



Missouri Ethics Commission
COMMITTEE DISCLOSURE REPORT COVER PAGE

M.E.C. ID NO. A161060

1. DATE OF REPORT 2/26/2016	OFFICE USE ONLY
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INSTRUCTIONS ON REVERSE SIDE

2. FULL NAME OF COMMITTEE
 CHRIS MORENO 4 LS

3. COMMITTEE MAILING ADDRESS
 503 SW MARKET ST SUITE D

4. COMMITTEE TELEPHONE NUMBER
 (816) 337-0444

CITY / STATE / ZIP
 LEE'S SUMMIT MO 64063

5. TREASURER'S NAME
 CHRIS MORENO

6. TREASURER'S MAILING ADDRESS
 2428 SE 5TH ST

7. TREASURER'S TELEPHONE NUMBER
 HOME: (816) 337-0444

CITY / STATE / ZIP
 LEE'S SUMMIT MO 64063

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
 4/5/2016

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

13. TIME PERIOD COVERED BY THIS STATEMENT
 FROM 2/5/2016 THROUGH 2/20/2016

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

CHRIS MORENO
 2428 SE 5TH STREET
 LEE'S SUMMIT MO 64063
 (816) 337-0444
 COUNCIL PERSON
 CITY OF LEES SUMMIT

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 40 Day Before General Municipal Election-4/

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 Feb 26 2016 9:43PM

 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 Feb 26 2016 9:43PM

 CANDIDATE'S SIGNATURE



Missouri Ethics Commission

REPORT SUMMARY

Instructions on Reverse Side

Name of Committee CHRIS MORENO 4 LS	Date of Report 2/26/2016	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			\$ 0.00	Money On Hand	
2. All Monetary Contributions Received This Period		\$ 225.00			
3. All Loans Received This Period		+ 7,526.56			
4. Miscellaneous Receipts This Period		+ 0.00			
5. Subtotal Monetary Receipts This Period (Sum 2A + 3A + 4A)		\$ 7,751.56			
6. In-kind Contributions Received This Period		+ 0.00		25. Monetary Receipts this Period (From Item 5 - this page)	+ 7,751.56
7. Total All Receipts This Period (Sum 5A + 6A)		\$ 7,751.56		26. Monetary Disbursements Made This Period (Sum 10 + 16A + 23)	- 7,504.04
8. Total All Receipts This Election (Sum 1B + 7A)			\$ 7,751.56	a) Disbursements By Check \$ 7,204.04 b) Disbursements By Cash \$ 300.00	
Expenditures		A. This Period	B. This Calendar Yr or Election Cycle	Indebtedness	
9. Total Expenditures for this election previously reported			\$ 0.00	27. Money On Hand at the close of this reporting period (SUM 24 + 25 - 26)	\$ 247.52
10. Expenditures made by cash or check this period		\$ 7,504.04		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)		+ 150.00			
13. Total All expenditures made this period (Sum 10A + 11A + 12A) Including payments made by Credit Card (line 17 CD3)		\$ 7,654.04		28. Outstanding Indebtedness at the beginning of this period	\$ 0.00
14. Total Expenditures This Election (Sum 9B + 13A)			\$ 7,654.04	29. Loans Received This Period	+ 7,526.56
Contributions Made		A. This Period	B. This Calendar Yr or Election Cycle	30. A. New Expenditures Incurred This Period (include payments by Credit Card (Line 17 CD3)	
15. Total Contributions Made For This Election Previously Reported			\$ 0.00	+ 150.00	
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)	
	B	0.00	← Credit Card	+ 0.00	
17. All In-Kind Contributions Made This Period		+ 0.00		31. Payments Made on Loans This Period	
18. Total Contributions Made This Period (Sum 16A + 17A)		\$ 0.00		- 0.00	
19. Total All Contributions Made This Election (Sum 15B + 18A)			\$ 0.00	32. Debt Forgiven on Loans This Period	
20. Funds Used For Paying Loans This Period Including Credit Card Payments		+ 0.00		- 0.00	
21. Payments This Period on Prev Reported Expend Incurred (Paid by Cash/Check Only)		+ 0.00		33. Payments Made This Period on Expenditures Incurred in Previous Period (Paid by Cash/Check Only) (Line 21 this page)	
22. Any Miscellaneous Disbursement Not Reported Elsewhere		+ 0.00		- 0.00	
23. Total Other Disbursements This Period (Sum 20A + 21A + 22A)		\$ 0.00		34. Total Indebtedness at the Close of This Reporting Period (Sum 28 + 29 + 30A + 30B - 31 - 32 - 33)	
				\$ 7,676.56	



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS AND LOANS RECEIVED
 INSTRUCTIONS ON REVERSE SIDE

OFFICE USE ONLY

1. NAME OF COMMITTEE CHRIS MORENO 4 LS		2. REPORT DATE 2/26/2016	
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: Christie Scott CITY/STATE: 922 SE 3rd Terr. EMPLOYER: Lees Summit MO 64063 <input type="checkbox"/> COMMITTEE: EA Magazine -- Editor		2/5/2016 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Angela Lampton CITY/STATE: 106 Monroe St EMPLOYER: Lees Summit MO 64063 <input type="checkbox"/> COMMITTEE: Sunfire -- Owner		2/18/2016 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Alyssa Norton CITY/STATE: 3904 SW Evergreen Lane EMPLOYER: Lees Summit MO 64082 <input type="checkbox"/> COMMITTEE: Homemaker		2/5/2016 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Edward Columbus CITY/STATE: 4807 Appleton Ave EMPLOYER: Kansas City MO 64133 <input type="checkbox"/> COMMITTEE: Retired		2/10/2016 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY/STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:		----- \$	\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
6. SUBTOTAL: ITEMIZED CONTRIBUTIONS THIS PAGE (SUM COLUMN 5)			\$ 225.00
7. SUBTOTAL: ITEMIZED CONTRIBUTIONS ANY ATTACHED PAGES			+ \$ 0.00
8. TOTAL: ITEMIZED CONTRIBUTIONS THIS PERIOD (SUM 6 + 7)			\$ 225.00
9. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS MONETARY CONTRIBUTIONS			\$ 225.00
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		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			\$ 7,526.56
20. TOTAL: LOANS THIS PERIOD (SUM 18 + 19)			\$ 7,526.56
21. TOTAL: ALL IN-KIND CONTRIBUTIONS (SUM 10 + 14)			\$ 0.00
22. TOTAL: ALL MONETARY CONTRIBUTIONS (SUM 9, 11, 12 & 13)			\$ 225.00
23. MONETARY CONTRIBUTIONS & LOANS RECEIVED REQUIRING A RECORD OF NAME & ADDRESS (SUM 9, 13 & 20)			\$ 7,751.56



**MISSOURI ETHICS COMMISSION
SUPPLEMENTAL LOAN INFORMATION**

INSTRUCTIONS ON REVERSE SIDE

CHECK TYPE OF FORM	OFFICE USE ONLY
<input checked="" type="checkbox"/> LOAN RECEIVED	
<input type="checkbox"/> LOAN REPAYMENT	

NAME OF COMMITTEE CHRIS MORENO 4 LS	REPORT DATE 2/26/2016
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I. LOAN RECEIVED (LOAN OF MORE THAN \$100)

1. NAME AND ADDRESS OF LENDER
Bull Contracting LLC
500 SW Market St
Suite D
Lees Summit MO 64063

2. NAME(S) AND ADDRESS(ES) OF PERSON(S) LIABLE FOR THE LOAN
Christopher Moreno
2428 SE 5th St
Lees Summit MO 64063

3. LOAN I.D. NUMBER (IF ANY)

4. DATE OF LOAN
2/5/2016

5. AMOUNT OF LOAN
\$ 6,100.00

6. ANNUAL RATE OF INTEREST
0 %

7. TIME PERIOD OF LOAN (MONTH, YEARS, ETC.)
1 year

8. DESCRIBE REPAYMENT SCHEDULE (MONTHLY, SEMI-ANNUALLY, ETC.)
12 months

II. SCHEDULE OF REPAYMENT (PAYMENT MADE OR CREDIT RECEIVED)

1. DATE OF PAYMENT OR CREDIT	2. NAME AND ADDRESS OF LENDER	3. AMOUNT OF PAYMENT OR CREDIT

4. TOTAL PAYMENT OR CREDIT ON LOANS THIS PERIOD (SUM ITEM 3) \$

5. AMOUNT OF ITEM 4 THAT WAS PAYMENT MADE \$

6. AMOUNT OF ITEM 4 THAT WAS CREDIT RECEIVED \$



**MISSOURI ETHICS COMMISSION
SUPPLEMENTAL LOAN INFORMATION**

INSTRUCTIONS ON REVERSE SIDE

CHECK TYPE OF FORM	OFFICE USE ONLY
<input checked="" type="checkbox"/> LOAN RECEIVED	
<input type="checkbox"/> LOAN REPAYMENT	

NAME OF COMMITTEE CHRIS MORENO 4 LS	REPORT DATE 2/26/2016
--	--------------------------

I. LOAN RECEIVED (LOAN OF MORE THAN \$100)

1. NAME AND ADDRESS OF LENDER
Bull Contracting LLC
500 SW Market St
Suite D
Lees Summit MO 64063

2. NAME(S) AND ADDRESS(ES) OF PERSON(S) LIABLE FOR THE LOAN
Christopher Moreno
2428 SE 5th St
Lees Summit MO 64063

3. LOAN I.D. NUMBER (IF ANY)

4. DATE OF LOAN
2/16/2016

5. AMOUNT OF LOAN
\$ 426.56

6. ANNUAL RATE OF INTEREST
0 %

7. TIME PERIOD OF LOAN (MONTH, YEARS, ETC.)
1 year

8. DESCRIBE REPAYMENT SCHEDULE (MONTHLY, SEMI-ANNUALLY, ETC.)
12 months

II. SCHEDULE OF REPAYMENT (PAYMENT MADE OR CREDIT RECEIVED)

1. DATE OF PAYMENT OR CREDIT	2. NAME AND ADDRESS OF LENDER	3. AMOUNT OF PAYMENT OR CREDIT

4. TOTAL PAYMENT OR CREDIT ON LOANS THIS PERIOD (SUM ITEM 3) \$

5. AMOUNT OF ITEM 4 THAT WAS PAYMENT MADE \$

6. AMOUNT OF ITEM 4 THAT WAS CREDIT RECEIVED \$



**MISSOURI ETHICS COMMISSION
SUPPLEMENTAL LOAN INFORMATION**

INSTRUCTIONS ON REVERSE SIDE

CHECK TYPE OF FORM	OFFICE USE ONLY
	<input checked="" type="checkbox"/> LOAN RECEIVED <input type="checkbox"/> LOAN REPAYMENT

NAME OF COMMITTEE CHRIS MORENO 4 LS	REPORT DATE 2/26/2016
--	--------------------------

I. LOAN RECEIVED (LOAN OF MORE THAN \$100)

1. NAME AND ADDRESS OF LENDER
 Bull Contracting LLC
 500 SW Market St
 Suite D
 Lees Summit MO 64063

2. NAME(S) AND ADDRESS(ES) OF PERSON(S) LIABLE FOR THE LOAN
 Christopher Moreno
 2428 SE 5th St
 Lees Summit MO 64063

3. LOAN I.D. NUMBER (IF ANY)

4. DATE OF LOAN
2/16/2016

5. AMOUNT OF LOAN
\$ 1,000.00

6. ANNUAL RATE OF INTEREST
0 %

7. TIME PERIOD OF LOAN (MONTH, YEARS, ETC.)
1 year

8. DESCRIBE REPAYMENT SCHEDULE (MONTHLY, SEMI-ANNUALLY, ETC.)
12 months

II. SCHEDULE OF REPAYMENT (PAYMENT MADE OR CREDIT RECEIVED)

1. DATE OF PAYMENT OR CREDIT	2. NAME AND ADDRESS OF LENDER	3. AMOUNT OF PAYMENT OR CREDIT

4. TOTAL PAYMENT OR CREDIT ON LOANS THIS PERIOD (SUM ITEM 3) \$

5. AMOUNT OF ITEM 4 THAT WAS PAYMENT MADE \$

6. AMOUNT OF ITEM 4 THAT WAS CREDIT RECEIVED \$



MISSOURI ETHICS COMMISSION
EXPENDITURES AND CONTRIBUTIONS MADE
 Instructions on Reverse Side

Office Use Only

1. Name of Committee CHRIS MORENO 4 LS		2. Report Date 2/26/2016	
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			
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. 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			+ 7,654.04
14. Total: Itemized Expenditures This Period (Sum 12 + 13)			\$ 7,654.04
15. Total: Monetary Expenditures This Period (Sum 7 + 14)			\$ 7,654.04
16. Amount of Line 15 Above which was Paid Out This Period			\$ 7,504.04
17. Amount of Line 15 Which Were Expenditures Incurred This Period Including Payments Made by Credit Cards			\$ 150.00
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: 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



MISSOURI ETHICS COMMISSION
ITEMIZED EXPENDITURES OVER \$100 SUPPLEMENTAL FORM

OFFICE USE ONLY

NAME OF COMMITTEE CHRIS MORENO 4 LS		REPORT DATE 2/26/2016		
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: GMI ADDRESS: 910 Belle Ave CITY/STATE: winter springs FL 32708		2/5/2016	Direct Mail \$	\$ <input checked="" type="checkbox"/> PAID 5,500.00 <input type="checkbox"/> INCURRED
NAME: GMI ADDRESS: 910 Belle Ave CITY/STATE: Winter Springs FL 32708		2/5/2016	digital marketing \$	\$ <input checked="" type="checkbox"/> PAID 300.00 <input type="checkbox"/> INCURRED
NAME: GMI ADDRESS: 910 Belle Ave CITY/STATE: Winter Springs FL 32708		2/9/2016	graphic design \$	\$ <input checked="" type="checkbox"/> PAID 150.00 <input type="checkbox"/> INCURRED
NAME: Postmaster ADDRESS: 5538 Raytown Rd CITY/STATE: Raytown MO 64129		2/16/2016	postage direct mail \$	\$ <input checked="" type="checkbox"/> PAID 426.56 <input type="checkbox"/> INCURRED
NAME: Service Printing ADDRESS: 1146 Harrison St CITY/STATE: Kansas City MO 64106		2/10/2016	printing \$	\$ <input checked="" type="checkbox"/> PAID 637.66 <input type="checkbox"/> INCURRED
NAME: Service Printing ADDRESS: 1146 Harrison CITY/STATE: Kansas City MO 64106		2/16/2016	printing \$	\$ <input checked="" type="checkbox"/> PAID 639.82 <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:			\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:			\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:			\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:			\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:			\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:			\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:			\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:			\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
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)				\$ --