



Missouri Ethics Commission
COMMITTEE DISCLOSURE REPORT COVER PAGE

M.E.C. ID NO. C243200

1. DATE OF REPORT 5/9/2025	OFFICE USE ONLY
-----------------------------------	-----------------

INSTRUCTIONS ON REVERSE SIDE

2. FULL NAME OF COMMITTEE Murphy for Mayor	
3. COMMITTEE MAILING ADDRESS 2501 Chelan Circle	4. COMMITTEE TELEPHONE NUMBER (573) 999-4013
CITY / STATE / ZIP Columbia MO 65203	
5. TREASURER'S NAME John W Fields Jr.	
6. TREASURER'S MAILING ADDRESS 2402 Lichfield Dr.	7. TREASURER'S TELEPHONE NUMBER HOME: (573) 289-4700 WORK:
CITY / STATE / ZIP Columbia MO 65202	
8. DEPUTY TREASURER'S NAME <input type="checkbox"/> CHECK IF NO DEPUTY TREASURER Beth A Campbell	
9. DEPUTY TREASURER'S MAILING ADDRESS 2513 Chelan Circle Columbia MO 65203	10. DEPUTY TREASURER'S TELEPHONE NUMBER HOME: (573) 999-4013 WORK:
CITY / STATE / ZIP	
11. DATE OF ELECTION 4/8/2025	12. TYPE OF ELECTION (CHECK ONE) <input type="radio"/> PRIMARY <input checked="" type="radio"/> GENERAL <input type="radio"/> SPECIAL
13. TIME PERIOD COVERED BY THIS STATEMENT FROM 4/1/2025 THROUGH 5/3/2025	
14. CANDIDATE COMMITTEES ONLY: LIST CANDIDATE'S NAME, ADDRESS, PHONE, OFFICE SOUGHT, POLITICAL SUBDIVISION AND POLITICAL PARTY Michael B Murphy 2501 Chelan Circle Columbia MO 65203 (573) 489-1887 Mayor City of Columbia <input type="checkbox"/> CHECK IF INCUMBENT <input type="checkbox"/> REPUBLICAN <input type="checkbox"/> DEMOCRAT <input checked="" type="checkbox"/> Non-Partisan	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 May 9 2025 6:15PM _____ 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 May 9 2025 6:15PM _____ CANDIDATE'S SIGNATURE



Missouri Ethics Commission

REPORT SUMMARY

Instructions on Reverse Side

Name of Committee

Murphy for Mayor

Date of Report

5/9/2025

Office Use Only

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		\$ 262,709.86		
2. All Monetary Contributions Received This Period	\$ 2,050.00			
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)	\$ 2,050.00			
6. In-kind Contributions Received This Period	+ 0.00			
7. Total All Receipts This Period (Sum 5A + 6A)	\$ 2,050.00			
8. Total All Receipts This Election (Sum 1B + 7A)		\$ 264,759.86		
Expenditures	A. This Period	B. This Calendar Yr or Election Cycle		
9. Total Expenditures for this election previously reported		\$ 183,415.15		
10. Expenditures made by cash or check this period	\$ 72,176.18			
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)	+ 4,790.51			
13. Total All expenditures made this period (Sum 10A + 11A + 12A) Including payments made by Credit Card (line 17 CD3)	\$ 76,966.69			
14. Total Expenditures This Election (Sum 9B + 13A)		\$ 260,381.84		
Contributions Made	A. This Period	B. This Calendar Yr or Election Cycle		
15. Total Contributions Made For This Election Previously Reported		\$ 0.00		
16. All Contributions Made This Period (25A or 25B of CD3)	A 0.00 B 0.00	↔ Cash/Check ↔ Credit Card		
17. All In-Kind Contributions Made This Period	+ 0.00			
18. Total Contributions Made This Period (Sum 16A + 17A)	\$ 0.00			
19. Total All Contributions Made This Election (Sum 15B + 18A)		\$ 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			
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. Total Other Disbursements This Period (Sum 20A + 21A + 22A)	\$ 0.00			
			Money On Hand	
			24. Money On Hand at the beginning of this reporting period (Including funds in depository, cash, savings accounts and all other investments)	\$ 70,469.46
			25. Monetary Receipts this Period (From Item 5 - this page)	+ 2,050.00
			26. Monetary Disbursements Made This Period (Sum 10 + 16A + 23) a) Disbursements By Check \$ 72,176.18 b) Disbursements By Cash \$ 0.00	- 72,176.18
			27. Money On Hand at the close of this reporting period (SUM 24 + 25 - 26)	\$ 343.28
			Indebtedness	
			28. Outstanding Indebtedness at the beginning of this period	\$ 0.00
			29. Loans Received This Period	+ 0.00
			30. A. New Expenditures Incurred This Period (include payments by Credit Card (Line 17 CD3)	+ 4,790.51
			B. New Contributions Made by Credit Card (Line 25B CD3)	+ 0.00
			31. Payments Made on Loans This Period	- 0.00
			32. Debt Forgiven on Loans This Period	- 0.00
			33. Payments Made This Period on Expenditures Incurred in Previous Period (Paid by Cash/Check Only) (Line 21 this page)	- 0.00
			34. Total Indebtedness at the Close of This Reporting Period (Sum 28 + 29 + 30A + 30B - 31 - 32 - 33)	\$ 4,790.51



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS AND LOANS RECEIVED
INSTRUCTIONS ON REVERSE SIDE

OFFICE USE ONLY

1. NAME OF COMMITTEE Murphy for Mayor		2. REPORT DATE 5/9/2025	
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
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		+ \$ 2,050.00	
8. TOTAL: ITEMIZED CONTRIBUTIONS THIS PERIOD (SUM 6 + 7)		\$ 2,050.00	
9. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS MONETARY CONTRIBUTIONS		\$ 2,050.00	
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)		\$ 2,050.00	
23. MONETARY CONTRIBUTIONS & LOANS RECEIVED REQUIRING A RECORD OF NAME & ADDRESS (SUM 9, 13 & 20)		\$ 2,050.00	



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE Murphy for Mayor	DATE 5/9/2025
---------------------------------------	------------------

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: Russ Fletcher CITY / STATE: 3012 Alsup Drive Columbia MO 65203 EMPLOYER: Auto repair <input type="checkbox"/> COMMITTEE:	4/2/2025 \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: John State CITY / STATE: 3065 Arrowhead Lake Dr Columbia MO 65203 EMPLOYER: Little Dixie <input type="checkbox"/> COMMITTEE:	4/4/2025 \$ 1,000.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Bruce and Pamela Walker CITY / STATE: 6013 Dornagh Ct Columbia MO 65203 EMPLOYER: retired <input type="checkbox"/> COMMITTEE:	4/4/2025 \$ 300.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Thomas Downes CITY / STATE: 4006 Frontgate Dr Columbia MO 65203 EMPLOYER: insurance agent <input type="checkbox"/> COMMITTEE:	4/5/2025 \$ 150.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Albert Chance CITY / STATE: 1501 Fox Run Dr Columbia MO 65202 EMPLOYER: Fox Run Properties <input type="checkbox"/> COMMITTEE:	4/7/2025 \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Denny and Dodie Douglas CITY / STATE: 2902 Shoreside Dr Columbia MO 65203 EMPLOYER: retired <input type="checkbox"/> COMMITTEE:	4/3/2025 \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Quinn Bellmar CITY / STATE: 4420 Silver Valley Columbia MO 65203 EMPLOYER: builder <input type="checkbox"/> COMMITTEE:	4/11/2025 \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Fred Overton CITY / STATE: 2712 Chapel Wood View Columbia MO 65203 EMPLOYER: Developer <input type="checkbox"/> COMMITTEE:	4/2/2025 \$ 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 Murphy for Mayor	DATE 5/9/2025
---------------------------------------	------------------

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 and Catherine Troyer CITY / STATE: 3800 Frontenac Place EMPLOYER: Columbia MO 65203 requested -- Owner Paper Company <input type="checkbox"/> COMMITTEE:	4/23/2025 ----- \$ 200.00	\$ 200.00 <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
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 Murphy for Mayor		2. Report Date 5/9/2025	
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		+ 242.53	
7. Total: Non-Itemized Expenditures This Period (Sum 5 + 6)		\$ 242.53	
B. Itemized Expenditures All Over \$100 And All Payments To Campaign Workers			
8. Name and Address of Recipient	9. Date	10. Purpose - (If Payment was to a Campaign Worker, Show Aggregate Paid)	11. Amount This Period
Name: Address: City / State:			\$ <input type="checkbox"/> Paid <input type="checkbox"/> Incurred
Name: Address: View Supplemental Form(s) City / State:			\$ <input type="checkbox"/> Paid <input type="checkbox"/> Incurred
Name: Address: City / State:			\$ <input type="checkbox"/> Paid <input type="checkbox"/> Incurred
12. Subtotal: This Page (Sum Column 11)		\$ 0.00	
13. Subtotal: Any Attached Pages		+ 76,724.16	
14. Total: Itemized Expenditures This Period (Sum 12 + 13)		\$ 76,724.16	
15. Total: Monetary Expenditures This Period (Sum 7 + 14)		\$ 76,966.69	
16. Amount of Line 15 Above which was Paid Out This Period		\$ 72,176.18	
17. Amount of Line 15 Which Were Expenditures Incurred This Period Including Payments Made by Credit Cards		\$ 4,790.51	
18. If Committee Made Any In-Kind Expenditures This Period, List Amount		\$	
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)			
20. Name and Address of Candidate or Committee	21. Date	22. Amount	
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	
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	



NAME OF COMMITTEE Murphy for Mayor		DATE 5/9/2025
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		
Bank charges	\$	6.65
Travel and Meetings	\$	19.45
Supplies	\$	67.94
Google	\$	60.00
Fundraising expense	\$	39.50
Software	\$	48.99
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
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 Murphy for Mayor		REPORT DATE 5/9/2025	
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: Macy Bean Photography ADDRESS: 4713 Brandon Woods Dr CITY/STATE: Columbia MO 65203	4/9/2025	photography \$	\$ 150.00 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: D'Rowes Restaurant ADDRESS: 1005 Club Village Dr CITY/STATE: Columbia MO 65203	4/8/2025	Watch Party \$	\$ 2,683.79 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Staples ADDRESS: 115 Conley Rd CITY/STATE: Columbia MO 65203	4/1/2025	Supplies \$	\$ 120.93 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Amazon ADDRESS: 410 Terry Ave North CITY/STATE: Seattle WA 98109	4/3/2025	Supplies \$	\$ 150.80 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: USPS ADDRESS: 511 E Walnut CITY/STATE: Columbia MO 65201	4/1/2025	Mailing expense \$	\$ 4,760.00 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: SUDDS UP Auto Detailing ADDRESS: 518 Jefferson St CITY/STATE: Fulton MO 65251	4/14/2025	Sign Repair \$	\$ 600.00 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Angelo's ADDRESS: 4107 S Providence Rd CITY/STATE: Columbia MO 65203	4/4/2025	Food workers \$	\$ 86.62 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Jersey Mikes Subs ADDRESS: 1101 Grindstone Pkwy CITY/STATE: Columbia MO 65201	4/4/2025	door knocker lunch \$	\$ 173.65 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: IHOP ADDRESS: 51 Conley Rd CITY/STATE: Columbia MO 65203	4/8/2025	Food \$	\$ 161.88 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Palm Strategic LLC ADDRESS: PO Box 2114 CITY/STATE: Jefferson City MO 65102	4/16/2025	Strategic Communications and Campaign Management \$	\$ 60,119.43 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Facebook ADDRESS: 1 Hacker Way CITY/STATE: Menlo Park CA 94025	4/11/2025	social media \$	\$ 2,926.55 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Palm Strategic Group LLC ADDRESS: PO Box 2114 CITY/STATE: Jefferson City MO 65102	4/14/2025	sign printing \$	\$ 4,790.51 <input type="checkbox"/> PAID <input checked="" 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
INDEPENDENT CONTRACTOR EXPENDITURE

OFFICE USE ONLY

INSTRUCTIONS ON REVERSE SIDE

NAME OF COMMITTEE Murphy for Mayor			DATE 5/9/2025	
ITEMIZED EXPENDITURES ON PAYMENT TO INDEPENDENT CONTRACTOR (NAME AND ADDRESS OF RECIPIENT)	DATE	DESCRIPTION OF SERVICES RENDERED	PRO-RATED COST FOR SERVICE	TOTAL AMOUNT PAID
Palm Strategic LLC PO Box 2114 Jefferson City MO 65102	4/16/2025	Strategic Communications and Campaign Management	60,119.43	125,700.08
Macy Bean Photography 4713 Brandon Woods Dr Columbia MO 65201	4/9/2025	photography	150.00	150.00
TOTAL ALL PAGES				60,269.43