



Missouri Ethics Commission  
**COMMITTEE DISCLOSURE REPORT COVER PAGE**

M.E.C. ID NO. C221824

1. DATE OF REPORT  4/14/2023	OFFICE USE ONLY
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INSTRUCTIONS ON REVERSE SIDE

2. FULL NAME OF COMMITTEE  
 Kathy Steinhoff for the 45th

3. COMMITTEE MAILING ADDRESS  
 301 Fredora Ave

4. COMMITTEE TELEPHONE NUMBER  
 (573) 864-8777

CITY / STATE / ZIP  
 Columbia MO 65203

5. TREASURER'S NAME  
 Henry D Landry Hank

6. TREASURER'S MAILING ADDRESS  
 206 Fredora Avenue

7. TREASURER'S TELEPHONE NUMBER  
 HOME: (573) 489-6381

CITY / STATE / ZIP  
 Columbia MO 65203

WORK:

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

9. DEPUTY TREASURER'S MAILING ADDRESS

10. DEPUTY TREASURER'S TELEPHONE NUMBER  
 HOME:

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 1/1/2023 THROUGH 3/31/2023

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

Mary K Steinhoff  
 301 Fredora Avenue  
 Columbia MO 65203  
 (573) 864-8777  
 State Representative  
 Missouri House of Representatives

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 14 2023 12:05PM

\_\_\_\_\_  
 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 14 2023 12:05PM

\_\_\_\_\_  
 CANDIDATE'S SIGNATURE



**Missouri Ethics Commission**  
**REPORT SUMMARY**  
 Instructions on Reverse Side

Name of Committee Kathy Steinhoff for the 45th	Date of Report 4/14/2023	Office Use Only
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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		\$ 2,474.69	<b>Money On Hand</b>	
2. All Monetary Contributions Received This Period	\$ 289.00			
3. All Loans Received This Period	+ 0.00			
4. Miscellaneous Receipts This Period	+ 0.00			
5. <b>Subtotal</b> Monetary Receipts This Period (Sum 2A + 3A + 4A)	\$ 289.00			
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)	\$ 21,610.62
7. <b>Total</b> All Receipts This Period (Sum 5A + 6A)	\$ 289.00		25. Monetary Receipts this Period (From Item 5 - this page)	+ 289.00
8. <b>Total All Receipts This Election</b> (Sum 1B + 7A)		\$ 2,763.69	26. Monetary Disbursements Made This Period (Sum 10 + 16A + 23) a) Disbursements By Check \$ 722.43 b) Disbursements By Cash \$ 0.00	- 722.43
Expenditures	A. This Period	B. This Calendar Yr or Election Cycle	<b>Indebtedness</b>	
9. Total Expenditures for this election previously reported		\$ 39.97		
10. Expenditures made by cash or check this period	\$ 722.43			
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. <b>Total</b> All expenditures made this period (Sum 10A + 11A + 12A) Including payments made by Credit Card (line 17 CD3)	\$ 722.43		27. Money On Hand at the close of this reporting period (SUM 24 + 25 - 26)	\$ 21,177.19
14. <b>Total Expenditures This Election</b> (Sum 9B + 13A)		\$ 762.40	28. Outstanding Indebtedness at the beginning of this period	\$ 0.00
Contributions Made	A. This Period	B. This Calendar Yr or Election Cycle	29. Loans Received This Period	+ 0.00
15. Total Contributions Made For This Election Previously Reported		\$ 0.00	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	0.00 ← 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. <b>Total</b> Contributions Made This Period (Sum 16A + 17A)	\$ 0.00		32. Debt Forgiven on Loans This Period	- 0.00
19. <b>Total All Contributions Made This Election</b> (Sum 15B + 18A)		\$ 0.00	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	34. Total Indebtedness at the Close of This Reporting Period (Sum 28 + 29 + 30A + 30B - 31 - 32 - 33)	\$ 0.00
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)	+ 0.00			
22. Any Miscellaneous Disbursement Not Reported Elsewhere	+ 0.00			
23. <b>Total Other Disbursements This Period</b> (Sum 20A + 21A + 22A)	\$ 0.00			



**MISSOURI ETHICS COMMISSION**  
**CONTRIBUTIONS AND LOANS RECEIVED**  
 INSTRUCTIONS ON REVERSE SIDE

OFFICE USE ONLY

1. NAME OF COMMITTEE Kathy Steinhoff for the 45th		2. REPORT DATE 4/14/2023	
<b>A. ITEMIZED CONTRIBUTIONS RECEIVED</b> 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		+	\$ 289.00
8. TOTAL: ITEMIZED CONTRIBUTIONS THIS PERIOD (SUM 6 + 7)		\$	289.00
9. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS <b>MONETARY</b> CONTRIBUTIONS		\$	289.00
10. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS <b>IN-KIND</b> CONTRIBUTIONS		\$	0.00
<b>B. NON-ITEMIZED CONTRIBUTIONS RECEIVED</b> (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
<b>C. LOANS RECEIVED</b>		16. DATE RECEIVED	17. AMOUNT OF LOAN (IF MORE THAN \$100 ATTACH CD-1B)
15. NAME AND ADDRESS OF LENDER			
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)		\$	289.00
23. MONETARY CONTRIBUTIONS & LOANS RECEIVED REQUIRING A RECORD OF NAME & ADDRESS (SUM 9, 13 & 20)		\$	289.00



**MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL**

OFFICE USE ONLY

NAME OF COMMITTEE Kathy Steinhoff for the 45th	DATE 4/14/2023
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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)
<b>3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)</b> NAME: ADDRESS: Mary Westerfield CITY / STATE: 101 South Glenwood Columbia MO 65203 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	1/2/2023 ----- \$ 20.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jennifer Cone CITY / STATE: 503 Russell Boulevard Columbia MO 65203 EMPLOYER: Teacher -- Tolton Catholic High School <input type="checkbox"/> COMMITTEE:	1/2/2023 ----- \$ 68.00	\$ 34.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Andy Zimmermann CITY / STATE: 309 North Harrison Kirkwood MO 63122 EMPLOYER: Project Manager -- Greatwest Financial <input type="checkbox"/> COMMITTEE:	1/8/2023 ----- \$ 150.00	\$ 75.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mary Westerfield CITY / STATE: 101 South Glenwood Columbia MO 65203 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	2/2/2023 ----- \$ 30.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Andy Zimmermann CITY / STATE: 309 North Harrison Kirkwood MO 63122 EMPLOYER: Project Manager -- Greatwest Financial <input type="checkbox"/> COMMITTEE:	2/8/2023 ----- \$ 225.00	\$ 75.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mary Westerfield CITY / STATE: 101 South Glenwood Columbia MO 65203 EMPLOYER: Not Employed -- Not Employed <input type="checkbox"/> COMMITTEE:	3/2/2023 ----- \$ 40.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Andy Zimmermann CITY / STATE: 309 North Harrison Kirkwood MO 63122 EMPLOYER: Project Manager -- Greatwest Financial <input type="checkbox"/> COMMITTEE:	3/8/2023 ----- \$ 300.00	\$ 75.00 <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

<b>TOTAL: ITEMIZED CONTRIBUTIONS</b>		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;">--</div>
<b>(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)</b>		



**MISSOURI ETHICS COMMISSION**  
**EXPENDITURES AND CONTRIBUTIONS MADE**  
 Instructions on Reverse Side

Office Use Only

1. Name of Committee Kathy Steinhoff for the 45th		2. Report Date 4/14/2023	
<b>A. Expenditures of \$100 or Less by Category</b> (List Payments to Campaign Workers in Section B Below)			4. Amount Paid or Incurred This Period
3. Category of Expenditure			
5. Subtotal: Non-Itemized Expenditures This Page (Sum Column 4)			\$ 0.00
6. Subtotal: Non-Itemized Expenditures Any Attached Pages			+ 0.00
7. Total: Non-Itemized Expenditures This Period (Sum 5 + 6)			\$ 0.00
<b>B. Itemized Expenditures All Over \$100</b> 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			+ 722.43
14. Total: Itemized Expenditures This Period (Sum 12 + 13)			\$ 722.43
15. Total: Monetary Expenditures This Period (Sum 7 + 14)			\$ 722.43
16. Amount of Line 15 Above which was Paid Out This Period			\$ 722.43
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
<b>C. Contributions Made (Regardless of Amount)</b>		21. Date	22. Amount
20. Name and Address of Candidate or Committee			\$
Name:			<input type="checkbox"/> Monetary
Address:			<input type="checkbox"/> In-Kind
City / State:			\$
Name:			<input type="checkbox"/> Monetary
Address:			<input type="checkbox"/> In-Kind
City / State:			\$
Name:			<input type="checkbox"/> Monetary
Address:			<input type="checkbox"/> In-Kind
City / State:			\$
23. Subtotal: This Page (Sum Column 22)			\$ 0.00
24. Subtotal: Any Attached Pages			\$ 0.00
25. Total: Monetary Contributions Made This Period		A. By Cash / Check	\$ 0.00
		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)			\$ 0.00
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	
Kathy Steinhoff for the 45th		4/14/2023	
ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS		DATE	PURPOSE - (IF PAYMENT WAS TO A CAMPAIGN WORKER, SHOW AGGREGATE PAID)
NAME AND ADDRESS OF RECIPIENT			AMOUNT THIS PERIOD
NAME: Dollar Tree ADDRESS: 2101 W Broadway CITY/STATE: Columbia MO 65203		1/3/2023	Tableware for Legis Ball \$ 21.66 <input checked="" type="checkbox"/> PAID 21.66 <input type="checkbox"/> INCURRED
NAME: Gerbes ADDRESS: 1729 W Broadway CITY/STATE: Columbia MO 65203		1/3/2023	Drinks for Legis Ball \$ 17.55 <input checked="" type="checkbox"/> PAID 17.55 <input type="checkbox"/> INCURRED
NAME: Google Domains ADDRESS: 1600 Amphitheatre Parkway CITY/STATE: Mountain View CA 94043		1/6/2023	Web domain \$ 24.00 <input checked="" type="checkbox"/> PAID 12.00 <input type="checkbox"/> INCURRED
NAME: House Dem Caucus ADDRESS: 201 West Capitol Avenue CITY/STATE: Jefferson City MO 65101		1/10/2023	Caucus Dues \$ 100.00 <input checked="" type="checkbox"/> PAID 100.00 <input type="checkbox"/> INCURRED
NAME: Google Domains ADDRESS: 1600 Amphitheatre Parkway CITY/STATE: Mountain View CA 94043		2/6/2023	Web domain \$ 36.00 <input checked="" type="checkbox"/> PAID 12.00 <input type="checkbox"/> INCURRED
NAME: Google Domains ADDRESS: 1600 Amphitheatre Parkway CITY/STATE: Mountain View CA 94043		2/23/2023	Web domain \$ 48.00 <input checked="" type="checkbox"/> PAID 12.00 <input type="checkbox"/> INCURRED
NAME: Google Domains ADDRESS: 1600 Amphitheatre Parkway CITY/STATE: Mountain View CA 94043		2/24/2023	Web domain \$ 54.46 <input checked="" type="checkbox"/> PAID 6.46 <input type="checkbox"/> INCURRED
NAME: Google Domains ADDRESS: 1600 Amphitheatre Parkway CITY/STATE: Mountain View CA 94043		3/27/2023	Web domain \$ 66.46 <input checked="" type="checkbox"/> PAID 12.00 <input type="checkbox"/> INCURRED
NAME: MO Dems ADDRESS: 4218 Roanoke Rd Suite 304 CITY/STATE: Kansas City MO 64111		1/30/2023	Membership Dues \$ 200.00 <input checked="" type="checkbox"/> PAID 200.00 <input type="checkbox"/> INCURRED
NAME: Boone County Dems ADDRESS: PO Box 1294 CITY/STATE: Columbia MO 65202		2/8/2023	Reimburse for Diversity Breakfast \$ 25.00 <input checked="" type="checkbox"/> PAID 25.00 <input type="checkbox"/> INCURRED
NAME: Boone County Dems ADDRESS: PO Box 1294 CITY/STATE: Columbia MO 65202		2/10/2023	Chili Supper Table \$ 150.00 <input checked="" type="checkbox"/> PAID 125.00 <input type="checkbox"/> INCURRED
NAME: Central Missouri Community Action Center ADDRESS: 807 N. Providence Rd. CITY/STATE: Columbia MO 65203		2/9/2023	Reimburse for Breakfast \$ 14.00 <input checked="" type="checkbox"/> PAID 14.00 <input type="checkbox"/> INCURRED
NAME: Eric Woods ADDRESS: 201 West Capitol Avenue CITY/STATE: Jefferson City MO 65101		2/8/2023	Reimburse for Capitol Mixer \$ 50.00 <input checked="" type="checkbox"/> PAID 50.00 <input type="checkbox"/> INCURRED
NAME: Women Legislators of Missouri (via Give Butter) ADDRESS: 201 West Capitol Avenue CITY/STATE: Jefferson City MO 65101		3/6/2023	Membership Dues for Women Legislators of Missouri \$ 103.30 <input checked="" type="checkbox"/> PAID 103.30 <input type="checkbox"/> INCURRED
NAME: actBlue Technical Services ADDRESS: 366 Summer Street CITY/STATE: Somerville MA 2144		3/31/2023	Online donation processing fees \$ 11.46 <input checked="" type="checkbox"/> PAID 11.46 <input type="checkbox"/> INCURRED
<b>TOTAL: ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS</b> (CARRY TO ITEM 13. "SUBTOTAL: ANY ATTACHED PAGES" ON FORM CD-3)			\$ --