# RECEIPTS AND EXPENDITURES REPORT FOR A PERSON OTHER THAN A CANDIDATE, PARTY COMMITTEE OR POLITICAL COMMITTEE

(See First Page For Instructions)

Name:Address:		July 29, 2024 (1-1-24 through 7-25-24)						
				State: Zip Code:		Jan. 10, 2025 (10-25-24 through 1		
				ECEIPTS:				
Date Received	Name & Address	Description	Amount					
Total this Period								
XPENDITURES TO FATE OR LOCAL (		ELECTION OF A CANDIDATE OR CANDID	ATES TO					
		Candidate or Committee Supported or Opposed	ATES TO  Amount					
TATE OR LOCAL (	OFFICE:	Candidate or Committee						
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TATE OR LOCAL (	OFFICE:	Candidate or Committee						
Date	OFFICE:	Candidate or Committee Supported or Opposed						
Date  Date  GNATURE:	Name & Address of Vendor	Candidate or Committee Supported or Opposed	Amount					
Date  Date  GNATURE:  Inderstand that the itements herein is a	Name & Address of Vendor  Name & intentional failure to file this report as req	Candidate or Committee Supported or Opposed  Total this Period	Amount					

### **INSTRUCTIONS**

## WHO MUST FILE

The Campaign Finance Act (K.S.A. 25-4150) requires certain persons other than candidates, party committees and other political committees to file reports of political expenditures. This report must be completed by each person, other than a candidate, party committee or other political committee, who makes **Independent** expenditures other than by a contribution to a candidate, party committee or other political committee, in an aggregate amount of \$100 or more within a calendar year. A reportable expenditure is any purchase or payment made, or anything of value used, which expressly advocates the election or defeat of a clearly identifiable candidate, to any state or local office, without the cooperation or consent of the individual intended to be benefitted thereby.

## WHEN AND WHERE TO FILE

The completed form is to be filed with the Secretary of State for independent expenditures made for a **state candidate** (1<sup>st</sup> Floor Memorial Hall, 120 SW 10<sup>th</sup>, Topeka, KS 66612) for the time period when independent expenditures reach an aggregate amount of \$100 or more during the calendar year and for each period thereafter when an independent expenditure is made during the calendar year.

For independent expenditures made for a **local candidate** the report must be filed with the county election officer of the county in which the candidate is on the ballot for the time period when independent expenditures reach an aggregate amount of \$100 or more during the calendar year and for each period thereafter when an independent expenditure is made during the calendar year.

The dates such reports are due and the period they are to cover are set out on the front of this report. If space provided is not sufficient, attach additional sheets making sure to indicate to which item the information pertains.

## **GUIDE TO FORM SECTIONS**

## **RECEIPTS**

**Date received** is to include the month, day and year the receipt is received.

Name means the full name. It is not acceptable to list merely a surname or an initial and a surname.

**Address** is to include the person's street address (or rural route), city, state and zip code.

**Description** is to reflect the form of the receipt, that is, whether it is cash, check, loan or an item or service in-kind. NOTE: By accepting funds from other sources, you and the person giving money to you may qualify as a political committee and have to register as such. "Political committee" means any combination of two or more individuals or any person other than an individual, a major purpose of which is to support or oppose any candidate for state or local office, but not including any candidate committee or party committee.

# **EXPENDITURES**

**Date** is to show the date the vendor was actually paid during the period covered and to include the month, day and year.

Name means the full name of the vendor.

Address is to include the vendor's street address (or rural route), city, state and zip code.

**Candidate or committee supported or opposed** is to include the full name and address, as well as a description of the expenditure, for example, newspaper advertising, television advertising, etc.

Kansas Governmental Ethics Commission 901 S. Kansas Avenue Topeka, Kansas 66612 Office 785-296-4219 Fax 785-296-2548