EMPLOYER: Saint Louis MO 63110 <input type="checkbox"/> COMMITTEE:	8/29/2020 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: It Starts Today Missouri CITY/STATE: PO Box 63403 EMPLOYER: St Louis MO 63163 <input type="checkbox"/> COMMITTEE:	8/19/2020 ----- \$ 128.80	\$ 128.80 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: It Starts Today Missouri CITY/STATE: PO Box 63403 EMPLOYER: St Louis MO 63163 <input type="checkbox"/> COMMITTEE:	8/19/2020 ----- \$ 4,247.15	\$ 2,198.95 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: It Starts Today Missouri CITY/STATE: PO Box 63403 EMPLOYER: St Louis MO 63163 <input type="checkbox"/> COMMITTEE:	8/19/2020 ----- \$ 580.95	\$ 452.15 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: It Starts Today Missouri CITY/STATE: PO Box 63403 EMPLOYER: St Louis MO 63163 <input type="checkbox"/> COMMITTEE:	8/19/2020 ----- \$ 2,048.20	\$ 1,467.25 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Franklin County Democrat Club CITY/STATE: 1649 Hackberry Dr EMPLOYER: Union MO 63084 <input type="checkbox"/> COMMITTEE:	8/18/2020 ----- \$ 2,559.00	\$ 2,559.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(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 Baker For Missouri	DATE 9/3/2020
---	------------------

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.

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A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Bob Nolte CITY / STATE: 802 S Fairview Rd Apt B8 Columbia MO 65203 EMPLOYER: University of Missouri -- Administrator <input type="checkbox"/> COMMITTEE:	8/29/2020 ----- \$ 7.14	\$ 7.14 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mary Creger CITY / STATE: 107 W Thurman St Columbia MO 65202 EMPLOYER: Barneshealthcare Management -- Advanced Practice Nurse <input type="checkbox"/> COMMITTEE:	8/21/2020 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Chimene Schwach CITY / STATE: 1232 Sunset Dr Columbia MO 65203 EMPLOYER: Heart of America CASA -- Advocate Supervisor <input type="checkbox"/> COMMITTEE:	8/13/2020 ----- \$ 75.00	\$ 75.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Carroll Highbarger CITY / STATE: 3100 S Rodeo Dr Columbia MO 65203 EMPLOYER: Columbia College -- Adjunct Instructor Criminal Justice <input type="checkbox"/> COMMITTEE:	8/29/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Barry Aycock CITY / STATE: PO Box 456 Parma MO 63870 EMPLOYER: Self-employed -- Agribusiness Entrepreneur <input type="checkbox"/> COMMITTEE:	8/29/2020 ----- \$ 2,500.00	\$ 2,500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ellen Baker CITY / STATE: 1807 Park De Ville Pl Columbia MO 65203 EMPLOYER: Missouri School Boards Assn -- Admin Asst <input type="checkbox"/> COMMITTEE:	8/6/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Robert Price CITY / STATE: 111 E Brandon Rd Columbia MO 65203 EMPLOYER: SOA -- Architect <input type="checkbox"/> COMMITTEE:	8/26/2020 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Debbie Sheals CITY / STATE: 406 W Broadway Columbia MO 65203 EMPLOYER: Historic Preservation Consulting -- Architectural historian <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 20.00	\$ 20.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(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 Baker For Missouri	DATE 9/3/2020
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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.

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A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Soodie Beasley CITY/STATE: 6441 Valley Rd Kansas City MO 64113 EMPLOYER: SBA LLC -- Art Appraiser <input type="checkbox"/> COMMITTEE:	8/10/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Gregory Bloom CITY/STATE: 820 3rd St Boonville MO 65233 EMPLOYER: Self -- Artist <input type="checkbox"/> COMMITTEE:	8/13/2020 ----- \$ 10.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jeremy Reed CITY/STATE: 2401 E Walnut St Columbia MO 65201 EMPLOYER: Westminster College -- Assistant Professor <input type="checkbox"/> COMMITTEE:	8/24/2020 ----- \$ 10.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jeremy Reed CITY/STATE: 2401 E Walnut St Columbia MO 65201 EMPLOYER: Westminster College -- Assistant Professor <input type="checkbox"/> COMMITTEE:	8/1/2020 ----- \$ 20.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: David Rosman CITY/STATE: 302 Maplewood Dr Columbia MO 65203 EMPLOYER: JCPenney -- Associate <input type="checkbox"/> COMMITTEE:	8/6/2020 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: John Banjak CITY/STATE: 653 Gaslite Ln Kirkwood MO 63122 EMPLOYER: True Title Company LLC -- Attoprney <input type="checkbox"/> COMMITTEE:	8/1/2020 ----- \$ 69.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jeff Keevil CITY/STATE: 506 Breton Way Ashland MO 65010 EMPLOYER: Missouri Public Service Commission -- Attorney <input type="checkbox"/> COMMITTEE:	8/6/2020 ----- \$ 1,000.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: John Heisserer CITY/STATE: 1198 Wolf Ln Cape Girardeau MO 63701 EMPLOYER: Self-employed -- Attorney <input type="checkbox"/> COMMITTEE:	8/24/2020 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(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 Baker For Missouri	DATE 9/3/2020
---	------------------

INSTRUCTIONS

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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.

A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Andrew Mundwiller CITY/STATE: 2012 Long Gate Ct Chesterfield MO 63017 EMPLOYER: Cagle Law Firm -- Attorney <input type="checkbox"/> COMMITTEE:	8/13/2020 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Christopher Hoffmann CITY/STATE: 7751 Carondelet Ave Ste 601 Clayton MO 63105 EMPLOYER: Self -- Attorney <input type="checkbox"/> COMMITTEE:	8/25/2020 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Timothy Harlan CITY/STATE: 511 S Glenwood Ave Columbia MO 65203 EMPLOYER: Harlan Still & Koch -- Attorney <input type="checkbox"/> COMMITTEE:	8/1/2020 ----- \$ 1,100.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Barbara Hoppe CITY/STATE: 607 Bluff Dale Dr Columbia MO 65201 EMPLOYER: Mo. State P.D. System -- Attorney <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Scott Wilson CITY/STATE: 501 S Garth Ave Columbia MO 65203 EMPLOYER: Self -- Attorney <input type="checkbox"/> COMMITTEE:	8/29/2020 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Bill Turley CITY/STATE: 3110 Wind River Ct Columbia MO 65203 EMPLOYER: Shelter Insurance -- Attorney <input type="checkbox"/> COMMITTEE:	8/25/2020 ----- \$ 2,559.00	\$ 2,559.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Caleb Hall CITY/STATE: 2004 Woodlea Dr Columbia MO 65201 EMPLOYER: State of Missouri -- Attorney <input type="checkbox"/> COMMITTEE:	8/18/2020 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Truman Allen CITY/STATE: 2900 Butterfield Ct Columbia MO 65203 EMPLOYER: Truman E Allen PC -- attorney <input type="checkbox"/> COMMITTEE:	8/25/2020 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(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 Baker For Missouri	DATE 9/3/2020
---	------------------

INSTRUCTIONS

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A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Drew Schauffler CITY/STATE: 411 Park Rd Fayette MO 65248 EMPLOYER: AW Smith Law -- Attorney <input type="checkbox"/> COMMITTEE:	8/6/2020 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Lara Underwood CITY/STATE: 1404 Green Berry Rd Jefferson City MO 65101 EMPLOYER: Law Offices of Lara Underwood -- Attorney <input type="checkbox"/> COMMITTEE:	8/6/2020 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Charles Thomas CITY/STATE: 1229 W 66th Ter Kansas City MO 64113 EMPLOYER: United States Government -- Attorney <input type="checkbox"/> COMMITTEE:	8/13/2020 ----- \$ 1,000.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Chris Finney CITY/STATE: 307 Altus Pl Kirkwood MO 63122 EMPLOYER: Christopher J Finney LLC -- attorney <input type="checkbox"/> COMMITTEE:	8/25/2020 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Robert Fleming CITY/STATE: 12801 W Highway Ee Rocheport MO 65279 EMPLOYER: Missouri State Public Defender -- Attorney <input type="checkbox"/> COMMITTEE:	8/18/2020 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: David Ransin CITY/STATE: 3650 S Thornhill Ln Rogersville MO 65742 EMPLOYER: self -- Attorney <input type="checkbox"/> COMMITTEE:	8/21/2020 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: John Page CITY/STATE: 1007 Olive St Fl 3 Saint Louis MO 63101 EMPLOYER: Page Law -- Attorney <input type="checkbox"/> COMMITTEE:	8/21/2020 ----- \$ 2,559.00	\$ 2,559.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Tonya Page CITY/STATE: 12915 Sunset Bluff Ct Saint Louis MO 63127 EMPLOYER: Page Law -- Attorney <input type="checkbox"/> COMMITTEE:	8/21/2020 ----- \$ 2,559.00	\$ 2,559.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(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 Baker For Missouri	DATE 9/3/2020
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INSTRUCTIONS

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3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Donna Harper CITY / STATE: 7044 Alindell Saint Louis MO 63130 EMPLOYER: Sedey Harper PC -- attorney <input type="checkbox"/> COMMITTEE:	8/6/2020 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Zane Cagle CITY / STATE: 33 Kingsbury Pl Saint Louis MO 63112 EMPLOYER: Self -- Attorney <input type="checkbox"/> COMMITTEE:	8/13/2020 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: John Wilbers CITY / STATE: 130 S Bemiston Ave Ste 406 Saint Louis MO 63105 EMPLOYER: The Wilbers Law Firm LLC -- Attorney <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 1,000.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Steve Garner CITY / STATE: 1131 S Kentwood Ave Springfield MO 65804 EMPLOYER: Strong-Garner-Bauer Trial Attorneys -- Attorney <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 1,500.00	\$ 1,500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Kevin Sommer CITY / STATE: 241 NE 71st Rd Warrensburg MO 64093 EMPLOYER: Self -- Attorney <input type="checkbox"/> COMMITTEE:	8/10/2020 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Patricia Gray CITY / STATE: 1236 S Geyer Rd Saint Louis MO 63122 EMPLOYER: Sandberg Phoenix -- Atty <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Curt Morgret CITY / STATE: 3900 Cromwell Ct Columbia MO 65203 EMPLOYER: US Bank -- Banker <input type="checkbox"/> COMMITTEE:	8/1/2020 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Begonya Klumb CITY / STATE: 824 W 53rd Ter Kansas City MO 64112 EMPLOYER: UMB -- Banking <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 1,000.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(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 Baker For Missouri	DATE 9/3/2020
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3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Bernita Cauthon CITY/STATE: 4200 Tracy Ave Apt 209 Kansas City MO 64110 EMPLOYER: United Way of Greater Kansas City -- Call Specialist <input type="checkbox"/> COMMITTEE:	8/13/2020 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Bernita Cauthon CITY/STATE: 4200 Tracy Ave Apt 209 Kansas City MO 64110 EMPLOYER: United Way of Greater Kansas City -- Call Specialist <input type="checkbox"/> COMMITTEE:	8/24/2020 ----- \$ 100.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Bernita Cauthon CITY/STATE: 4200 Tracy Ave Apt 209 Kansas City MO 64110 EMPLOYER: United Way of Greater Kansas City -- Call Specialist <input type="checkbox"/> COMMITTEE:	8/1/2020 ----- \$ 45.00	\$ 20.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Haorلد L Kennedy CITY/STATE: 5 Apple Tree Ln Saint Louis MO 63124 EMPLOYER: self -- cardiologist <input type="checkbox"/> COMMITTEE:	8/13/2020 ----- \$ 10.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ray Baker CITY/STATE: 376 Willow Weald Path Chesterfield MO 63005 EMPLOYER: MOHELA -- CEO <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Joyce Aboussie CITY/STATE: 76 Overhills Dr Saint Louis MO 63124 EMPLOYER: Aboussie & Associates -- CEO <input type="checkbox"/> COMMITTEE:	8/18/2020 ----- \$ 2,000.00	\$ 2,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Tim Shryack CITY/STATE: 2754 S Williams Ave Springfield MO 65807 EMPLOYER: Healthcare -- CEO <input type="checkbox"/> COMMITTEE:	8/6/2020 ----- \$ 75.00	\$ 75.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Sam Hamra CITY/STATE: 1855 S Ingram Mill Rd Springfield MO 65804 EMPLOYER: Hamra Enterprises -- Chairman & CEO <input type="checkbox"/> COMMITTEE:	8/18/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(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 Baker For Missouri	DATE 9/3/2020
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NAME: ADDRESS: Laurel Killgore CITY/STATE: 1005 Westport Dr Columbia MO 65203 EMPLOYER: MBS Textbooks LLC -- Client Services Manager <input type="checkbox"/> COMMITTEE:	8/25/2020 ----- \$ 19.00	\$ 19.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Joanne Fulton CITY/STATE: 1400 Stonehaven Rd Columbia MO 65203 EMPLOYER: Self -- Clinical social worker <input type="checkbox"/> COMMITTEE:	8/1/2020 ----- \$ 500.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Kenneth Butler CITY/STATE: 1000 W Botner Rd Columbia MO 65202 EMPLOYER: Capital Partnerships -- Consultant <input type="checkbox"/> COMMITTEE:	8/27/2020 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Lisa Pelofsky CITY/STATE: 648 E Meyer Blvd Kansas City MO 64131 EMPLOYER: Byrne Pelofsky -- Consultant <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Daniel Sahr CITY/STATE: 7410 Murdoch Ave Saint Louis MO 63119 EMPLOYER: Self -- Consultant <input type="checkbox"/> COMMITTEE:	8/13/2020 ----- \$ 5.00	\$ 5.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Matthew Behlmann CITY/STATE: 17622 Lisa Valley Ct Wildwood MO 63005 EMPLOYER: self-employed -- court reporter <input type="checkbox"/> COMMITTEE:	8/25/2020 ----- \$ 75.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Matthew Behlmann CITY/STATE: 17622 Lisa Valley Ct Wildwood MO 63005 EMPLOYER: self-employed -- court reporter <input type="checkbox"/> COMMITTEE:	8/25/2020 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Melinda Moynihan CITY/STATE: 7671 S Hill Creek Rd Columbia MO 65203 EMPLOYER: Howe & Associates -- CPA <input type="checkbox"/> COMMITTEE:	8/6/2020 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

--

(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 Baker For Missouri	DATE 9/3/2020
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INSTRUCTIONS

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3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Raymond Katz CITY/STATE: 79 Frances Ave EMPLOYER: Larkspur CA 94939 Self -- Dentist <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 10.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Kara Potter CITY/STATE: 2516 Grandview Cir EMPLOYER: Columbia MO 65203 Missouri State Teachers Association -- Digital Strategist <input type="checkbox"/> COMMITTEE:	8/25/2020 ----- \$ 10.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Allen Tacker CITY/STATE: 3402 Snow Leopard Dr EMPLOYER: Columbia MO 65202 Family Counseling Center -- Director <input type="checkbox"/> COMMITTEE:	8/13/2020 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Llona Weiss CITY/STATE: 1801 S JOHNMEYER LANE EMPLOYER: Columbia MO 65203 State of Missouri -- Director <input type="checkbox"/> COMMITTEE:	8/29/2020 ----- \$ 40.00	\$ 40.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Tim Parshall CITY/STATE: 1002 Westwinds Ct EMPLOYER: Columbia MO 65203 University of Missouri -- Director of Fellowships <input type="checkbox"/> COMMITTEE:	8/27/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Peter Mueser CITY/STATE: 5401 W Route K EMPLOYER: Columbia MO 65203 University of Missouri -- Economist <input type="checkbox"/> COMMITTEE:	8/21/2020 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Kenneth Schneeberger CITY/STATE: 605 Thilly Ave EMPLOYER: Columbia MO 65203 U OF MISSOURI -- EDUCATOR <input type="checkbox"/> COMMITTEE:	8/6/2020 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Marc Linit CITY/STATE: 401 S Glenwood Ave EMPLOYER: Columbia MO 65203 University of Missouri -- Educator <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(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 Baker For Missouri	DATE 9/3/2020
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3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Marc Linit CITY / STATE: 401 S Glenwood Ave Columbia MO 65203 EMPLOYER: University of Missouri -- Educator <input type="checkbox"/> COMMITTEE:	8/27/2020 ----- \$ 75.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Gary Bloom CITY / STATE: 6010 Chaparrall Creek Ct Apt 2914 Hazelwood MO 63042 EMPLOYER: Arcvision -- Engineer <input type="checkbox"/> COMMITTEE:	8/6/2020 ----- \$ 3.00	\$ 3.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Gary Bloom CITY / STATE: 6010 Chaparrall Creek Ct Apt 2914 Hazelwood MO 63042 EMPLOYER: Arcvision -- Engineer <input type="checkbox"/> COMMITTEE:	8/21/2020 ----- \$ 6.00	\$ 3.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jim Kreider CITY / STATE: 3030 Dupont Cir Jefferson City MO 65109 EMPLOYER: MRTA -- Exec. Dire. <input type="checkbox"/> COMMITTEE:	8/6/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Neil Jaffe CITY / STATE: 29 Aberdeen Pl Saint Louis MO 63105 EMPLOYER: GL group inc. -- executive <input type="checkbox"/> COMMITTEE:	8/25/2020 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jon Poses CITY / STATE: 21 N 10th St 2 Columbia MO 65201 EMPLOYER: We Always Swing Jazz Series -- Executive & Artistic Director <input type="checkbox"/> COMMITTEE:	8/10/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Chris Campbell CITY / STATE: 4803 Thornbrook Rdg Columbia MO 65203 EMPLOYER: Boone County Historical Society -- Executive Director <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 150.00	\$ 150.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Nick Foster CITY / STATE: 117 Park Hill Ave Columbia MO 65203 EMPLOYER: Voluntary Action Center -- Executive Director <input type="checkbox"/> COMMITTEE:	8/29/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(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 Baker For Missouri	DATE 9/3/2020
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3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Nick Foster CITY / STATE: 117 Park Hill Ave Columbia MO 65203 EMPLOYER: Voluntary Action Center -- Executive Director <input type="checkbox"/> COMMITTEE:	8/1/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Gary Murphy CITY / STATE: 20910 County Road 780 Bernie MO 63822 EMPLOYER: Self -- Farmer <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Brian McInerney CITY / STATE: 304 County Road 438 Rocheport MO 65279 EMPLOYER: Self -- Farmer <input type="checkbox"/> COMMITTEE:	8/1/2020 ----- \$ 1,000.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Shelley Butler CITY / STATE: PO Box 2116 Suffolk VA 23432 EMPLOYER: Cotton Plains Farm Inc. -- Farmer <input type="checkbox"/> COMMITTEE:	8/25/2020 ----- \$ 19.00	\$ 19.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Edward Mitchell CITY / STATE: 19349 Monroe Road 971 Holliday MO 65258 EMPLOYER: Self Employed -- Farming <input type="checkbox"/> COMMITTEE:	8/29/2020 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: John Harris CITY / STATE: 4740 County Road 217 Fulton MO 65251 EMPLOYER: Harris Municipal Advisors -- Finance <input type="checkbox"/> COMMITTEE:	8/6/2020 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Roger Wilson CITY / STATE: 3708 Lansing Ave Columbia MO 65201 EMPLOYER: retired -- Former Gov <input type="checkbox"/> COMMITTEE:	8/4/2020 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Houston Roberts CITY / STATE: 3002 Frederick Ave Saint Joseph MO 64506 EMPLOYER: Christensen For Congress -- Fundraising Director <input type="checkbox"/> COMMITTEE:	8/10/2020 ----- \$ 10.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(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 Baker For Missouri	DATE 9/3/2020
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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.

A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE. 3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
NAME: ADDRESS: Frank Koch CITY/STATE: 515 Cherry St Ste 300 Columbia MO 65201 EMPLOYER: Lawyer -- Harlan Harlan and Still <input type="checkbox"/> COMMITTEE:	8/26/2020 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Sheridan Wood CITY/STATE: 1009 W 57TH Kansas City MO 64113 EMPLOYER: Kansas City CARE Clinic -- Health Care Administrator <input type="checkbox"/> COMMITTEE:	8/6/2020 ----- \$ 1,000.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Judy Baker CITY/STATE: 3075 S Rangeline Rd Columbia MO 65201 EMPLOYER: Self -- Healthcare Consultant <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Tracy Barnes CITY/STATE: 4100 White Pine Ct Columbia MO 65203 EMPLOYER: Self Employed -- Homemaker <input type="checkbox"/> COMMITTEE:	8/24/2020 ----- \$ 1,000.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Greg Nelson CITY/STATE: 2104 Speck Ct Columbia MO 65202 EMPLOYER: University of Missouri -- HRIS Specialist <input type="checkbox"/> COMMITTEE:	8/29/2020 ----- \$ 3.57	\$ 3.57 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Patrick Burke CITY/STATE: 4254 Vista Ave Saint Louis MO 63110 EMPLOYER: City of Creve Couer -- Inspector <input type="checkbox"/> COMMITTEE:	8/10/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Cathy Gunther CITY/STATE: 102 Edgewood Ave Columbia MO 65203 EMPLOYER: University of Missouri -- Instructor <input type="checkbox"/> COMMITTEE:	8/29/2020 ----- \$ 30.00	\$ 30.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Robert Clayton CITY/STATE: 905 Cardiff Dr Hannibal MO 63401 EMPLOYER: State of Missouri -- Judge <input type="checkbox"/> COMMITTEE:	8/29/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(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 Baker For Missouri	DATE 9/3/2020
---	------------------

INSTRUCTIONS

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3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Brian Doerr CITY / STATE: 12 Penny Ln Wallingford CT 6492 EMPLOYER: MacDermid Alpha -- Lab Supervisor <input type="checkbox"/> COMMITTEE:	8/26/2020 \$ 2.00	\$ 2.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Joseph Gorman CITY / STATE: 1214 Danforth Dr Columbia MO 65201 EMPLOYER: Paternity Testing Corporation -- Lawyer <input type="checkbox"/> COMMITTEE:	8/6/2020 \$ 300.00	\$ 300.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Joseph Gorman CITY / STATE: 1214 Danforth Dr Columbia MO 65201 EMPLOYER: Paternity Testing Corporation -- Lawyer <input type="checkbox"/> COMMITTEE:	8/6/2020 \$ 600.00	\$ 300.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jamie Myers CITY / STATE: 621 Promenade Dr Columbia MO 65202 EMPLOYER: State of MO -- Lawyer <input type="checkbox"/> COMMITTEE:	8/6/2020 \$ 10.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Michael Moroni CITY / STATE: 32412 Moroni Ln Oran MO 63771 EMPLOYER: self -- Lawyer <input type="checkbox"/> COMMITTEE:	8/6/2020 \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ida Fogle CITY / STATE: 409 W Broadway Columbia MO 65203 EMPLOYER: Daniel Boone Regional Library -- Library associate <input type="checkbox"/> COMMITTEE:	8/25/2020 \$ 19.00	\$ 19.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ken LaZebnik CITY / STATE: 12107 Hollyglen Place Studio City CA 91604 EMPLOYER: Director MFA -- LIU <input type="checkbox"/> COMMITTEE:	8/29/2020 \$ 20.00	\$ 20.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jerry Ford CITY / STATE: 1419 Sylvan Ln Cape Girardeau MO 63701 EMPLOYER: Jerry Ford Enterprises -- Lobbyist <input type="checkbox"/> COMMITTEE:	8/29/2020 \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(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 Baker For Missouri	DATE 9/3/2020
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INSTRUCTIONS

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NAME: ADDRESS: Robert Fruend CITY/STATE: 2 Town And Country Dr Saint Louis MO 63124 EMPLOYER: Consilience Group -- Management Consultant <input type="checkbox"/> COMMITTEE:	8/27/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: William Maxwell CITY/STATE: 706 Fairview Ave Columbia MO 65201 EMPLOYER: Estate of Betty Maxwell -- Manager <input type="checkbox"/> COMMITTEE:	8/29/2020 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Annie Seal CITY/STATE: 6239 Pershing Ave Saint Louis MO 63130 EMPLOYER: Self-employed -- Marketing <input type="checkbox"/> COMMITTEE:	8/1/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Alice Dickherber CITY/STATE: 2216 Sidney St Apt 12 Saint Louis MO 63104 EMPLOYER: Villa Duchesne -- Marketing <input type="checkbox"/> COMMITTEE:	8/1/2020 ----- \$ 300.00	\$ 300.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Alvin Plummer CITY/STATE: 1901 E Northwood Dr Columbia MO 65203 EMPLOYER: retired -- N/A <input type="checkbox"/> COMMITTEE:	8/1/2020 ----- \$ 150.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: David Allen CITY/STATE: 3706 Shadow Glen Ct Columbia MO 65203 EMPLOYER: none -- none <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: David Allen CITY/STATE: 3706 Shadow Glen Ct Columbia MO 65203 EMPLOYER: none -- none <input type="checkbox"/> COMMITTEE:	8/29/2020 ----- \$ 135.71	\$ 35.71 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: James Swope CITY/STATE: 1401 Windsor St Columbia MO 65201 EMPLOYER: none -- none <input type="checkbox"/> COMMITTEE:	8/6/2020 ----- \$ 7.00	\$ 7.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS --**(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 Baker For Missouri	DATE 9/3/2020
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3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: James Harmon CITY / STATE: 813 E Normal St Kirksville MO 63501 EMPLOYER: none -- none <input type="checkbox"/> COMMITTEE:	8/25/2020 ----- \$ 5.00	\$ 5.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Laura Cohen CITY / STATE: 410 N Newstead Ave Apt 2E Saint Louis MO 63108 EMPLOYER: none -- none <input type="checkbox"/> COMMITTEE:	8/12/2020 ----- \$ 1,000.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Robin Mabry-Hubbard CITY / STATE: 819 S Prairie St # A7 Bethalto IL 62010 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/18/2020 ----- \$ 14.00	\$ 14.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Robin Mabry-Hubbard CITY / STATE: 819 S Prairie St # A7 Bethalto IL 62010 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 34.00	\$ 20.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Rhonda Pitt CITY / STATE: 6 Clarkson Lake Ct Chesterfield MO 63017 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/18/2020 ----- \$ 30.00	\$ 30.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Edward Coe CITY / STATE: 206 Heather Ln Columbia MO 65203 EMPLOYER: none -- not employed <input type="checkbox"/> COMMITTEE:	8/25/2020 ----- \$ 150.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Edward Coe CITY / STATE: 206 Heather Ln Columbia MO 65203 EMPLOYER: none -- not employed <input type="checkbox"/> COMMITTEE:	8/13/2020 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: John Bauer CITY / STATE: 104 E Spangler Ln Columbia MO 65201 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(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 Baker For Missouri	DATE 9/3/2020
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INSTRUCTIONS

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3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Robert Blake CITY / STATE: 2322 Meadow Lark Ln Columbia MO 65201 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/6/2020 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: John Blakemore CITY / STATE: 5924 Screaming Eagle Ln Columbia MO 65201 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/21/2020 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Allen Bluedorn CITY / STATE: 4505 Melrose Dr Columbia MO 65203 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/6/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ron Carter CITY / STATE: 1244 Sunset Dr Columbia MO 65203 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/18/2020 ----- \$ 125.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ron Carter CITY / STATE: 1244 Sunset Dr Columbia MO 65203 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/6/2020 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ron Carter CITY / STATE: 1244 Sunset Dr Columbia MO 65203 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 155.00	\$ 30.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Michelle Cecil CITY / STATE: 1700 Oak Cliff Pl Columbia MO 65203 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Rosemary Christensen CITY / STATE: 4107 Baurichter Dr Columbia MO 65203 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 30.00	\$ 30.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(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 Baker For Missouri	DATE 9/3/2020
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INSTRUCTIONS

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3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Kathryn Digges CITY / STATE: 7 Bingham Rd Columbia MO 65203 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Rosemary Feraldi CITY / STATE: 401 Angels Rest Way Columbia MO 65203 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/18/2020 ----- \$ 10.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Roger Gafke CITY / STATE: PO Box 30134 Columbia MO 65205 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/18/2020 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Roger Gafke CITY / STATE: PO Box 30134 Columbia MO 65205 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/25/2020 ----- \$ 300.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Rosalie Gerding CITY / STATE: 101 S 5th St Apt 1 Columbia MO 65201 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/21/2020 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ted Groshong CITY / STATE: 2600 Limerick Ln Columbia MO 65203 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mary A Groves CITY / STATE: 1015 Belleview Ct Columbia MO 65203 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/29/2020 ----- \$ 3.57	\$ 3.57 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Edwin Hanson CITY / STATE: 1106 Vintage Dr Columbia MO 65203 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/6/2020 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(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 Baker For Missouri	DATE 9/3/2020
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INSTRUCTIONS

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3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Edwin Hanson CITY / STATE: 1106 Vintage Dr Columbia MO 65203 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/13/2020 ----- \$ 35.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Dennis Hodo CITY / STATE: 4205 Steinbrooke Ter Columbia MO 65203 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/24/2020 ----- \$ 10.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Dennis Hodo CITY / STATE: 4205 Steinbrooke Ter Columbia MO 65203 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/26/2020 ----- \$ 20.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Martha John CITY / STATE: 2011 N Country Club Dr Columbia MO 65201 EMPLOYER: Not employed -- Not employed <input type="checkbox"/> COMMITTEE:	8/24/2020 ----- \$ 10.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Nancy Katzman CITY / STATE: 213 Tracy Dr Columbia MO 65203 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/6/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ann Korschgen CITY / STATE: 6951 S Lakota Ridge Ln Columbia MO 65203 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Karl Kruse CITY / STATE: 2405 Lynnwood Dr Columbia MO 65203 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/13/2020 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Judith Miles CITY / STATE: 6300 N Route E Columbia MO 65202 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/10/2020 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

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(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 Baker For Missouri	DATE 9/3/2020
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3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Marian Minor CITY / STATE: 209 Russell Blvd Columbia MO 65203 EMPLOYER: Not employed -- Not employed <input type="checkbox"/> COMMITTEE:	8/29/2020 ----- \$ 70.00	\$ 20.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Marian Minor CITY / STATE: 209 Russell Blvd Columbia MO 65203 EMPLOYER: Not employed -- Not employed <input type="checkbox"/> COMMITTEE:	8/13/2020 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Carl Morris CITY / STATE: 3851 S Forest Acres Columbia MO 65203 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/25/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Henry Ottinger CITY / STATE: 511 Westwood Ave Columbia MO 65203 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/6/2020 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Garnet Payne CITY / STATE: 110 E Alhambra Dr Columbia MO 65203 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/21/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Peggy Placier CITY / STATE: 209 S Greenwood Ave Columbia MO 65203 EMPLOYER: Not employed -- Not employed <input type="checkbox"/> COMMITTEE:	8/6/2020 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Peggy Placier CITY / STATE: 209 S Greenwood Ave Columbia MO 65203 EMPLOYER: Not employed -- Not employed <input type="checkbox"/> COMMITTEE:	8/21/2020 ----- \$ 75.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Rene Powell CITY / STATE: 1201 Paquin St Apt 202 Columbia MO 65201 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/29/2020 ----- \$ 5.00	\$ 5.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(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 Baker For Missouri	DATE 9/3/2020
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A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Linda Randall CITY / STATE: 200 Bingham Rd Columbia MO 65203 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/13/2020 ----- \$ 2,559.00	\$ 2,559.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Gerald Hazelbauer CITY / STATE: 200 Bingham Rd Columbia MO 65203 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 30.00	\$ 30.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Gerald Hazelbauer CITY / STATE: 200 Bingham Rd Columbia MO 65203 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jim And Kathy Ritter CITY / STATE: 2611 Vistaview Ter Columbia MO 65203 EMPLOYER: Not employed -- Not employed <input type="checkbox"/> COMMITTEE:	8/18/2020 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Lee Russell CITY / STATE: 3456 Woodrail Ter Columbia MO 65203 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/21/2020 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Marjorie Sable CITY / STATE: 228 E Parkway Dr Columbia MO 65203 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/27/2020 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Dennis Hodo CITY / STATE: 4205 Steinbrooke Ter Columbia MO 65203 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/1/2020 ----- \$ 10.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Dennis Hodo CITY / STATE: 4205 Steinbrooke Ter Columbia MO 65203 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/1/2020 ----- \$ 10.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(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 Baker For Missouri	DATE 9/3/2020
---	------------------

INSTRUCTIONS

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A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Martha John CITY/STATE: 2011 N Country Club Dr Columbia MO 65201 EMPLOYER: Not employed -- Not employed <input type="checkbox"/> COMMITTEE:	8/1/2020 \$ 85.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Verna Rhodes CITY/STATE: 3750 Miller Dr Apt 1217 Columbia MO 65201 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/1/2020 \$ 150.00	\$ 75.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Marie Scruggs CITY/STATE: 1913 Vassar Drivel Columbia MO 65203 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/1/2020 \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Pamela Springsteel CITY/STATE: 5901 Redwing Dr Columbia MO 65202 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/1/2020 \$ 10.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Beverly Smull CITY/STATE: 4418 W Rockhampton Cir Columbia MO 65203 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/6/2020 \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Bill Stuby CITY/STATE: 4855 N Cedar Lake Ct Columbia MO 65203 EMPLOYER: Not employed -- Not employed <input type="checkbox"/> COMMITTEE:	8/13/2020 \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jan Swaney CITY/STATE: 4008 Curt Dr Columbia MO 65203 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/18/2020 \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jan Swaney CITY/STATE: 4008 Curt Dr Columbia MO 65203 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/29/2020 \$ 350.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
TOTAL: ITEMIZED CONTRIBUTIONS		<div style="border: 1px solid black; width: 100px; height: 20px; text-align: center;">--</div>
(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 Baker For Missouri	DATE 9/3/2020
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INSTRUCTIONS

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A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Michael Ugarte CITY/STATE: 1505 Windsor St Columbia MO 65201 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 20.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Michael Ugarte CITY/STATE: 1505 Windsor St Columbia MO 65201 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/21/2020 ----- \$ 10.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Richard Wallace CITY/STATE: 2208 Yuma Dr Columbia MO 65203 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/27/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Barbara Williamson CITY/STATE: 200 Wild Ginger Ct Columbia MO 65203 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Stephen Johnson CITY/STATE: 904 Maplewood Dr Columbia MO 65203 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/26/2020 ----- \$ 30.00	\$ 30.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: David Sapp CITY/STATE: 1025 Hickory Hill Dr Columbia MO 65203 EMPLOYER: Retired -- Not Employed <input type="checkbox"/> COMMITTEE:	8/29/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Patricia Claytor CITY/STATE: 10510 Conway Rd Frontenac MO 63131 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/21/2020 ----- \$ 10.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jeanne Jarrett CITY/STATE: 10150 E Old Highway 124 Hallsville MO 65255 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/25/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(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 Baker For Missouri	DATE 9/3/2020
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INSTRUCTIONS

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NAME: ADDRESS: Joanne Asbee CITY / STATE: 20151 S Route A Hartsburg MO 65039 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/6/2020 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Randy Odell CITY / STATE: 19108 E 14th St N Independence MO 64056 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/6/2020 ----- \$ 19.00	\$ 19.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Brian Casey CITY / STATE: 626 W 62nd St Kansas City MO 64113 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/6/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jane Vansant CITY / STATE: 9511 Madison Ave Kansas City MO 64114 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/13/2020 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Treva Mongler CITY / STATE: PO Box 273 Moberly MO 65270 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/1/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Lorna Domke CITY / STATE: 3914 Foxdale Rd New Bloomfield MO 65063 EMPLOYER: Not employed -- Not employed <input type="checkbox"/> COMMITTEE:	8/1/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jaime Torres CITY / STATE: 268 E Broadway Apt A1304 New York NY 10002 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Charlie O'Reilly CITY / STATE: 1898 Monet Rd Nixa MO 65714 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/26/2020 ----- \$ 1,000.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

--

(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 Baker For Missouri	DATE 9/3/2020
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INSTRUCTIONS

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3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Dolores Shearon CITY/STATE: 8010 Jackson St EMPLOYER: Omaha NE 68114 Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/29/2020 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Margaret Bisberg CITY/STATE: 1506 Courtland Ave EMPLOYER: Park Ridge IL 60068 Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/10/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Leah Sanchez CITY/STATE: 2448 NW Westover Rd Unit 202 EMPLOYER: Portland OR 97210 Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/13/2020 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Judy Campbell CITY/STATE: 314 Lyonnais Dr EMPLOYER: Saint Louis MO 63141 Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/18/2020 ----- \$ 10.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Reese Forbes CITY/STATE: 4225 W Pine Blvd Apt 14 EMPLOYER: Saint Louis MO 63108 Not employed -- Not employed <input type="checkbox"/> COMMITTEE:	8/25/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: James Lyonfields CITY/STATE: 249 Union Blvd Apt 4105 EMPLOYER: Saint Louis MO 63108 Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/13/2020 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mark Wyn CITY/STATE: 3317 Indiana Ave EMPLOYER: Saint Louis MO 63118 Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/24/2020 ----- \$ 3.00	\$ 3.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Donna Moog CITY/STATE: 6230 E Alta Hacienda Dr EMPLOYER: Scottsdale AZ 85251 Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/6/2020 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

--

(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 Baker For Missouri	DATE 9/3/2020
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INSTRUCTIONS

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3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Donna Moog CITY/STATE: 6230 E Alta Hacienda Dr Scottsdale AZ 85251 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/27/2020 ----- \$ 50.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: William Cooper CITY/STATE: 2405 S Virginia Ave Springfield MO 65807 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/13/2020 ----- \$ 20.00	\$ 20.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Laura Entwisle CITY/STATE: 203 N Burton Ave Springfield MO 65802 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	8/1/2020 ----- \$ 10.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ann Schroeder CITY/STATE: 609 W Main St Union MO 63084 EMPLOYER: Not employed -- Not employed <input type="checkbox"/> COMMITTEE:	8/21/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Claire Wyneken CITY/STATE: 5712 Winona Ave Saint Louis MO 63109 EMPLOYER: Wyman Center Inc. -- not for profit executive <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Constance Cass CITY/STATE: 8315 Summer Breeze Ln Rosenberg TX 77469 EMPLOYER: Retired -- Nurse Practitioner <input type="checkbox"/> COMMITTEE:	8/21/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jane Cooper CITY/STATE: 500 Longfellow Ln Columbia MO 65203 EMPLOYER: University of Missouri -- Nurse Practitioner <input type="checkbox"/> COMMITTEE:	8/29/2020 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: West Wilson CITY/STATE: Montana State University North Hedges Ha St Rm 1025 Bozeman MT 59715 EMPLOYER: Wha -- Ob <input type="checkbox"/> COMMITTEE:	8/18/2020 ----- \$ 5.00	\$ 5.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(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 Baker For Missouri	DATE 9/3/2020
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3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Daffney Moore CITY / STATE: PO Box 625 Saint Louis MO 63188 EMPLOYER: St. Louis Development Corp -- Opportunity Zones <input type="checkbox"/> COMMITTEE:	8/6/2020 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: David Johnson CITY / STATE: 2700 E Gans Rd Columbia MO 65201 EMPLOYER: Broadway Diner -- Owner <input type="checkbox"/> COMMITTEE:	8/25/2020 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Anthony DeSha CITY / STATE: 1506 E Broadway Columbia MO 65201 EMPLOYER: Flows Pharmacy -- Owner <input type="checkbox"/> COMMITTEE:	8/6/2020 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Richard Deshon CITY / STATE: 2516 Lovers Ln Saint Joseph MO 64506 EMPLOYER: Artesian Ice -- Owner <input type="checkbox"/> COMMITTEE:	8/1/2020 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Barry Cervantes CITY / STATE: 901 S Skinker Blvd Saint Louis MO 63105 EMPLOYER: Gateway Insurance Company -- Owner <input type="checkbox"/> COMMITTEE:	8/6/2020 ----- \$ 125.00	\$ 125.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mark Williams CITY / STATE: 3405 Timberlake Ln Winston Salem NC 27106 EMPLOYER: Dots and Lines Inc -- Partner & CFO <input type="checkbox"/> COMMITTEE:	8/27/2020 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Steve Zweig CITY / STATE: 4200 E Richland Rd Columbia MO 65201 EMPLOYER: University of Missouri -- Physical Faculty Administrator <input type="checkbox"/> COMMITTEE:	8/29/2020 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Adam Clapper CITY / STATE: 200 Portland St Columbia MO 65201 EMPLOYER: Boyce and Bynum Pathology -- Physician <input type="checkbox"/> COMMITTEE:	8/10/2020 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

--

(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 Baker For Missouri	DATE 9/3/2020
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3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: William Parks CITY/STATE: 2501 Limerick Ln Columbia MO 65203 EMPLOYER: self -- physician <input type="checkbox"/> COMMITTEE:	8/10/2020 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Robert Churchill CITY/STATE: 1119 Northshore Dr Columbia MO 65203 EMPLOYER: University of Missouri -- Physician <input type="checkbox"/> COMMITTEE:	8/13/2020 ----- \$ 2,559.00	\$ 2,559.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Elizabeth Garrett CITY/STATE: 2409 Kyle Dr Columbia MO 65203 EMPLOYER: University of Missouri -- Physician <input type="checkbox"/> COMMITTEE:	8/6/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Elizabeth Garrett CITY/STATE: 2409 Kyle Dr Columbia MO 65203 EMPLOYER: University of Missouri -- Physician <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 200.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Michael LeFevre CITY/STATE: 4308 Glen Eagle Dr Columbia MO 65203 EMPLOYER: University of Missouri -- Physician <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Stephen Williamson CITY/STATE: 1216 W 71st Ter Kansas City MO 64114 EMPLOYER: KU Cancer Center -- Physician <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 300.00	\$ 30.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Stephen Williamson CITY/STATE: 1216 W 71st Ter Kansas City MO 64114 EMPLOYER: KU Cancer Center -- Physician <input type="checkbox"/> COMMITTEE:	8/10/2020 ----- \$ 270.00	\$ 270.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: David Mehr CITY/STATE: 714 Ingleside Dr Columbia MO 65201 EMPLOYER: University of Missouri -- Physician/professor <input type="checkbox"/> COMMITTEE:	8/21/2020 ----- \$ 1,250.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

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



MISSOURI ETHICS COMMISSION

CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

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NAME OF COMMITTEE Baker For Missouri	DATE 9/3/2020
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A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: David Mehr CITY / STATE: 714 Ingleside Dr Columbia MO 65201 EMPLOYER: University of Missouri -- Physician/professor <input type="checkbox"/> COMMITTEE:	8/6/2020 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: David Mehr CITY / STATE: 714 Ingleside Dr Columbia MO 65201 EMPLOYER: University of Missouri -- Physician/professor <input type="checkbox"/> COMMITTEE:	8/29/2020 ----- \$ 1,392.85	\$ 142.85 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Alexander Antal CITY / STATE: 3206 Kohler Cir Columbia MO 65203 EMPLOYER: State of Missouri -- Policy Advisor <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Vikki Pauley CITY / STATE: 3751 S Forest Acres Columbia MO 65203 EMPLOYER: US Dept. of Housing and Urban Development -- Portfolio Management Specialist <input type="checkbox"/> COMMITTEE:	8/18/2020 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jim Kabell CITY / STATE: 1850 E Division St Springfield MO 65803 EMPLOYER: International Brotherhood of Teamsters -- President <input type="checkbox"/> COMMITTEE:	8/10/2020 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: John Smreker CITY / STATE: PO Box 21 Union MO 63084 EMPLOYER: Franklin Co Labor -- President <input type="checkbox"/> COMMITTEE:	8/21/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: John Bangs CITY / STATE: 1410 Ridgemoor Ct Columbia MO 65203 EMPLOYER: JKB Consulting -- Principal Investigator <input type="checkbox"/> COMMITTEE:	8/27/2020 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Elizabeth Hoffman CITY / STATE: 1147 NE 11th St Bend OR 97701 EMPLOYER: G5 -- Process Manager <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 10.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(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 Baker For Missouri	DATE 9/3/2020
---	------------------

INSTRUCTIONS

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3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Abdoulaye Bah CITY/STATE: 2009 WOODHOLLOW DR Columbia MO 65203 EMPLOYER: Lincoln University -- Professor <input type="checkbox"/> COMMITTEE:	8/27/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Suzanne Burgoyne CITY/STATE: 103 Tracy Dr Columbia MO 65203 EMPLOYER: University of Missouri -- professor <input type="checkbox"/> COMMITTEE:	8/4/2020 ----- \$ 120.00	\$ 120.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Suzanne Burgoyne CITY/STATE: 103 Tracy Dr Columbia MO 65203 EMPLOYER: University of Missouri -- professor <input type="checkbox"/> COMMITTEE:	8/6/2020 ----- \$ 125.00	\$ 5.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Suzanne Burgoyne CITY/STATE: 103 Tracy Dr Columbia MO 65203 EMPLOYER: University of Missouri -- professor <input type="checkbox"/> COMMITTEE:	8/29/2020 ----- \$ 145.00	\$ 20.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Joe Donaldson CITY/STATE: 1001 Pheasant Run Columbia MO 65201 EMPLOYER: University of Missouri -- professor <input type="checkbox"/> COMMITTEE:	8/10/2020 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Gabriel Fried CITY/STATE: 906 Crestland Ave Columbia MO 65203 EMPLOYER: University of Missouri -- professor <input type="checkbox"/> COMMITTEE:	8/26/2020 ----- \$ 10.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Candi Galen CITY/STATE: 505 S Glenwood Ave Columbia MO 65203 EMPLOYER: University of Missouri -- Professor <input type="checkbox"/> COMMITTEE:	8/6/2020 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jere Gilles CITY/STATE: 2251 Concordia Dr Columbia MO 65203 EMPLOYER: University of Missouri -- Professor <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(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 Baker For Missouri	DATE 9/3/2020
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INSTRUCTIONS

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3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Lanis L Hicks CITY/STATE: 1705 Garrison Pl Columbia MO 65203 EMPLOYER: University of Missouri -- Professor <input type="checkbox"/> COMMITTEE:	8/29/2020 ----- \$ 30.00	\$ 30.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Gabriel Fried CITY/STATE: 906 Crestland Ave Columbia MO 65203 EMPLOYER: University of Missouri -- professor <input type="checkbox"/> COMMITTEE:	8/1/2020 ----- \$ 40.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Judy Stallmann CITY/STATE: 2305 Topaz Dr Columbia MO 65203 EMPLOYER: University of Missouri -- Professor <input type="checkbox"/> COMMITTEE:	8/1/2020 ----- \$ 740.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Kerri McBee CITY/STATE: 540 S Craig View Dr Harrisburg MO 65256 EMPLOYER: University of Missouri -- Professor <input type="checkbox"/> COMMITTEE:	8/13/2020 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Wayne Brekhus CITY/STATE: 703 Hilltop Dr Columbia MO 65201 EMPLOYER: University of Missouri -- Professor of Sociology <input type="checkbox"/> COMMITTEE:	8/6/2020 ----- \$ 300.00	\$ 300.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Wayne Brekhus CITY/STATE: 703 Hilltop Dr Columbia MO 65201 EMPLOYER: University of Missouri -- Professor of Sociology <input type="checkbox"/> COMMITTEE:	8/29/2020 ----- \$ 600.00	\$ 300.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Kate Watson CITY/STATE: 1200 W Worstell Ln Columbia MO 65202 EMPLOYER: State of Missouri -- Program Manager <input type="checkbox"/> COMMITTEE:	8/21/2020 ----- \$ 20.00	\$ 20.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Elise Buchheit CITY/STATE: 2311 Hillsboro Dr Columbia MO 65202 EMPLOYER: City of Columbia -- Program Specialist <input type="checkbox"/> COMMITTEE:	8/6/2020 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

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(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 Baker For Missouri	DATE 9/3/2020
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3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)		
NAME: ADDRESS: Peter Beard CITY/STATE: 505 Fay St Apt 103 Columbia MO 65201 EMPLOYER: Central Technology Services -- Project Manager <input type="checkbox"/> COMMITTEE:	8/10/2020 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Diane Levine CITY/STATE: 150 N Central Ave Clayton MO 63105 EMPLOYER: Self -- Psychotherapist <input type="checkbox"/> COMMITTEE:	8/29/2020 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Shelley Nelson CITY/STATE: 2317 Deer Creek Ct Columbia MO 65201 EMPLOYER: Self -- Real Estate <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jack Cardwell CITY/STATE: 221 W Lexington Ave Ste 110 Independence MO 64050 EMPLOYER: Cardwell & Associates -- Real Estate Appraiser <input type="checkbox"/> COMMITTEE:	8/6/2020 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Donald Ginsburg CITY/STATE: 3605 Holly Hills Ct Columbia MO 65203 EMPLOYER: self employed -- Realtor <input type="checkbox"/> COMMITTEE:	8/4/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Audrey Buzzard CITY/STATE: 7708 Shelby 449 Shelbina MO 63468 EMPLOYER: Shelby County -- Recorder of Deeds <input type="checkbox"/> COMMITTEE:	8/24/2020 ----- \$ 10.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Gregg Bush CITY/STATE: 427 N Cedar Lake Dr W Columbia MO 65203 EMPLOYER: MU Healthcare -- Registered Nurse <input type="checkbox"/> COMMITTEE:	8/10/2020 ----- \$ 10.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Rebecca Shaw CITY/STATE: 2615 Vail Dr Columbia MO 65203 EMPLOYER: University of Missouri -- Research Specialist <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 30.00	\$ 30.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(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 Baker For Missouri	DATE 9/3/2020
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INSTRUCTIONS

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3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Katherine Canterbury CITY / STATE: 600 Manor Dr Columbia MO 65203 EMPLOYER: self -- reseller <input type="checkbox"/> COMMITTEE:	8/18/2020 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Catherine Marek CITY / STATE: 14707 Windsor Valley Ct Chesterfield MO 63017 EMPLOYER: Retired -- Retired <input type="checkbox"/> COMMITTEE:	8/27/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Janet Beckett CITY / STATE: 706 Thilly Ave Columbia MO 65203 EMPLOYER: None -- Retired <input type="checkbox"/> COMMITTEE:	8/13/2020 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Curtis Fuchs CITY / STATE: 3900 Faurot Dr Columbia MO 65203 EMPLOYER: none -- Retired <input type="checkbox"/> COMMITTEE:	8/25/2020 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Judy Nolke CITY / STATE: 5314 Perche Pointe Pl Columbia MO 65203 EMPLOYER: none -- retired <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Donna Reed CITY / STATE: 3991 S Ben Williams Rd Columbia MO 65201 EMPLOYER: none -- Retired <input type="checkbox"/> COMMITTEE:	8/25/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Curtis Fuchs CITY / STATE: 3900 Faurot Dr Columbia MO 65203 EMPLOYER: none -- Retired <input type="checkbox"/> COMMITTEE:	7/28/2020 ----- \$ 80.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Dee Strnad CITY / STATE: 803 Cornell Ln Columbia MO 65203 EMPLOYER: None -- Retired <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(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 Baker For Missouri	DATE 9/3/2020
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INSTRUCTIONS

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3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Andrew Twaddle CITY / STATE: 919 Edgewood Ave Columbia MO 65203 EMPLOYER: none -- retired <input type="checkbox"/> COMMITTEE:	8/29/2020 ----- \$ 14.28	\$ 14.28 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Kathy Jensen CITY / STATE: 7360 E Sundown Ct Columbia MO 65201 EMPLOYER: Not Employed -- Retired <input type="checkbox"/> COMMITTEE:	8/25/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Linda Lowenberg CITY / STATE: 210 Russell Blvd Columbia MO 65203 EMPLOYER: Not employed -- retired <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Gary Smith CITY / STATE: 204 Park De Ville Pl Columbia MO 65203 EMPLOYER: Not Employed -- Retired <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 3.57	\$ 3.57 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Sandra Weisman CITY / STATE: 1804 University Ave Columbia MO 65201 EMPLOYER: Not Employed -- retired <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Greg Ahrens CITY / STATE: 1504 Sylvan Ln Columbia MO 65202 EMPLOYER: Retired -- Retired <input type="checkbox"/> COMMITTEE:	8/29/2020 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jim Bishop CITY / STATE: 102 Blossom Ct Columbia MO 65203 EMPLOYER: Retired -- Retired <input type="checkbox"/> COMMITTEE:	8/27/2020 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Grace Butler CITY / STATE: 531 W Botner Rd Columbia MO 65202 EMPLOYER: Retired -- Retired <input type="checkbox"/> COMMITTEE:	8/29/2020 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(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 Baker For Missouri	DATE 9/3/2020
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NAME: ADDRESS: Kay Cafer CITY / STATE: 300 Rothwell Dr Columbia MO 65203 EMPLOYER: Retired -- Retired <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Charles Curtis CITY / STATE: 1016 Lagrange Ct Columbia MO 65203 EMPLOYER: Retired -- Retired <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Chester Edwards CITY / STATE: 1215 E Nifong Blvd Columbia MO 65201 EMPLOYER: Retired -- Retired <input type="checkbox"/> COMMITTEE:	8/29/2020 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Gary Fennewald CITY / STATE: 1316 Willowcreek Ln Columbia MO 65203 EMPLOYER: Retired -- Retired <input type="checkbox"/> COMMITTEE:	8/6/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Nancie Hawke CITY / STATE: 5512 Dalcross Dr 5512 Dalcross Dr Columbia MO 65203 EMPLOYER: Retired -- Retired <input type="checkbox"/> COMMITTEE:	8/27/2020 ----- \$ 1,000.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Martha Jolly CITY / STATE: 309 Shelbark Ct Columbia MO 65203 EMPLOYER: Retired -- Retired <input type="checkbox"/> COMMITTEE:	8/18/2020 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Chris Kelly CITY / STATE: 2706 Bristol Lake Dr Columbia MO 65201 EMPLOYER: Retired -- Retired <input type="checkbox"/> COMMITTEE:	8/19/2020 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Gail Ludwig CITY / STATE: 200 E Parkway Dr Columbia MO 65203 EMPLOYER: Retired -- Retired <input type="checkbox"/> COMMITTEE:	8/29/2020 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

--

(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 Baker For Missouri	DATE 9/3/2020
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3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Fran Madden CITY/STATE: 4507 Timber Ln Columbia MO 65202 EMPLOYER: Retired -- Retired <input type="checkbox"/> COMMITTEE:	8/24/2020 ----- \$ 20.00	\$ 20.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Robert Maxey CITY/STATE: 2308 Kyle Dr Columbia MO 65203 EMPLOYER: retired -- retired <input type="checkbox"/> COMMITTEE:	8/29/2020 ----- \$ 10.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Donna Ostercamp CITY/STATE: 501 Cedar Ln Columbia MO 65201 EMPLOYER: Retired -- Retired <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Nancy Badger CITY/STATE: 1203 Sedona Villas Dr Columbia MO 65203 EMPLOYER: Retired -- Retired <input type="checkbox"/> COMMITTEE:	7/28/2020 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Linda Bantz CITY/STATE: 1012 Maplewood Dr Columbia MO 65203 EMPLOYER: retired -- retired <input type="checkbox"/> COMMITTEE:	8/1/2020 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mary Shaw CITY/STATE: 400 W Green Meadows Rd Columbia MO 65203 EMPLOYER: Retired -- Retired <input type="checkbox"/> COMMITTEE:	8/18/2020 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Sally Silvers CITY/STATE: 310 W Burnam Rd Columbia MO 65203 EMPLOYER: Retired -- Retired <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 300.00	\$ 300.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Herbert Tilema CITY/STATE: 306 Westridge Dr Columbia MO 65203 EMPLOYER: retired -- retired <input type="checkbox"/> COMMITTEE:	8/6/2020 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(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 Baker For Missouri	DATE 9/3/2020
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3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)		
NAME: ADDRESS: Mary Westerfield CITY / STATE: 101 S Glenwood Ave Columbia MO 65203 EMPLOYER: Retired -- Retired <input type="checkbox"/> COMMITTEE:	8/6/2020 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Marlyn Whitney CITY / STATE: 304 Anderson Ave Columbia MO 65203 EMPLOYER: retired -- retired <input type="checkbox"/> COMMITTEE:	8/24/2020 ----- \$ 7.14	\$ 7.14 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Gene & Mary Windmiller CITY / STATE: 705 Medavista Dr Columbia MO 65203 EMPLOYER: retired -- retired <input type="checkbox"/> COMMITTEE:	8/21/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: William Romjue CITY / STATE: 7200 E North Shore Dr Hartsburg MO 65039 EMPLOYER: Retired -- Retired <input type="checkbox"/> COMMITTEE:	8/24/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Barbara Womack CITY / STATE: 2229 E County Road H Liberty MO 64068 EMPLOYER: Retired -- Retired <input type="checkbox"/> COMMITTEE:	8/29/2020 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Harold Baker CITY / STATE: 65 Chinkapin Ln Lonedell MO 63060 EMPLOYER: Retired -- Retired <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 20.00	\$ 20.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Frances Beach CITY / STATE: PO Box 5466 Madison WI 53705 EMPLOYER: Retired -- Retired <input type="checkbox"/> COMMITTEE:	8/10/2020 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Nancy Copenhaver CITY / STATE: 1512 Ridgeline Dr Moberly MO 65270 EMPLOYER: none -- retired <input type="checkbox"/> COMMITTEE:	8/25/2020 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

--

(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 Baker For Missouri	DATE 9/3/2020
---	------------------

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.

A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE. 3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
NAME: ADDRESS: Selden Trimble CITY / STATE: 11830 State Rte E # BB EMPLOYER: Rolla MO 65401 None -- Retired <input type="checkbox"/> COMMITTEE:	8/18/2020 ----- \$ 2,500.00	\$ 2,500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Brian Sadlo CITY / STATE: PO Box 96 EMPLOYER: Saint Albans MO 63073 none -- retired <input type="checkbox"/> COMMITTEE:	8/18/2020 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Melody Boime CITY / STATE: 30 Brighton Way Apt 2N EMPLOYER: Saint Louis MO 63105 none -- retired <input type="checkbox"/> COMMITTEE:	8/18/2020 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Laura Cohen CITY / STATE: 410 N Newstead Ave Apt 2E EMPLOYER: Saint Louis MO 63108 Not Employed -- Retired <input type="checkbox"/> COMMITTEE:	8/18/2020 ----- \$ 2,000.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mary Rich CITY / STATE: 1235 Nancy Jo Pl EMPLOYER: Saint Louis MO 63122 Retired -- Retired <input type="checkbox"/> COMMITTEE:	8/13/2020 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Joan Barry CITY / STATE: 5050 Lampglow Ct EMPLOYER: Saint Louis MO 63129 St Anthoneys Medical Center -- Retired <input type="checkbox"/> COMMITTEE:	8/27/2020 ----- \$ 75.00	\$ 75.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Dorothy Adams CITY / STATE: PO Box 328 EMPLOYER: Senath MO 63876 none -- retired <input type="checkbox"/> COMMITTEE:	8/25/2020 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Sheryl Wyatt CITY / STATE: 1002 Danforth Dr EMPLOYER: Columbia MO 65201 UMHC -- RN <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

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(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 Baker For Missouri	DATE 9/3/2020
---	------------------

INSTRUCTIONS

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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.

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A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Bruce Odle CITY / STATE: 2508 Snowberry Cir Columbia MO 65201 EMPLOYER: Sales and real estate developm -- Self <input type="checkbox"/> COMMITTEE:	7/28/2020 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Walter Imam CITY / STATE: PO Box 182 Salisbury MO 65281 EMPLOYER: Self -- Self employed <input type="checkbox"/> COMMITTEE:	8/6/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Walter Imam CITY / STATE: PO Box 182 Salisbury MO 65281 EMPLOYER: Self -- Self employed <input type="checkbox"/> COMMITTEE:	8/26/2020 ----- \$ 110.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Walter Imam CITY / STATE: PO Box 182 Salisbury MO 65281 EMPLOYER: Self -- Self employed <input type="checkbox"/> COMMITTEE:	8/26/2020 ----- \$ 160.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Janet Archer CITY / STATE: 6153 N Mattox Rd Kansas City MO 64151 EMPLOYER: R & J Archer Petroleum LLC -- self employed owner <input type="checkbox"/> COMMITTEE:	7/28/2020 ----- \$ 300.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Elizabeth Palazzolo CITY / STATE: 402 Lema Ln Columbia MO 65202 EMPLOYER: Boone County -- Senior Buyer <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 100.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Elizabeth Palazzolo CITY / STATE: 402 Lema Ln Columbia MO 65202 EMPLOYER: Boone County -- Senior Buyer <input type="checkbox"/> COMMITTEE:	8/24/2020 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Johanna Cox CITY / STATE: 1805 Limerick Ln Columbia MO 65203 EMPLOYER: Veterans United -- Seniot IT Analyst <input type="checkbox"/> COMMITTEE:	8/10/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(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 Baker For Missouri	DATE 9/3/2020
---	------------------

INSTRUCTIONS

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3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Kelley Marchbanks CITY/STATE: 4515 Coventry Ln NE Cedar Rapids IA 52402 EMPLOYER: Advancement Resources -- Sr. Dr. Business Development <input type="checkbox"/> COMMITTEE:	8/6/2020 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jeffrey Bittle CITY/STATE: 2256 Derbyshire Ln Cape Girardeau MO 63701 EMPLOYER: University of Missouri -- Student <input type="checkbox"/> COMMITTEE:	8/25/2020 ----- \$ 10.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jason Scheringer CITY/STATE: 79 Grandview Ave Nanuet NY 10954 EMPLOYER: IAC Consumer Applications & Portals Inc. -- Sweepstakes Admin. <input type="checkbox"/> COMMITTEE:	8/29/2020 ----- \$ 5.00	\$ 5.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: David Dempsey CITY/STATE: 1257 Log Cabin Ln Saint Louis MO 63124 EMPLOYER: self -- tax rep <input type="checkbox"/> COMMITTEE:	8/6/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Debra Wheeler CITY/STATE: 2406 Boulder Springs Dr Apt 205 Columbia MO 65201 EMPLOYER: University of Missouri-Columbia -- Teaching Assistant/Graduate Student <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: J Scott Christianson CITY/STATE: 300 S Garth Ave Columbia MO 65203 EMPLOYER: University of Missouri -- Teaching Prof <input type="checkbox"/> COMMITTEE:	8/6/2020 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: J Scott Christianson CITY/STATE: 300 S Garth Ave Columbia MO 65203 EMPLOYER: University of Missouri -- Teaching Prof <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 125.00	\$ 75.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Tracy Smith CITY/STATE: 110 Central Ave Shelbina MO 63468 EMPLOYER: Shelby county -- Treasure <input type="checkbox"/> COMMITTEE:	8/24/2020 ----- \$ 50.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(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 Baker For Missouri	DATE 9/3/2020
---	------------------

INSTRUCTIONS

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A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Tracy Smith CITY / STATE: 110 Central Ave Shelbina MO 63468 EMPLOYER: Shelby county -- Treasure <input type="checkbox"/> COMMITTEE:	8/24/2020 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ginny Dodam CITY / STATE: 7667 E Rosadene Ln Columbia MO 65201 EMPLOYER: MU -- Vet tech <input type="checkbox"/> COMMITTEE:	8/1/2020 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Carolyn Henry CITY / STATE: 6255 W Stedman Rd Columbia MO 65203 EMPLOYER: University of Missouri -- Veterinarian <input type="checkbox"/> COMMITTEE:	8/28/2020 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Barbara Kodner CITY / STATE: 26 Portland Dr Saint Louis MO 63131 EMPLOYER: self -- writer <input type="checkbox"/> COMMITTEE:	8/25/2020 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:	----- \$	\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:	----- \$	\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:	----- \$	\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:	----- \$	\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> 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

Office Use Only

1. Name of Committee Baker For Missouri		2. Report Date 9/3/2020	
A. Expenditures of \$100 or Less by Category (List Payments to Campaign Workers in Section B Below)			4. Amount Paid or Incurred This Period
3. Category of Expenditure View Supplemental Form(s)			
5. Subtotal: Non-Itemized Expenditures This Page (Sum Column 4)			\$ 0.00
6. Subtotal: Non-Itemized Expenditures Any Attached Pages			+ 833.57
7. Total: Non-Itemized Expenditures This Period (Sum 5 + 6)			\$ 833.57
B. Itemized Expenditures All Over \$100 And All Payments To Campaign Workers		9. Date	10. Purpose - (If Payment was to a Campaign Worker, Show Aggregate Paid)
8. Name and Address of Recipient			11. Amount This Period
Name:			\$
Address:			<input type="checkbox"/> Paid
City / State:			<input type="checkbox"/> Incurred
Name:			\$
Address:			<input type="checkbox"/> Paid
City / State:			<input type="checkbox"/> Incurred
Name:			\$
Address:			<input type="checkbox"/> Paid
City / State:			<input type="checkbox"/> Incurred
12. Subtotal: This Page (Sum Column 11)			\$ 0.00
13. Subtotal: Any Attached Pages			+ 15,681.65
14. Total: Itemized Expenditures This Period (Sum 12 + 13)			\$ 15,681.65
15. Total: Monetary Expenditures This Period (Sum 7 + 14)			\$ 16,515.22
16. Amount of Line 15 Above which was Paid Out This Period			\$ 13,275.22
17. Amount of Line 15 Which Were Expenditures Incurred This Period Including Payments Made by Credit Cards			\$ 3,240.00
18. If Committee Made Any In-Kind Expenditures This Period, List Amount			\$ 0.00
19. Funds Used For Paying Loans/Credit Cards This Period (Attach Form CD1B - amount goes 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			
Name: Every Event Gives		8/17/2020	\$ 106.49
Address: 604 W Blvd South			<input checked="" type="checkbox"/> Monetary
City / State: Columbia MO 65203			<input type="checkbox"/> In-Kind
Name:			\$
Address:			<input type="checkbox"/> Monetary
City / State:			<input type="checkbox"/> In-Kind
Name:			\$
Address:			<input type="checkbox"/> Monetary
City / State:			<input type="checkbox"/> In-Kind
23. Subtotal: This Page (Sum Column 22)			\$ 106.49
24. Subtotal: Any Attached Pages			\$ 0.00
25. Total: Monetary Contributions Made This Period		A. By Cash / Check	\$ 106.49
		B. By Credit Card	\$ 0.00
26. If Committee Made Any Loans This Period, List Amount			\$
27. Total: All Monetary Contributions and Loans Made This Period (Sum 25 + 26)			\$ 106.49
28. Total: In-Kind Contributions Made This Period, List Amount			\$ 0.00



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NAME OF COMMITTEE Baker For Missouri		DATE 9/3/2020
EXPENDITURES OF \$100 OR LESS BY CATEGORY (LIST PAYMENTS TO CAMPAIGN WORKERS IN SECTION B ON FORM CD3 OR USE FORM CD3 SUP B)		AMOUNT PAID OR INCURRED THIS PERIOD
CATEGORY OF EXPENDITURE		
Food	\$	94.33
Marketing	\$	98.37
Telephone & Communication	\$	104.98
Postage	\$	16.25
Printing	\$	53.88
Supplies	\$	39.70
Website	\$	56.97
Fees	\$	369.09
	\$	
	\$	
	\$	
	\$	
	\$	
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	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
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

OFFICE USE ONLY

NAME OF COMMITTEE Baker For Missouri		REPORT DATE 9/3/2020	
ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS			
NAME AND ADDRESS OF RECIPIENT	DATE	PURPOSE - (IF PAYMENT WAS TO A CAMPAIGN WORKER, SHOW AGGREGATE PAID)	AMOUNT THIS PERIOD
NAME: Facebook ADDRESS: 1601 Willow Rd CITY/STATE: Menlow Park CA 94025	7/24/2020	Marketing \$ 175.00	\$ <input checked="" type="checkbox"/> PAID 175.00 <input type="checkbox"/> INCURRED
NAME: Facebook ADDRESS: 1601 Willow Rd CITY/STATE: Menlow Park CA 94025	7/28/2020	Marketing \$ 250.00	\$ <input checked="" type="checkbox"/> PAID 250.00 <input type="checkbox"/> INCURRED
NAME: Sarah Bantz ADDRESS: 1228 Ridge Rd CITY/STATE: Columbia MO 65203	7/31/2020	Contract Services \$ 12,500.00	\$ <input type="checkbox"/> PAID 1,500.00 <input checked="" type="checkbox"/> INCURRED
NAME: Sarah Catlin D ADDRESS: 2264 Country Lane CITY/STATE: Columbia MO 65201	7/31/2020	Campaign Worker \$ 12,488.14	\$ <input type="checkbox"/> PAID 1,740.00 <input checked="" type="checkbox"/> INCURRED
NAME: Ngp Van Inc Moto ADDRESS: 1445 New York Ave NW CITY/STATE: Washington DC 20005	8/3/2020	Marketing \$ 410.00	\$ <input checked="" type="checkbox"/> PAID 410.00 <input type="checkbox"/> INCURRED
NAME: Lucinda Grim ADDRESS: 509 S Adams St CITY/STATE: Raymore MO 64083	8/4/2020	Luci Grim \$ 5,272.50	\$ <input checked="" type="checkbox"/> PAID 2,295.00 <input type="checkbox"/> INCURRED
NAME: Luke Davis ADDRESS: 1011 Southpark Dr Apt 7 CITY/STATE: Columbia MO 65201	8/4/2020	Luke Davis \$ 1,478.70	\$ <input checked="" type="checkbox"/> PAID 1,072.50 <input type="checkbox"/> INCURRED
NAME: EDP ADDRESS: 1816 Vandiver Dr. CITY/STATE: Columbia MO 65202	8/4/2020	Payroll Expenses \$ 355.74	\$ <input checked="" type="checkbox"/> PAID 355.74 <input type="checkbox"/> INCURRED
NAME: LV Creative ADDRESS: 603 Third St CITY/STATE: Rochepoint MO 65279	8/5/2020	Marketing \$ 750.00	\$ <input checked="" type="checkbox"/> PAID 750.00 <input type="checkbox"/> INCURRED
NAME: ActBlue ADDRESS: PO Box 441146 CITY/STATE: Somerville MA 02144	8/6/2020	Bank Fees \$ 131.76	\$ <input checked="" type="checkbox"/> PAID 131.76 <input type="checkbox"/> INCURRED
NAME: Facebook ADDRESS: 1601 Willow Rd CITY/STATE: Menlow Park CA 94025	8/10/2020	Marketing \$ 400.00	\$ <input checked="" type="checkbox"/> PAID 400.00 <input type="checkbox"/> INCURRED
NAME: ActBlue ADDRESS: PO Box 441146 CITY/STATE: Somerville MA 02144	8/13/2020	Bank Fees \$ 158.62	\$ <input checked="" type="checkbox"/> PAID 158.62 <input type="checkbox"/> INCURRED
NAME: Actblue*Missouridem ADDRESS: PO Box 441146 CITY/STATE: Somerville MA 02144	8/14/2020	Bank Fees \$ 150.00	\$ <input checked="" type="checkbox"/> PAID 150.00 <input type="checkbox"/> INCURRED
NAME: Facebook ADDRESS: 1601 Willow Rd CITY/STATE: Menlow Park CA 94025	8/17/2020	Marketing \$ 600.00	\$ <input checked="" type="checkbox"/> PAID 600.00 <input type="checkbox"/> INCURRED
NAME: ActBlue ADDRESS: PO Box 441146 CITY/STATE: Somerville MA 02144	8/18/2020	Bank Fees \$ 151.88	\$ <input checked="" type="checkbox"/> PAID 151.88 <input type="checkbox"/> INCURRED
TOTAL: ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS (CARRY TO ITEM 13. "SUBTOTAL: ANY ATTACHED PAGES" ON FORM CD-3)			\$ --



MISSOURI ETHICS COMMISSION
ITEMIZED EXPENDITURES OVER \$100 SUPPLEMENTAL FORM

OFFICE USE ONLY

NAME OF COMMITTEE Baker For Missouri		REPORT DATE 9/3/2020	
ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS			
NAME AND ADDRESS OF RECIPIENT	DATE	PURPOSE - (IF PAYMENT WAS TO A CAMPAIGN WORKER, SHOW AGGREGATE PAID)	AMOUNT THIS PERIOD
NAME: Fired Up Campaigns ADDRESS: 7410 Murdoch Ave CITY/STATE: St Louis MO 63119	8/18/2020	Consulting \$ 2,125.00	\$ 2,125.00 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Brown Printing ADDRESS: 411 Madison St. CITY/STATE: Jefferson City MO 65101	8/21/2020	Printing and Copying \$ 1,406.76	\$ 1,406.76 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Actblue*Missouridem ADDRESS: PO Box 441146 CITY/STATE: Somerville MA 02144	8/21/2020	Bank Fees \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Facebook ADDRESS: 1601 Willow Rd CITY/STATE: Menlow Park CA 94025	8/25/2020	Marketing \$ 714.56	\$ 714.56 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ActBlue ADDRESS: PO Box 441146 CITY/STATE: Somerville MA 02144	8/28/2020	Bank Fees \$ 193.58	\$ 193.58 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Ngp Van Inc Moto ADDRESS: 1445 New York Ave NW CITY/STATE: Washington DC 20005	8/28/2020	Marketing \$ 530.00	\$ 530.00 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: MarKiez Smith ADDRESS: 3811 Aspen Heights Parkway CITY/STATE: Columbia MO 65201	8/4/2020	Campaign Worker \$ 90.00	\$ 71.25 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:		\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:		\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:		\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:		\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:		\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:		\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:		\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:		\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
TOTAL: ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS (CARRY TO ITEM 13. "SUBTOTAL: ANY ATTACHED PAGES" ON FORM CD-3)			\$ --



Missouri Ethics Commission
ADDENDUM STATEMENT

M.E.C. ID NO. C171117

INSTRUCTIONS ON REVERSE SIDE

PURPOSE: Form Addendum should be used for explanation of any additional information needed to complete an accurate filing of this report.

Debt Payment:

payment for Accounting Services

Amount: 3000.00

Debt Payment:

Payment made for Contract Services

Amount: 3143.50