Missouri Ethics Commission

COMMITTEE DISCLOSURE REPORT COVER PAGE

M.E.C. ID NO. C222307

INSTRUCTIONS ON REVERSE SIDE

1. DATE OF REPORT	OFFICE USE ONLY
10/15/2024	

2. FULL NAME OF COMMITTEE

Committee to Elect Michael Browning

3. COMMITTEE MAILING ADDRESS

4431 Oakland Ave

CITY / STATE / ZIP

Saint Louis MO 63110

4. COMMITTEE TELEPHONE NUMBER

(314) 884-0707

5. TREASURER'S NAME

Sarah Mangapora

6. TREASURER'S MAILING ADDRESS

4565 Arco Ave

CITY / STATE / ZIP

Saint Louis MO 63110

7. TREASURER'S TELEPHONE NUMBER

HOME: (859) 229-8035

WORK:

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

9. DEPUTY TREASURER'S MAILING ADDRESS

CITY / STATE / ZIP

10. DEPUTY TREASURER'S TELEPHONE NUMBER

HOME:

WORK:

11. DATE OF ELECTION

12. TYPE OF ELECTION (CHECK ONE)

○ PRIMARY ○ GENERAL ○ SPECIAL

13. TIME PERIOD COVERED BY THIS STATEMENT

FROM 7/1/2024 THROUGH 9/30/2024

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

Michael Browning

4431 Oakland Ave

Saint Louis MO 63110

(314) 884-0707

Alderperson

City of St. Louis

☐ CHECK IF INCUMBENT

☐ REPUBLICAN ☐ DEMOCRAT ☑ Non-Partisan

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 Oct 15 2024 4:02PM

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 Oct 15 2024 4:02PM

CANDIDATE'S SIGNATURE

Missouri Ethics Commission

REPORT SUMMARY

Instructions on Reverse Side

Name of Committee	Date of Report	Office Use Only
Committee to Elect Michael Browning	10/15/2024	

Receipts	A. This Period	B. This Calendar Yr or Election Cycle
1. Total Receipts For This Election Previously Reported		$ 24,801.66
2. All Monetary Contributions Received This Period	$ 1,872.00	
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)	$ 1,872.00	
6. In-kind Contributions Received This Period	+ 0.00	
7. **Total** All Receipts This Period (Sum 5A + 6A)	$ 1,872.00	
8. **Total All Receipts This Election** (Sum 1B + 7A)		$ 26,673.66

Expenditures	A. This Period	B. This Calendar Yr or Election Cycle
9. Total Expenditures for this election previously reported		$ 38,109.48
10. Expenditures made by cash or check this period	$ 1,897.15	
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)	$ 1,897.15	
14. **Total Expenditures This Election** (Sum 9B + 13A)		$ 40,006.63

Contributions Made	A. This Period	B. This Calendar Yr or Election Cycle
15. Total Contributions Made For This Election Previously Reported		$ 170.00
16. All Contributions Made This Period (25A or 25B of CD3) A	0.00	⇦ Cash/Check
16. All Contributions Made This Period (25A or 25B of CD3) B	0.00	⇦ 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)		$ 170.00

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	

Statement of Beginning and Ending Financial Condition

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)	$ 2,127.33
25. Monetary Receipts this Period (From Item 5 - this page)	+ 1,872.00
26. Monetary Disbursements Made This Period (Sum 10 + 16A + 23) a) Disbursements By Check $ 1,897.15 b) Disbursements By Cash $ 0.00	- 1,897.15
27. Money On Hand at the close of this reporting period (SUM 24 + 25 - 26)	$ 2,102.18

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)	+ 0.00
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)	$ 0.00

MISSOURI ETHICS COMMISSION
CONTRIBUTIONS AND LOANS RECEIVED
INSTRUCTIONS ON REVERSE SIDE

OFFICE USE ONLY

1. NAME OF COMMITTEE	2. REPORT DATE
Committee to Elect Michael Browning	10/15/2024

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: CITY / STATE: EMPLOYER: ☐ COMMITTEE: View Supplemental Form(s)	$	$ ☐ MONETARY ☐ IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: ☐ COMMITTEE:	$	$ ☐ MONETARY ☐ IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: ☐ COMMITTEE:	$	$ ☐ MONETARY ☐ IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: ☐ COMMITTEE:	$	$ ☐ MONETARY ☐ IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: ☐ COMMITTEE:	$	$ ☐ MONETARY ☐ IN-KIND

6. SUBTOTAL: ITEMIZED CONTRIBUTIONS THIS PAGE (SUM COLUMN 5)	$ 0.00
7. SUBTOTAL: ITEMIZED CONTRIBUTIONS ANY ATTACHED PAGES	+ $ 1,872.00
8. TOTAL: ITEMIZED CONTRIBUTIONS THIS PERIOD (SUM 6 + 7)	$ 1,872.00
9. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS **MONETARY** CONTRIBUTIONS	$ 1,872.00
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)	$ 1,872.00
23. MONETARY CONTRIBUTIONS & LOANS RECEIVED REQUIRING A RECORD OF NAME & ADDRESS (SUM 9, 13 & 20)	$ 1,872.00

MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE: Committee to Elect Michael Browning

DATE: 10/15/2024

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: Scott Intagliata CITY / STATE: 5146 Waterman Blvd. Saint Louis MO 63108 EMPLOYER: Unico Inc. -- Marketing ☐ COMMITTEE:	7/1/2024 $ 425.00	$ 25.00 ☑ MONETARY ☐ IN-KIND
NAME: ADDRESS: Sarah Mangapora CITY / STATE: 4565 Arco Avenue Saint Louis MO 63110 EMPLOYER: Tarlton Corporation -- Project Manager ☐ COMMITTEE:	7/17/2024 $ 130.00	$ 10.00 ☑ MONETARY ☐ IN-KIND
NAME: ADDRESS: Ann Mandelstamm CITY / STATE: 4525 Lindell Blvd. #304 Saint Louis MO 63108 EMPLOYER: Not Employed -- Not Employed ☐ COMMITTEE:	7/19/2024 $ 230.00	$ 20.00 ☑ MONETARY ☐ IN-KIND
NAME: ADDRESS: Mariah West CITY / STATE: 225 W 7th Ave Cheyenne WY 82001 EMPLOYER: WUSTL -- Research Admin ☐ COMMITTEE:	7/21/2024 $ 140.00	$ 10.00 ☑ MONETARY ☐ IN-KIND
NAME: ADDRESS: Dennis C Lane CITY / STATE: 4466 West Pine Blvd. Saint Louis MO 63108 EMPLOYER: Self -- Writer ☐ COMMITTEE:	7/24/2024 $ 75.00	$ 50.00 ☑ MONETARY ☐ IN-KIND
NAME: ADDRESS: Deneen Dickler CITY / STATE: 97 Old Jaffrey Rd Rindge NH 3461 EMPLOYER: Not Employed -- Not Employed ☐ COMMITTEE:	7/26/2024 $ 200.00	$ 20.00 ☑ MONETARY ☐ IN-KIND
NAME: ADDRESS: Nicholas Whitaker CITY / STATE: 730 Whitney Ave Apt 2B New Haven CT 6511 EMPLOYER: Yale University -- Research Assistant ☐ COMMITTEE:	7/28/2024 $ 10.00	$ 10.00 ☑ MONETARY ☐ IN-KIND
NAME: ADDRESS: Zoe Goffe CITY / STATE: 121 Saint Stephen Street Boston MA 2115 EMPLOYER: Northeastern University -- Student ☐ COMMITTEE:	7/31/2024 $ 1.00	$ 1.00 ☑ MONETARY ☐ 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: Committee to Elect Michael Browning

DATE: 10/15/2024

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: Scott Intagliata CITY / STATE: 5146 Waterman Blvd. Saint Louis MO 63108 EMPLOYER: Unico Inc. -- Marketing ☐ COMMITTEE:	8/1/2024 $ 450.00	$ 25.00 ☑ MONETARY ☐ IN-KIND
NAME: ADDRESS: Sarah Mangapora CITY / STATE: 4565 Arco Avenue Saint Louis MO 63110 EMPLOYER: Tarlton Corporation -- Project Manager ☐ COMMITTEE:	8/17/2024 $ 140.00	$ 10.00 ☑ MONETARY ☐ IN-KIND
NAME: ADDRESS: Ann Mandelstamm CITY / STATE: 4525 Lindell Blvd. #304 Saint Louis MO 63108 EMPLOYER: Not Employed -- Not Employed ☐ COMMITTEE:	8/19/2024 $ 250.00	$ 20.00 ☑ MONETARY ☐ IN-KIND
NAME: ADDRESS: Mariah West CITY / STATE: 225 W 7th Ave Cheyenne WY 82001 EMPLOYER: WUSTL -- Research Admin ☐ COMMITTEE:	8/21/2024 $ 150.00	$ 10.00 ☑ MONETARY ☐ IN-KIND
NAME: ADDRESS: Deneen Dickler CITY / STATE: 97 Old Jaffrey Rd Rindge NH 3461 EMPLOYER: Not Employed -- Not Employed ☐ COMMITTEE:	8/26/2024 $ 220.00	$ 20.00 ☑ MONETARY ☐ IN-KIND
NAME: ADDRESS: Zoe Goffe CITY / STATE: 121 Saint Stephen Street Boston MA 2115 EMPLOYER: Northeastern University -- Student ☐ COMMITTEE:	8/31/2024 $ 2.00	$ 1.00 ☑ MONETARY ☐ IN-KIND
NAME: ADDRESS: Scott Intagliata CITY / STATE: 5146 Waterman Blvd. Saint Louis MO 63108 EMPLOYER: Unico Inc. -- Marketing ☐ COMMITTEE:	9/1/2024 $ 450.00	$ 25.00 ☑ MONETARY ☐ IN-KIND
NAME: ADDRESS: Sarah Mangapora CITY / STATE: 4565 Arco Avenue Saint Louis MO 63110 EMPLOYER: Tarlton Corporation -- Project Manager ☐ COMMITTEE:	9/17/2024 $ 150.00	$ 10.00 ☑ MONETARY ☐ 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: Committee to Elect Michael Browning

DATE: 10/15/2024

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: Ann Mandelstamm CITY / STATE: 4525 Lindell Blvd. #304 Saint Louis MO 63108 EMPLOYER: Not Employed -- Not Employed ☐ COMMITTEE:	9/19/2024 $ 270.00	$ 20.00 ☑ MONETARY ☐ IN-KIND
NAME: ADDRESS: Mariah West CITY / STATE: 225 W 7th Ave Cheyenne WY 82001 EMPLOYER: WUSTL -- Research Admin ☐ COMMITTEE:	9/21/2024 $ 160.00	$ 10.00 ☑ MONETARY ☐ IN-KIND
NAME: ADDRESS: Deneen Dickler CITY / STATE: 97 Old Jaffrey Rd Rindge NH 3461 EMPLOYER: Not Employed -- Not Employed ☐ COMMITTEE:	9/26/2024 $ 240.00	$ 20.00 ☑ MONETARY ☐ IN-KIND
NAME: ADDRESS: Christina Fuller CITY / STATE: 1304 Massachusetts Ave SE Washington DC 20003 EMPLOYER: Digital Promise -- Director ☐ COMMITTEE:	9/26/2024 $ 50.00	$ 50.00 ☑ MONETARY ☐ IN-KIND
NAME: ADDRESS: Sean Spencer CITY / STATE: 4166 Flora Pl. Saint Louis MO 63110 EMPLOYER: Tower Grove CDC -- Executive Director ☐ COMMITTEE:	9/26/2024 $ 500.00	$ 250.00 ☑ MONETARY ☐ IN-KIND
NAME: ADDRESS: Sarah Mangapora CITY / STATE: 4565 Arco Avenue Saint Louis MO 63110 EMPLOYER: Tarlton -- Project Manager ☐ COMMITTEE:	9/26/2024 $ 200.00	$ 50.00 ☑ MONETARY ☐ IN-KIND
NAME: ADDRESS: Jacob Villarreal CITY / STATE: 1500 Massachusetts Avenue Northwest Washington DC 20005 EMPLOYER: Self-employed -- Attorney ☐ COMMITTEE:	9/26/2024 $ 25.00	$ 25.00 ☑ MONETARY ☐ IN-KIND
NAME: ADDRESS: Karen Presley Karabell CITY / STATE: 4147 West Pine Blvd. Saint Louis MO 63108 EMPLOYER: SF Shannon -- Managing Partner ☐ COMMITTEE:	9/27/2024 $ 180.00	$ 180.00 ☑ MONETARY ☐ 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: Committee to Elect Michael Browning

DATE: 10/15/2024

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: William Sharpless CITY / STATE: 4463 Westminster Pl Saint Louis MO 63108 EMPLOYER: Life Medical Co -- Sales ☐ COMMITTEE:	9/27/2024 $ 50.00	$ 50.00 ☑ MONETARY ☐ IN-KIND
NAME: ADDRESS: Katharyn Davis CITY / STATE: 4954 Lindell Boulevard Saint Louis MO 63108 EMPLOYER: Davis & Travaglini LLC -- Attorney ☐ COMMITTEE:	9/29/2024 $ 100.00	$ 100.00 ☑ MONETARY ☐ IN-KIND
NAME: ADDRESS: David Chunn CITY / STATE: 615 Clara Avenue Saint Louis MO 63112 EMPLOYER: Washington University -- City Planner ☐ COMMITTEE:	9/30/2024 $ 105.00	$ 50.00 ☑ MONETARY ☐ IN-KIND
NAME: ADDRESS: Richard Callow CITY / STATE: 1517 Washington Ave Saint Louis MO 63103 EMPLOYER: Public Eye Inc. -- Publicist ☐ COMMITTEE:	9/30/2024 $ 300.00	$ 100.00 ☑ MONETARY ☐ IN-KIND
NAME: ADDRESS: Tom Brackman CITY / STATE: 5108 Waterman Blvd Saint Louis MO 63108 EMPLOYER: Not Employed -- Not Employed ☐ COMMITTEE:	9/30/2024 $ 900.00	$ 200.00 ☑ MONETARY ☐ IN-KIND
NAME: ADDRESS: AGC of MO PAC CITY / STATE: 6330 Knox Industrial Drive EMPLOYER: Saint Louis MO 63139 ☑ COMMITTEE:	7/18/2024 $ 500.00	$ 500.00 ☑ MONETARY ☐ IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: ☐ COMMITTEE:	$	$ ☐ MONETARY ☐ IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: ☐ COMMITTEE:	$	$ ☐ MONETARY ☐ 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	2. Report Date
Committee to Elect Michael Browning	10/15/2024

A. Expenditures of $100 or Less by Category
(List Payments to Campaign Workers in Section B Below)

3. Category of Expenditure	4. Amount Paid or Incurred This Period
View Supplemental Form(s)	
5. Subtotal: Non-Itemized Expenditures This Page (Sum Column 4)	$ 0.00
6. Subtotal: Non-Itemized Expenditures Any Attached Pages	+ 247.15
7. Total: Non-Itemized Expenditures This Period (Sum 5 + 6)	$ 247.15

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:			$ ☐ Paid ☐ Incurred
Name: Address: View Supplemental Form(s) City / State:			$ ☐ Paid ☐ Incurred
Name: Address: City / State:			$ ☐ Paid ☐ Incurred
12. Subtotal: This Page (Sum Column 11)			$ 1,650.00
13. Subtotal: Any Attached Pages			+ 0.00
14. Total: Itemized Expenditures This Period (Sum 12 + 13)			$ 1,650.00
15. Total: Monetary Expenditures This Period (Sum 7 + 14)			$ 1,897.15
16. Amount of Line 15 Above which was Paid Out This Period			$ 1,897.15
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)

20. Name and Address of Candidate or Committee	21. Date	22. Amount
Name: Address: City / State:		$ ☐ Monetary ☐ In-Kind
Name: Address: City / State:		$ ☐ Monetary ☐ In-Kind
Name: Address: City / State:		$ ☐ Monetary ☐ 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

MISSOURI ETHICS COMMISSION

EXPENDITURES OF $100 OR LESS BY CATEGORY - SUPPLEMENTAL FORM

OFFICE USE ONLY

NAME OF COMMITTEE	DATE
Committee to Elect Michael Browning	10/15/2024

EXPENDITURES OF $100 OR LESS BY CATEGORY **(LIST PAYMENTS TO CAMPAIGN WORKERS IN SECTION B ON FORM CD3 OR USE FORM CD3 SUP B)** CATEGORY OF EXPENDITURE	AMOUNT PAID OR INCURRED THIS PERIOD
Bank Fees	$ 12.00
ActBlue Fees	$ 54.27
Web Hosting	$ 139.26
Campaign Printing	$ 41.62
	$
	$
	$
	$
	$
	$
	$
	$
	$
	$
	$
	$
	$
	$
	$
	$
	$
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	REPORT DATE
Committee to Elect Michael Browning	10/15/2024

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: Meyers Okohson Political Consulting ADDRESS: 6780 Southwest Avenue CITY / STATE: Saint Louis MO 63143	7/18/2024	Campaign and Finance Management $	$ 400.00 ☑ PAID ☐ INCURRED
NAME: Meyers Okohson Political Consulting ADDRESS: 6780 Southwest Avenue CITY / STATE: Saint Louis MO 63143	8/15/2024	Campaign and Finance Management $	$ 800.00 ☑ PAID ☐ INCURRED
NAME: Meyers Okohson Political Consulting ADDRESS: 6780 Southwest Avenue CITY / STATE: Saint Louis MO 63143	9/19/2024	Campaign and Finance Management $	$ 400.00 ☑ PAID ☐ INCURRED
NAME: Abortion Action Missouri ADDRESS: PO Box 56574 CITY / STATE: Saint Louis MO 63156	9/9/2024	Advertisement $	$ 50.00 ☑ PAID ☐ INCURRED
NAME: ADDRESS: CITY / STATE:		$	$ ☐ PAID ☐ INCURRED
NAME: ADDRESS: CITY / STATE:		$	$ ☐ PAID ☐ INCURRED
NAME: ADDRESS: CITY / STATE:		$	$ ☐ PAID ☐ INCURRED
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TOTAL: ITEMIZED EXPENDITURES ALL OVER $100 AND ALL PAYMENTS TO CAMPAIGN WORKERS (CARRY TO ITEM 13. "SUBTOTAL: ANY ATTACHED PAGES" ON FORM CD-3)			$ --