



Missouri Ethics Commission
COMMITTEE DISCLOSURE REPORT COVER PAGE

M.E.C. ID NO. C121012

1. DATE OF REPORT 4/15/2022	OFFICE USE ONLY
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INSTRUCTIONS ON REVERSE SIDE

2. FULL NAME OF COMMITTEE
 Friends For Travis Fitzwater

3. COMMITTEE MAILING ADDRESS
 PO Box 694

4. COMMITTEE TELEPHONE NUMBER
 (573) 416-2604

CITY / STATE / ZIP
 Fulton MO 65251

5. TREASURER'S NAME
 MICHAEL L WEST

6. TREASURER'S MAILING ADDRESS
 1740 ASHLEY COURT

7. TREASURER'S TELEPHONE NUMBER
 HOME: (573) 642-3899

CITY / STATE / ZIP
 FULTON MO 65251

WORK: (573) 676-8237

8. DEPUTY TREASURER'S NAME CHECK IF NO DEPUTY TREASURER
 Benjamin Chism

9. DEPUTY TREASURER'S MAILING ADDRESS
 7980 County Rd 403 Fulton MO 65251

10. DEPUTY TREASURER'S TELEPHONE NUMBER
 HOME: (573) 416-2604

CITY / STATE / ZIP

WORK:

11. DATE OF ELECTION

12. TYPE OF ELECTION (CHECK ONE)
 PRIMARY GENERAL SPECIAL

13. TIME PERIOD COVERED BY THIS STATEMENT
 FROM 1/1/2022 THROUGH 3/31/2022

14. CANDIDATE COMMITTEES ONLY: LIST CANDIDATE'S NAME, ADDRESS, PHONE, OFFICE SOUGHT, POLITICAL SUBDIVISION AND POLITICAL PARTY

Travis Fitzwater
 1838 Pinnacle Point
 Holts Summit MO 65043
 (573) 645-2283
 State Senator
 Missouri State Senate

CHECK IF INCUMBENT

REPUBLICAN DEMOCRAT

15. TYPE OF REPORT

15 DAYS AFTER CAUCUS NOMINATION

COMMITTEE QUARTERLY REPORT
 Jan 15 Apr 15 Jul 15 Oct 15

8 DAYS BEFORE

30 DAYS AFTER ELECTION

TERMINATION (ATTACH FORM CO-3)

SEMIANNUAL DEBT REPORT
 Jan 15 Jul 15

ANNUAL SUPPLEMENTAL, JAN 15

15 DAYS AFTER PETITION DEADLINE

OTHER

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 Apr 15 2022 12:20PM

 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 Apr 15 2022 12:20PM

 CANDIDATE'S SIGNATURE



Missouri Ethics Commission
REPORT SUMMARY
 Instructions on Reverse Side

Name of Committee	Date of Report	Office Use Only
Friends For Travis Fitzwater	4/15/2022	

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			\$ 24,150.62	Money On Hand	
2. All Monetary Contributions Received This Period	\$ 41,737.54				
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)	\$ 41,737.54				
6. In-kind Contributions Received This Period	+ 0.00			24. Money On Hand at the beginning of this reporting period (Including funds in depository, cash, savings accounts and all other investments)	\$ 66,654.08
7. Total All Receipts This Period (Sum 5A + 6A)	\$ 41,737.54			25. Monetary Receipts this Period (From Item 5 - this page)	+ 41,737.54
8. Total All Receipts This Election (Sum 1B + 7A)			\$ 65,888.16	26. Monetary Disbursements Made This Period (Sum 10 + 16A + 23)	- 4,796.09
Expenditures		A. This Period	B. This Calendar Yr or Election Cycle	a) Disbursements By Check \$ 4,796.09	
				b) Disbursements By Cash \$ 0.00	
9. Total Expenditures for this election previously reported			\$ 9,492.02	27. Money On Hand at the close of this reporting period (SUM 24 + 25 - 26)	\$ 103,595.53
10. Expenditures made by cash or check this period	\$ 3,567.65			Indebtedness	
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)	+ 0.00				
13. Total All expenditures made this period (Sum 10A + 11A + 12A) Including payments made by Credit Card (line 17 CD3)	\$ 3,567.65			28. Outstanding Indebtedness at the beginning of this period	\$ 0.00
14. Total Expenditures This Election (Sum 9B + 13A)			\$ 13,059.67	29. Loans Received This Period	+ 0.00
Contributions Made		A. This Period	B. This Calendar Yr or Election Cycle		
15. Total Contributions Made For This Election Previously Reported			\$ 225.00	30. A. New Expenditures Incurred This Period (include payments by Credit Card (Line 17 CD3)	+ 0.00
16. All Contributions Made This Period (25A or 25B of CD3)	A	1,030.00	← Cash/Check	B. New Contributions Made by Credit Card (Line 25B CD3)	+ 0.00
	B	0.00	← Credit Card		
17. All In-Kind Contributions Made This Period	+ 0.00			31. Payments Made on Loans This Period	- 0.00
18. Total Contributions Made This Period (Sum 16A + 17A)	\$ 1,030.00			32. Debt Forgiven on Loans This Period	- 0.00
19. Total All Contributions Made This Election (Sum 15B + 18A)			\$ 1,255.00	33. Payments Made This Period on Expenditures Incurred in Previous Period (Paid by Cash/Check Only) (Line 21 this page)	- 0.00
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			34. Total Indebtedness at the Close of This Reporting Period (Sum 28 + 29 + 30A + 30B - 31 - 32 - 33)	\$ 0.00
21. Payments This Period on Prev Reported Expend Incurred (Paid by Cash/Check Only)	+ 0.00				
22. Any Miscellaneous Disbursement Not Reported Elsewhere	+ 198.44				
23. Total Other Disbursements This Period (Sum 20A + 21A + 22A)	\$ 198.44				



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS AND LOANS RECEIVED
 INSTRUCTIONS ON REVERSE SIDE

OFFICE USE ONLY

1. NAME OF COMMITTEE Friends For Travis Fitzwater		2. REPORT DATE 4/15/2022	
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: View Supplemental Form(s) 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		+ \$	41,737.54
8. TOTAL: ITEMIZED CONTRIBUTIONS THIS PERIOD (SUM 6 + 7)		\$	41,737.54
9. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS MONETARY CONTRIBUTIONS		\$	41,737.54
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)		\$	41,737.54
23. MONETARY CONTRIBUTIONS & LOANS RECEIVED REQUIRING A RECORD OF NAME & ADDRESS (SUM 9, 13 & 20)		\$	41,737.54



**MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

OFFICE USE ONLY

NAME OF COMMITTEE Friends For Travis Fitzwater	DATE 4/15/2022
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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. 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: Charter Communication Inc MO PAC CITY/STATE: 941 Charter Commons St EMPLOYER: Town & Country MO 63017 <input checked="" type="checkbox"/> COMMITTEE:	1/12/2022 ----- \$ 1,000.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: MO Cable PAC CITY/STATE: PO Box 1895 EMPLOYER: Jefferson City MO 65102 <input checked="" type="checkbox"/> COMMITTEE:	1/12/2022 ----- \$ 1,000.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Missouri Osteopathic Political Action Committee CITY/STATE: 1423 Randy Lane EMPLOYER: Jefferson City MO 65101 <input checked="" type="checkbox"/> COMMITTEE:	1/12/2022 ----- \$ 600.00	\$ 300.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Missouri Coin Operators Association PAC CITY/STATE: 2505 Woodson Rd EMPLOYER: Saint Louis MO 63114 <input checked="" type="checkbox"/> COMMITTEE:	1/12/2022 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Missouri American Water Employees PAC CITY/STATE: 727 Craig Rd EMPLOYER: Saint Louis MO 63141 <input checked="" type="checkbox"/> COMMITTEE:	1/12/2022 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Stanley Koenigsfeld CITY/STATE: 6025 Meadow Ridge Dr EMPLOYER: Jefferson City MO 65101 retired -- retired <input type="checkbox"/> COMMITTEE:	3/25/2022 ----- \$ 2,400.00	\$ 2,400.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Julia Koenigsfeld CITY/STATE: 6025 Meadow Ridge Dr EMPLOYER: Jefferson City MO 65101 retired -- retired <input type="checkbox"/> COMMITTEE:	3/25/2022 ----- \$ 2,400.00	\$ 2,400.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Richard Popp CITY/STATE: 4915 Highway 94 EMPLOYER: Tebbetts MO 65080 retired -- retired <input type="checkbox"/> COMMITTEE:	3/25/2022 ----- \$ 2,400.00	\$ 2,400.00 <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 Friends For Travis Fitzwater	DATE 4/15/2022
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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: Lisle Moore CITY/STATE: 383 Forestridge Lane EMPLOYER: Sunrise Beach MO 65079 retired -- retired <input type="checkbox"/> COMMITTEE:	3/25/2022 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Matt Hartwig CITY/STATE: 25218 NE 136th St EMPLOYER: Excelsior Springs MO 64024 self employed -- pharmacy owner <input type="checkbox"/> COMMITTEE:	3/25/2022 ----- \$ 2,400.00	\$ 2,400.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Salvatore Panettiere CITY/STATE: 8909 N Crescent Ave EMPLOYER: Kansas City MO 64157 Panettiere Public Affairs -- principal <input type="checkbox"/> COMMITTEE:	3/25/2022 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Remole Lawn Care LLC CITY/STATE: 39204 State Highway C EMPLOYER: Excello MO 65247 <input type="checkbox"/> COMMITTEE:	3/19/2022 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Bryan Remole CITY/STATE: 39204 State Highway C EMPLOYER: Excello MO 65247 self employed -- lawn care <input type="checkbox"/> COMMITTEE:	3/20/2022 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jerry Swartz CITY/STATE: 1201 Epperson EMPLOYER: Moberly MO 65270 self employed -- insurance sales <input type="checkbox"/> COMMITTEE:	3/20/2022 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Scope PAC CITY/STATE: PO Box 1865 EMPLOYER: Jefferson City MO 65102 <input checked="" type="checkbox"/> COMMITTEE:	3/28/2022 ----- \$ 2,400.00	\$ 2,400.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ron Fitzwater CITY/STATE: 916 Nob Hl EMPLOYER: Jefferson City MO 65109 Missouri Pharmacy Association -- Chief Executive Officer <input type="checkbox"/> COMMITTEE:	3/31/2022 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;">--</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 Friends For Travis Fitzwater	DATE 4/15/2022
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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. 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: Pharmacist Political Action Committee of Missouri CITY/STATE: 211 East Capitol Avenue EMPLOYER: Jefferson City MO 65101 <input checked="" type="checkbox"/> COMMITTEE:	3/31/2022 ----- \$ 2,400.00	\$ 2,400.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Major Brands Inc. Political Action Committee CITY/STATE: 6701 Southwest Ave EMPLOYER: Saint Louis MO 63143 <input checked="" type="checkbox"/> COMMITTEE:	3/31/2022 ----- \$ 2,400.00	\$ 2,400.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Northwest Missouri Leadership CITY/STATE: 121 Madison EMPLOYER: Jefferson City MO 65101 <input checked="" type="checkbox"/> COMMITTEE:	3/31/2022 ----- \$ 2,400.00	\$ 2,400.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Michael Boyce CITY/STATE: 1442 State Rd 00 EMPLOYER: Holts Summit MO 65043 Mid America Bank -- Mortgage Lending <input type="checkbox"/> COMMITTEE:	3/31/2022 ----- \$ 26.03	\$ 26.03 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Greg Wright CITY/STATE: 8033 State Road 0 Fulton MO 65251 EMPLOYER: Harmony Hill Youth Camp -- Caretaker <input type="checkbox"/> COMMITTEE:	3/31/2022 ----- \$ 104.10	\$ 104.10 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Sharon Solano CITY/STATE: 11754 Barletta Drive Orlando FL 32827 EMPLOYER: KuberneoCPA -- Admin assistant <input type="checkbox"/> COMMITTEE:	3/31/2022 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Landon Oxley CITY/STATE: 211 Summertree lane Holts Summit MO 65043 EMPLOYER: Callaway Electric -- Lineman <input type="checkbox"/> COMMITTEE:	3/31/2022 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ron Berendzen CITY/STATE: 160 East Simon Holts Summit MO 65043 EMPLOYER: Self -- Business owner <input type="checkbox"/> COMMITTEE:	3/31/2022 ----- \$ 104.10	\$ 104.10 <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 Friends For Travis Fitzwater	DATE 4/15/2022
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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.

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3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Jerry Callahan CITY / STATE: 106A Broadway EMPLOYER: Elsberry MO 63343 Medicine Shoppe -- Pharmacist owner <input type="checkbox"/> COMMITTEE:	3/28/2022 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Emma Wassman CITY / STATE: 4710 Co.Rd. 440 EMPLOYER: New Bloomfield MO 65063 retired -- retired <input type="checkbox"/> COMMITTEE:	3/25/2022 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: David Griffith CITY / STATE: 1207 Peyton Drive EMPLOYER: Jefferson City MO 65101 Missouri House of Representatives -- State Representative <input type="checkbox"/> COMMITTEE:	3/22/2022 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Chris Powell CITY / STATE: 225 Glenwood Dr EMPLOYER: New Bloomfield MO 65063 Navigate360 -- Business Analyst <input type="checkbox"/> COMMITTEE:	3/22/2022 ----- \$ 52.05	\$ 52.05 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Fadi Diya CITY / STATE: 4612 Copperstone ct. EMPLOYER: Columbia MO 65203 Ameren -- Chief Nuclear Officer <input type="checkbox"/> COMMITTEE:	3/21/2022 ----- \$ 2,400.00	\$ 2,400.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Crystal Moseley CITY / STATE: 2194 June Court EMPLOYER: Jefferson City MO 65109 Lincoln University -- Professor <input type="checkbox"/> COMMITTEE:	3/20/2022 ----- \$ 26.03	\$ 26.03 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: John Moseley CITY / STATE: 2194 June Ct EMPLOYER: Jefferson City MO 65109 Lincoln University -- Administration <input type="checkbox"/> COMMITTEE:	3/20/2022 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Eric Harmon CITY / STATE: 3134 Shenandoah Avenue EMPLOYER: Saint Louis MO 63104 Mcanany Van Cleave Phillips -- Attorney <input type="checkbox"/> COMMITTEE:	3/18/2022 ----- \$ 1,000.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;">--</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 Friends For Travis Fitzwater	DATE 4/15/2022
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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: David Shively CITY / STATE: 1801 ASHLEY COURT Fulton MO 65251 EMPLOYER: self employed -- cpa <input type="checkbox"/> COMMITTEE:	3/18/2022 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Tim Remole CITY / STATE: 38932 state Hwy C Excello MO 65247 EMPLOYER: Self -- Self <input type="checkbox"/> COMMITTEE:	3/17/2022 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: LeAnn Cash CITY / STATE: 1182 Choctaw Ridge Dr Holts Summit MO 65043 EMPLOYER: None -- None <input type="checkbox"/> COMMITTEE:	3/17/2022 ----- \$ 208.20	\$ 208.20 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Kendall Danae CITY / STATE: 953 Northwest Birch Court Grain Valley MO 64029 EMPLOYER: Umkc -- Pharmacist <input type="checkbox"/> COMMITTEE:	3/17/2022 ----- \$ 26.03	\$ 26.03 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Dan Cobb CITY / STATE: 3307 S Thornridge Dr Springfield MO 65809 EMPLOYER: retired -- retired <input type="checkbox"/> COMMITTEE:	3/16/2022 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Tim Drury CITY / STATE: 15 Squires Ln. Saint Louis MO 63131 EMPLOYER: Drury Development -- President <input type="checkbox"/> COMMITTEE:	3/16/2022 ----- \$ 2,498.44	\$ 2,498.44 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jake Blankenship CITY / STATE: 701 Custer Road Parsons KS 67357 EMPLOYER: Parsons Nazarene Church -- Sr. Pastor <input type="checkbox"/> COMMITTEE:	3/16/2022 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Arnold Rachel CITY / STATE: 210 Evergreen View Lane Sparta NC 28675 EMPLOYER: Alleghany Co Schools -- Physical therapist <input type="checkbox"/> COMMITTEE:	3/16/2022 ----- \$ 52.05	\$ 52.05 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;">--</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 Friends For Travis Fitzwater	DATE 4/15/2022
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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: Michael Stephens CITY / STATE: 340 S Elgin EMPLOYER: Bolivar MO 65613 State of MO -- State Rep <input type="checkbox"/> COMMITTEE:	3/16/2022 ----- \$ 2,400.00	\$ 2,400.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Nancy Stephens CITY / STATE: 340 S Elgin EMPLOYER: Bolivar MO 65613 retired -- retired <input type="checkbox"/> COMMITTEE:	3/16/2022 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: John Riordan CITY / STATE: 44012 Florence Terrace Ashburn VA 20147 EMPLOYER: Self -- Consultant <input type="checkbox"/> COMMITTEE:	3/15/2022 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Carol Nash CITY / STATE: 6200 43rd Ter No Kenneth City FL 33709 EMPLOYER: retired -- retired <input type="checkbox"/> COMMITTEE:	3/14/2022 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Seth Bauman CITY / STATE: 1402 Pleasant Valley Jefferson City MO 65109 EMPLOYER: State of Missouri -- Director <input type="checkbox"/> COMMITTEE:	3/14/2022 ----- \$ 104.10	\$ 104.10 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Chance Bedell CITY / STATE: 405 W Aldrich Rd Bolivar MO 65613 EMPLOYER: Southwest Baptist University -- Admissions Counselor <input type="checkbox"/> COMMITTEE:	3/10/2022 ----- \$ 10.41	\$ 10.41 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Justin Hill CITY / STATE: 35101 Current River Dr Lake Saint Louis MO 63367 EMPLOYER: Self employed -- Insurance Consultant <input type="checkbox"/> COMMITTEE:	3/8/2022 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Travis Fitzwater CITY / STATE: 1838 Pinnacle Point Holts Summit MO 65043 EMPLOYER: State of MO -- State Rep <input type="checkbox"/> COMMITTEE:	3/8/2022 ----- \$ 1.00	\$ 1.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;">--</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 Friends For Travis Fitzwater	DATE 4/15/2022
---------------------------------------------------	-------------------

INSTRUCTIONS

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

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

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

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: Clyde Lear CITY / STATE: 5618 Saddlebrooke Ln Lohman MO 65053 EMPLOYER: retired -- retired <input type="checkbox"/> COMMITTEE:	3/31/2022 ----- \$ 2,400.00	\$ 2,400.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Sue Lear CITY / STATE: 5618 Saddlebrooke Ln Lohman MO 65053 EMPLOYER: retired -- retired <input type="checkbox"/> COMMITTEE:	3/31/2022 ----- \$ 2,400.00	\$ 2,400.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Graham Insurance Agency CITY / STATE: PO Box 6307 EMPLOYER: Fulton MO 65251 <input type="checkbox"/> COMMITTEE:	3/31/2022 ----- \$ 1,000.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Henry Stratman CITY / STATE: 2692 State Road AA Holts Summit MO 65043 EMPLOYER: retired -- retired <input type="checkbox"/> COMMITTEE:	3/31/2022 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Christopher Geronsin CITY / STATE: 38 Praise Ct Fenton MO 63026 EMPLOYER: self -- Pharmacy Owner <input type="checkbox"/> COMMITTEE:	3/31/2022 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Susan Lippincott CITY / STATE: 3216 Tanglewood Way Fulton MO 65251 EMPLOYER: retired -- retired <input type="checkbox"/> COMMITTEE:	3/31/2022 ----- \$ 1,000.00	\$ 1,000.00 <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

TOTAL: ITEMIZED CONTRIBUTIONS		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div>
(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 Friends For Travis Fitzwater		2. Report Date 4/15/2022	
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			+ 1,152.70
7. Total: Non-Itemized Expenditures This Period (Sum 5 + 6)			\$ 1,152.70
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: View Supplemental Form(s)			<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			+ 2,414.95
14. Total: Itemized Expenditures This Period (Sum 12 + 13)			\$ 2,414.95
15. Total: Monetary Expenditures This Period (Sum 7 + 14)			\$ 3,567.65
16. Amount of Line 15 Above which was Paid Out This Period			\$ 3,567.65
17. Amount of Line 15 Which Were Expenditures Incurred This Period Including Payments Made by Credit Cards			\$ 0.00
18. If Committee Made Any In-Kind Expenditures This Period, List Amount			\$ 0.00
19. Funds Used For Paying Loans/Credit Cards This Period (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:			\$
Address: View Supplemental Form(s)			<input type="checkbox"/> Monetary
City / State:			<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)			\$ 0.00
24. Subtotal: Any Attached Pages			\$ 1,030.00
25. Total: Monetary Contributions Made This Period		A. By Cash / Check	\$ 1,030.00
		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)			\$ 1,030.00
28. Total: In-Kind Contributions Made This Period, List Amount			\$ 0.00



MISSOURI ETHICS COMMISSION
ITEMIZED EXPENDITURES OVER \$100 SUPPLEMENTAL FORM

OFFICE USE ONLY

NAME OF COMMITTEE		REPORT DATE		
Friends For Travis Fitzwater		4/15/2022		
ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS		DATE	PURPOSE - (IF PAYMENT WAS TO A CAMPAIGN WORKER, SHOW AGGREGATE PAID)	AMOUNT THIS PERIOD
NAME AND ADDRESS OF RECIPIENT				
NAME: Brown Printing Signs & Banners, LLC ADDRESS: 1313B Industrial Dr CITY/STATE: Jefferson City MO 65109		3/24/2022	campaign banner \$	\$ <input checked="" type="checkbox"/> PAID 121.46 <input type="checkbox"/> INCURRED
NAME: Brown Printing Signs and Banners ADDRESS: 1313B Industrial Dr CITY/STATE: Jefferson City MO 65109		3/24/2022	campaign banner \$	\$ <input checked="" type="checkbox"/> PAID 119.27 <input type="checkbox"/> INCURRED
NAME: Domenico's Italian Restaurant ADDRESS: 3702 W Truman Blvd #225 CITY/STATE: Jefferson City MO 65109		2/9/2022	campaign meal \$	\$ <input checked="" type="checkbox"/> PAID 135.22 <input type="checkbox"/> INCURRED
NAME: Remole Design ADDRESS: 20490 Granite Rd CITY/STATE: Atlanta MO 63530		3/7/2022	campaign logo \$	\$ <input checked="" type="checkbox"/> PAID 150.00 <input type="checkbox"/> INCURRED
NAME: South Callaway Bank Boosters ADDRESS: 10135 State Hwy C CITY/STATE: Mokane MO 65059		2/8/2022	sponsor \$	\$ <input checked="" type="checkbox"/> PAID 250.00 <input type="checkbox"/> INCURRED
NAME: Imago DEI Photography ADDRESS: 112 South Business 54 CITY/STATE: Eldon MO 65026		3/16/2022	campaign photo \$	\$ <input checked="" type="checkbox"/> PAID 250.00 <input type="checkbox"/> INCURRED
NAME: Ben Chism ADDRESS: 7980 County Road 403 CITY/STATE: Fulton MO 65251		1/7/2022	Campaign Worker \$ 2,500.00	\$ <input checked="" type="checkbox"/> PAID 500.00 <input type="checkbox"/> INCURRED
NAME: Imago DEI Photography ADDRESS: 112 South Business 54 Eldon CITY/STATE: Eldon MO 65026		2/24/2022	campaign photos \$	\$ <input checked="" type="checkbox"/> PAID 390.00 <input type="checkbox"/> INCURRED
NAME: Missouri Girls Town Foundation ADDRESS: 8548 Jade Rd CITY/STATE: Kingdom City MO 65262		3/23/2022	donation \$	\$ <input checked="" type="checkbox"/> PAID 250.00 <input type="checkbox"/> INCURRED
NAME: Elegant Themes, Inc ADDRESS: 977 West Napa Street #1002 CITY/STATE: Sonoma CA 95476		2/28/2022	website design \$	\$ <input checked="" type="checkbox"/> PAID 249.00 <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
CONTRIBUTIONS MADE - SUPPLEMENTAL FORM**

OFFICE USE ONLY

NAME OF COMMITTEE Friends For Travis Fitzwater	DATE 4/15/2022
---------------------------------------------------	-------------------

CONTRIBUTIONS MADE (REGARDLESS OF AMOUNT) NAME AND ADDRESS OF CANDIDATE OR COMMITTEE	DATE	AMOUNT
NAME: Cole County Republican Central Committee ADDRESS: 2024 Scenic Dr CITY / STATE: Jefferson City MO 65101	2/20/2022	\$ 280.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: MO Republican Party ADDRESS: PO Box 73 CITY / STATE: Jefferson City MO 65102	2/22/2022	\$ 300.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: Callaway County Republican Central Committee ADDRESS: 2651 Country Club Dr CITY / STATE: New Bloomfield MO 65063	2/8/2022	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: St Charles County Republican Central Committee ADDRESS: 901 Boone's Lick Road CITY / STATE: St Charles MO 63301	3/24/2022	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE:		\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE:		\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE:		\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE:		\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE:		\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE:		\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE:		\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE:		\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
TOTAL: ITEMIZED CONTRIBUTIONS MADE THIS PAGE (CARRY TO ITEM 25. "SUBTOTAL: ANY ATTACHED PAGES" ON FORM CD-3)		\$ --



Missouri Ethics Commission
ADDENDUM STATEMENT

M.E.C. ID NO. C121012

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.

Miscellaneous Disbursement:

Over contribution limit 07/01/2021 \$2500.00WPG PAC28 N 8th St
STE 317ColumbiaMO65201Check was issued for \$100.00 on 03/31/2022

Amount: 100.00

Miscellaneous Disbursement:

Over Contribution Limit 03/16/2022 \$2498.44Tim Drury15 Squires
Ln.Saint Louis, MO 63131Check was issued for \$98.44 on
03/31/2022

Amount: 98.44