



MISSOURI ETHICS COMMISSION  
EXPLANATION FOR AMENDED REPORT

OFFICE USE ONLY

*[Handwritten initials]*

MEC ID # C091024

This form is to be used when amending a previously filed Campaign Finance Disclosure Report.

1. NAME OF COMMITTEE

2. DATE OF REPORT

Committee to Elect Watson-Wesley Coleman for Mayor

3/11/09

3. REASON FOR AMENDMENT

To correct errors made on the Committee's 40 day before election report.

MISSOURI ETHICS  
COMMISSION  
MAR 16 2009

4. TYPE AND DATE OF PREVIOUSLY FILED REPORT

5. MARK WHICH FORMS ARE BEING AMENDED

- 15 DAYS AFTER CAUCUS NOMINATION
- COMMITTEE QUARTERLY REPORT
  - Jan 15     Apr 15     Jul 15     Oct 15
- 8 DAYS BEFORE ELECTION
- 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 Election Report

- COMMITTEE DISCLOSURE REPORT COVER PAGE (CD COVER)
- REPORT SUMMARY (CD SUMMARY)
- CONTRIBUTIONS AND LOANS RECEIVED (CD1)
- CONTRIBUTIONS RECEIVED-SUPPLEMENTAL (CD1 SUP)
- FUND RAISING STATEMENT (CD1A)
- SUPPLEMENTAL LOAN INFORMATION (CD1B)
- EXPENDITURES AND CONTRIBUTIONS MADE (CD3)
- EXPENDITURE MADE-SUPPLEMENTAL (CD3 SUP)
- CONTRACTUAL RELATIONSHIP REPORT (CD7)
- INDEPENDENT CONTRACTOR EXPENDITURE (CD8)
- DIRECT EXPENDITURE REPORT (POCD4)
- STATEMENT OF INVESTMENTS  
OTHER THAN SAVINGS ACCOUNTS (CD2)
- COMMITTEE TERMINATION STATEMENT (CO3)

AMENDING PREVIOUS REPORT DATED

January 19 20 09



Missouri Ethics Commission  
COMMITTEE DISCLOSURE REPORT COVER PAGE

M.E.C. ID NO. C091024

1. DATE OF REPORT  3/11/09	OFFICE USE ONLY  <i>[Signature]</i> LTC
----------------------------------	--

INSTRUCTIONS ON REVERSE SIDE

2. FULL NAME OF COMMITTEE Committee to Elect Watson-Wesley Coleman for Mayor	
3. COMMITTEE MAILING ADDRESS 4400 Lindell Blvd., Suite 22F	4. COMMITTEE TELEPHONE NUMBER  (314) 650-9878
CITY / STATE / ZIP St. Louis, MO 63103	
5. TREASURER'S NAME Mabel Lattimore	
6. TREASURER'S MAILING ADDRESS 2801 Caroline Street	7. TREASURER'S TELEPHONE NUMBER HOME: (314) 448-1873  WORK:
CITY / STATE / ZIP St. Louis, MO 63104	
8. DEPUTY TREASURER'S NAME <input checked="" type="checkbox"/> CHECK IF NO DEPUTY TREASURER	
9. DEPUTY TREASURER'S MAILING ADDRESS	10. DEPUTY TREASURER'S TELEPHONE NUMBER HOME:  WORK:
CITY / STATE / ZIP	
11. DATE OF ELECTION 3/3/09	12. TYPE OF ELECTION (CHECK ONE) <input checked="" type="checkbox"/> PRIMARY <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIAL
13. TIME PERIOD COVERED BY THIS STATEMENT FROM January 9, 2009 THROUGH January 17, 2009	
14. CANDIDATE COMMITTEES ONLY: LIST CANDIDATE'S NAME, ADDRESS, PHONE, OFFICE SOUGHT, POLITICAL SUBDIVISION AND POLITICAL PARTY  Denise Watson-Wesley Coleman 414 N. 23rd St. St. Louis, MO 63103  (314) 367-5542  Mayor - City of St. Louis  <input type="checkbox"/> CHECK IF INCUMBENT  <input type="checkbox"/> REPUBLICAN <input checked="" type="checkbox"/> DEMOCRAT <input type="checkbox"/>	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 type="checkbox"/> 30 DAYS AFTER ELECTION <input type="checkbox"/> TERMINATION (ATTACH FORM CC-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 <i>40 day before</i> <input checked="" type="checkbox"/> AMENDING PREVIOUS REPORT DATED January 9                      — January 17, 20 09
<b>MISSOURI ETHICS COMMISSION MAR 16 2009</b>	
16. COMMITTEE TREASURER'S SIGNATURE  I CERTIFY THAT THIS REPORT, COMPRISED OF THIS COVER PAGE AND ALL ATTACHED FORMS, IS COMPLETE, TRUE AND ACCURATE.  <i>Mabel Lattimore</i> _____ 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.  <i>Denise Watson-Wesley Coleman</i> _____ CANDIDATE'S SIGNATURE



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

OFFICE USE ONLY

1. NAME OF COMMITTEE Committee to Elect Watson-Wesley Coleman for Mayor		2. REPORT DATE 1-19-09 <del>3-11-09</del>	
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: Pat Cox ADDRESS: 4127 Laclede Ave. CITY / STATE: St. Louis, MO 63108 EMPLOYER: <del>Consultant</del> <input type="checkbox"/> COMMITTEE: <del>Self-Employed</del>		1-8-09	\$ 280.45 <input type="checkbox"/> MONETARY <input checked="" type="checkbox"/> IN-KIND
NAME: Angel Gant ADDRESS: 20 Bon Aire CITY / STATE: Olivette, MO 63132 EMPLOYER: <del>Marketing Representative</del> <input type="checkbox"/> COMMITTEE:		1-8-09	\$ 151.20 <input type="checkbox"/> MONETARY <input checked="" 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)		\$ 431.65	
7. SUBTOTAL: ITEMIZED CONTRIBUTIONS ANY ATTACHED PAGES		+ 0.00	
8. TOTAL: ITEMIZED CONTRIBUTIONS THIS PERIOD (SUM 6 + 7)		\$ 431.65	
9. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS MONETARY CONTRIBUTIONS		\$ 0.00	
10. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS IN-KIND CONTRIBUTIONS		\$ 431.65	
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		\$ 73.31	
13. TOTAL MONETARY CONTRIBUTIONS RECEIVED FROM PERSONS GIVING \$100 OR LESS		\$ 50.00	
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: Denise Watson-Wesley Coleman ADDRESS: 414 N. 23rd St. CITY / STATE: St. Louis, MO 63103		1-2-09	\$ 1202.50
NAME: Denise Watson-Wesley Coleman ADDRESS: 414 N. 23rd St. CITY / STATE: St. Louis, MO 63103		1-3-09, 1-12-09	\$ 645.00
18. SUBTOTAL: LOANS THIS PAGE (SUM COLUMN 17)		\$ 1,847.50	
19. SUBTOTAL: LOANS FROM ANY ATTACHED PAGES		\$ 0.00	
20. TOTAL: LOANS THIS PERIOD (SUM 18 + 19)		\$ 1,847.50	
21. TOTAL: ALL IN-KIND CONTRIBUTIONS (SUM 10 + 14)		\$ 431.65	
22. TOTAL: ALL MONETARY CONTRIBUTIONS (SUM 9, 11, 12 & 13)		\$ 123.31	
23. MONETARY CONTRIBUTIONS & LOANS RECEIVED REQUIRING A RECORD OF NAME & ADDRESS (SUM 9, 13 & 20)		\$ 1,897.50	



**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 Committee to Elect Watson-Wesley Coleman for Mayor	REPORT DATE 3/11/2009
---	--------------------------

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

1. NAME AND ADDRESS OF LENDER  
Denise Watson-Wesley Coleman  
414 N. 23rd St., St. Louis, MO 63103

2. NAME(S) AND ADDRESS(ES) OF PERSON(S) LIABLE FOR THE LOAN  
Denise Watson-Wesley Coleman  
414 N. 23rd St., St. Louis, MO 63103

3. LOAN I.D. NUMBER (IF ANY)	4. DATE OF LOAN 1-2-09	5. AMOUNT OF LOAN \$ 1202.50
------------------------------	---------------------------	---------------------------------

6. ANNUAL RATE OF INTEREST 0 %	7. TIME PERIOD OF LOAN (MONTH, YEARS, ETC.) Not Applicable
-----------------------------------	---

8. DESCRIBE REPAYMENT SCHEDULE (MONTHLY, SEMI-ANNUALLY, ETC.)  
Not Applicable

**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)	\$ 0.00
5. AMOUNT OF ITEM 4 THAT WAS PAYMENT MADE	\$ 0.00
6. AMOUNT OF ITEM 4 THAT WAS CREDIT RECEIVED	\$ 0.00



**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 Committee to Elect Watson-Wesley Coleman for Mayor	REPORT DATE 3/11/2009
---	--------------------------

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

1. NAME AND ADDRESS OF LENDER Denise Watson-Wesley Coleman 414 N. 23rd St., St. Louis, MO 63103
---

2. NAME(S) AND ADDRESS(ES) OF PERSON(S) LIABLE FOR THE LOAN Denise Watson-Wesley Coleman 414 N. 23rd St., St. Louis, MO 63103
---

3. LOAN I.D. NUMBER (IF ANY)	4. DATE OF LOAN 1-3-09	5. AMOUNT OF LOAN \$ 345.00
------------------------------	---------------------------	--------------------------------

6. ANNUAL RATE OF INTEREST 0 %	7. TIME PERIOD OF LOAN (MONTH, YEARS, ETC.) Not Applicable
-----------------------------------	---

8. DESCRIBE REPAYMENT SCHEDULE (MONTHLY, SEMI-ANNUALLY, ETC.) Not Applicable
---

**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)	\$ 0.00
5. AMOUNT OF ITEM 4 THAT WAS PAYMENT MADE	\$ 0.00
6. AMOUNT OF ITEM 4 THAT WAS CREDIT RECEIVED	\$ 0.00



**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 Committee to Elect Watson-Wesley Coleman for Mayor	REPORT DATE 3/11/2009
---	--------------------------

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

1. NAME AND ADDRESS OF LENDER  
Denise Watson-Wesley Coleman  
414 N. 23rd St., St. Louis, MO 63103

2. NAME(S) AND ADDRESS(ES) OF PERSON(S) LIABLE FOR THE LOAN  
Denise Watson-Wesley Coleman  
414 N. 23rd St., St. Louis, MO 63103

3. LOAN I.D. NUMBER (IF ANY)	4. DATE OF LOAN 1-12-09	5. AMOUNT OF LOAN \$ 300.00
------------------------------	----------------------------	--------------------------------

6. ANNUAL RATE OF INTEREST 0 %	7. TIME PERIOD OF LOAN (MONTH, YEARS, ETC.) Not Applicable
-----------------------------------	---

8. DESCRIBE REPAYMENT SCHEDULE (MONTHLY, SEMI-ANNUALLY, ETC.)  
Not Applicable

**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)	\$ 0.00
5. AMOUNT OF ITEM 4 THAT WAS PAYMENT MADE	\$ 0.00
6. AMOUNT OF ITEM 4 THAT WAS CREDIT RECEIVED	\$ 0.00



**MISSOURI ETHICS COMMISSION**  
**EXPENDITURES AND CONTRIBUTIONS MADE**  
 INSTRUCTIONS ON REVERSE SIDE

OFFICE USE ONLY

1. NAME OF COMMITTEE Committee to Elect Watson-Wesley Coleman for Mayor		2. REPORT DATE January 21, 2009 <del>3-11-09</del>	
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)			\$
6. SUBTOTAL: NON-ITEMIZED EXPENDITURES ANY ATTACHED PAGES			+
7. TOTAL: NON-ITEMIZED EXPENDITURES THIS PERIOD (SUM 5 + 6)			\$
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: Andrew Carrington Ace It Now ADDRESS: 251 Parkview Court CITY / STATE: Edwardsville, IL 62025		Jan. 3 & 10, 2009	\$ 595.00 <input type="checkbox"/> PAID <input checked="" type="checkbox"/> INCURRED
NAME: Democratic Central Committee ADDRESS: CITY / STATE:		Jan. 2, 2009	\$ 1,202.50 filing-fee <input type="checkbox"/> PAID <input checked="" type="checkbox"/> INCURRED
NAME: St. Louis Business Journal ADDRESS: CITY / STATE: <del>State of St. Louis</del>		Jan. 9, 2009	\$ 50.00 forum-event <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
12. SUBTOTAL: THIS PAGE (SUM COLUMN 11)			\$ 1,847.50
13. SUBTOTAL: ANY ATTACHED PAGES			+
14. TOTAL: ITEMIZED EXPENDITURES THIS PERIOD (SUM 12 + 13)			\$ 1,847.50
15. TOTAL: MONETARY EXPENDITURES THIS PERIOD (SUM 7 + 14)			\$ 1,847.50
16. AMOUNT OF LINE 15 WHICH WAS PAID OUT THIS PERIOD			\$ 1,847.50
17. AMOUNT OF LINE 15 WHICH WAS DEBT INCURRED THIS PERIOD			\$ 1,847.50
18. IF COMMITTEE MADE ANY IN-KIND EXPENDITURES THIS PERIOD, LIST AMOUNT			\$ -0-
19. FUNDS USED FOR REPAYING LOANS THIS PERIOD (ATTACH FORM CD1B)			\$ -0-
C. CONTRIBUTIONS MADE (REGARDLESS OF AMOUNT)		21. DATE	22. AMOUNT
20. NAME AND ADDRESS OF CANDIDATE OR COMMITTEE			\$ <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
23. SUBTOTAL: THIS PAGE (SUM COLUMN 22)			\$ -0-
24. SUBTOTAL: ANY ATTACHED PAGES			\$ -0-
25. TOTAL: MONETARY CONTRIBUTIONS MADE THIS PERIOD			\$ -0-
26. IF COMMITTEE MADE ANY LOANS THIS PERIOD, LIST AMOUNT			\$ -0-
27. TOTAL: ALL MONETARY CONTRIBUTIONS AND LOANS MADE THIS PERIOD (SUM 25 + 26)			\$ -0-
28. TOTAL: IN-KIND CONTRIBUTIONS MADE THIS PERIOD, LIST AMOUNT			\$ -0-