### Fax & Pages TO 785-296-2548

# KANSAS GOVERNMENTAL ETHICS COMMISSION

10-26-22

# RECEIPTS AND EXPENDITURES REPORT OF A POLITICAL OR PARTY COMMITTEE

#### October 31, 2022

# FILE WITH SECRETARY OF STATE SEE REVERSE SIDE FOR INSTRUCTIONS

| A. | Name of Committee: McPherson County Republican Committee                  |               |
|----|---|---------------|
|    | Address: 845 Chisholm Rd  |               |
|    | City and Zip Code: Inman, KS 67546  |               |
|    | This is a (check one):  Party Committee  Political Committee              |               |
| В. | Check only if appropriate: Amended Filing Termination Report              |               |
| C. | Summary (covering the period from July 22, 2022 through October 27, 2022) |               |
|    | 1. Cash on hand at beginning of period                                    | 2,684.08      |
|    | 2. Total Contributions and Other Receipts (Use Schedule A)                | 130.00        |
|    | 3. Cash available this period (Add Lines 1 and 2)                         | 2,814.08      |
|    | 4. Total Expenditures and Other Disbursements (Use Schedule C)            | 1,331.68      |
|    | 5. Cash on hand at close of period (Subtract Line 4 from 3)               | 1,482.40      |
|    | 6. In-Kind Contributions (Use Schedule B)                                 |               |
|    | 7. Other Transactions (Use Schedule D) 0                                  |               |
|    | · · · · · · · · · · · · · · · · · · ·                                     | e intentional |

### Fax 5 Pages TO 785-296-2548

### KANSAS GOVERNMENTAL ETHICS **COMMISSION**

RECEIPTS AND EXPENDITURES REPORT RECEIVED OF A POLITICAL OR PARTY COMMITTEE OF 26 2022 KS Governmental Ethics Commission

October 31, 2022

#### FILE WITH SECRETARY OF STATE SEE REVERSE SIDE FOR INSTRUCTIONS

| Α.  | Name of Committee: McPherson County Republican Committee  |                |
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|     | Address: 845 Chisholm Rd  |                |
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|     | 2. Total Contributions and Other Receipts (Use Schedule A)  | 130.00         |
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|     | 4. Total Expenditures and Other Disbursements (Use Schedule C)  | 1,331.68       |
|     | 5. Cash on hand at close of period (Subtract Line 4 from 3)   | 1,482.40       |
|     | 6. In-Kind Contributions (Use Schedule B)   |                |
|     | 7. Other Transactions (Use Schedule D)  |                |
|     |   |                |
| Ď.  | "I declare that this report, including any accompanying schedules and statements, has been ex and to the best of my knowledge and belief is true, correct and complete. I understand that t failure to file this document or intentionally filing a false document is a class A misdemean | he intentional |
| Dat | e Signature of Treasurer  |                |
|     | Crc I   | Form 2022      |

## SCHEDULE A CONTRIBUTIONS AND OTHER RECEIPTS

McPherson County Republican Committee (Name of Party Committee or Political Committee)

|         | Name and Address  | Occupation of Individual Giving More   | Check<br>Appropriate Box |       |      |                  | Amount of Cash, Check,   |
|---------|-------------------|--|--------------------------|-------|------|------------------|--------------------------|
| Date    | of Contributor    | Thun \$150   | Cash                     | Check | Long | E fonds<br>Other | Loan or Other<br>Receipt |
| 9-28-22 | Pass the hat      |  | -                        |       |      |                  |                          |
|         |                   |  |                          |       |      |                  | 130.00                   |
|         |                   |  |                          |       |      |                  |                          |
|         |                   |  |                          |       |      |                  |                          |
|         |                   |  |                          |       |      |                  |                          |
|         |                   |  |                          |       |      |                  |                          |
|         |                   |  |                          |       |      |                  |                          |
|         |                   |  |                          |       |      |                  |                          |
|         |                   |  |                          |       |      |                  |                          |
|         |                   |  | -                        | ļ     |      |                  |                          |
|         |                   |  |                          |       |      |                  |                          |
|         |                   |  |                          |       |      |                  |                          |
|         |                   |  |                          |       |      |                  |                          |
|         |                   |  |                          |       |      |                  |                          |
|         |                   |  |                          |       |      |                  |                          |
|         | 50316033 960 1030 | and the second s |                          |       |      | w as 2 i         | = 130,00                 |

#### Complete if last page of Schedule A

| Total Itemized Receipts for Period                  |        |
|---|--------|
| Total Unitermized Contributions (\$50 or less)      | 130.00 |
| Sale of Political Materials (Uniternized)           |        |
| Total Contributions When Contributor Not Known      |        |
| areas, deposites the residence of the second second | 130.00 |

# SCHEDULE B IN-KIND (Non-Monetary) CONTRIBUTIONS

| Mc Phor Son<br>(Name of Party Committee or P | County              | RODI | ublican | Committee |
|--|---------------------|------|---------|-----------|
| (Name of Party Committee or P                | olitical Committee) |      |         |           |

| Date | Name and Address<br>of Contributor | List Occupation<br>for Those Giving an<br>In-Kind of More Than<br>\$150 | Description of In-Kind<br>Contribution | Value of<br>In-Kind<br>Contribution |
|------|------------------------------------|---|--|-------------------------------------|
|      |                                    |   |  |                                     |
|      |                                    |   |  |                                     |
|      |                                    |   |  |                                     |
|      |                                    |   |  |                                     |
|      |                                    |   |  |                                     |
|      |                                    |   |  |                                     |
|      |                                    |   |  |                                     |
|      |                                    |   |  |                                     |
|      |                                    |   |  |                                     |
|      | \$ and a province of the second    |   |  | \$0,00                              |

#### Complete if last page of Schedule B

| Total Itemized (over \$100) In-Kind Contributions   |        |
|---|--------|
| Total Unitemized (\$100 or less) In-Kind Contributions  |        |
| Frank Commission A commission of the Commission | \$0.00 |

## SCHEDULE C EXPENDITURES AND OTHER DISBURSEMENTS

(Name of Party Committee or Political Committee) Jepublican Committee

| Date    | Name and Address To Whom Expenditure is Made                 | Purpose of Expenditure  | Amount                                   |  |
|---------|--|---|--|--|
| Date    | 10 Whom Expenditure is Made                                  | If independent or in-kind expenditure in excess of \$300 is made for a candidate, list candidate name & address | 7000                                     |  |
| 9-14-22 | McPherson County   | Room for meeting  | 25.00                                    |  |
| 9-1422  | Glery 1 Stieben<br>5405 Park, McPhyson Ko                    | Reinburse for meeting expressor   | 22.87                                    |  |
| 9-28-22 |  | Reimburse for meeting exprusp   | 83,81                                    |  |
| 9-14-22 | berek Schmidt for Gove<br>PO Box 4050                        | mor Political Contribution  |  |  |
| ·       | Tope Ka, KS 66604  |   | 500.00                                   |  |
| 9-14-22 | Steve Johnson for Trea<br>PO Box 357/<br>Saling KS G740 Z    | surer Political Contribution  | 200.00                                   |  |
| 9-14-22 |  | Political Contribution  | 200.00                                   |  |
| 9-14-22 | Tracy Mannfor US Co<br>POBOX/084<br>Salina, KS 67402         | ngress Political Contribution   | 100.00                                   |  |
| 9-27-22 | mcPherson SeniorCe   | uter Room for Meeting   |  |  |
|         | McPhorson K= 67460   |   | 100.00                                   |  |
| 10-4-22 | King to back for Arto<br>PO Box 3496<br>Salina, KS 67402-349 | rney General Political Contribution   | 100.00                                   |  |
|         | Salamen Laborat  |   | # -# -# -# -# -# -# -# -# -# -# -# -# -# |  |

#### Complete if last page of Schedule C

| Total Itemized Expenditures This Period   | 1.331.68 |
|---|----------|
| Total Unitemized Expenditures of \$50 or less   |          |
| The the control of the first of the control of the | 1,331.68 |

# SCHEDULE D OTHER TRANSACTIONS

| Name of Party Committee or Pol   | Ponuta           | Republ | ican | Committee |
|----------------------------------|------------------|--------|------|-----------|
| ( Name of Party Committee or Pol | itical Committee |        |      |           |

| Date | Name and Address       | Nature of Account or Loan Payable<br>or Loan Receivable | Balance at<br>Close of<br>Period |
|------|------------------------|---|----------------------------------|
|      |                        |   |                                  |
|      |                        |   |                                  |
|      |                        |   |                                  |
|      |                        |   |                                  |
|      |                        |   |                                  |
|      |                        |   |                                  |
|      |                        |   |                                  |
|      |                        |   | 100                              |
|      |                        |   |                                  |
|      |                        |   |                                  |
|      | Statings, and its pro- |   | \$0.00                           |

Complete if last page of Schedule D

|  | NONE |
|--|------|
|  |      |

Page \_\_\_\_\_\_ of\_\_\_\_\_