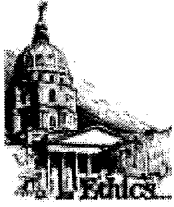


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**Campaign Finance Receipts  
& Expenditures Report**  
10/28/2024

Governmental Ethics Commission  
901 S. Kansas Ave.  
Topeka, KS 66612  
Office (785) 296-4219  
Fax (785) 296-2548  
ethics.kansas.gov

Check only if appropriate  Amended Filing  Termination Report

Campaign Finance Organization Name: **Miami County Kansas Republican Party**

Filing Report Address: **6014 W 295th St**

Address2:

City: **Louisburg** Zip: **66053**

Chairperson Home Phone: Chairperson Business Phone: **(913) 963-6640**

Party Committee  PAC

SUMMARY (covering the period from 7/26/2024 through 10/24/2024)		
1	CASH ON HAND AT BEGINNING OF PERIOD	\$2,785.87
2	TOTAL CONTRIBUTIONS AND OTHER RECEIPTS	(Schedule A) <a href="#">view/print</a> \$65.00
3	CASH AVAILABLE THIS PERIOD	(Add Lines 1 and 2) \$2,850.87
4	TOTAL EXPENDITURES AND OTHER DISBURSEMENTS	(Schedule C) <a href="#">view/print</a> \$2.70
5	CASH ON HAND AT CLOSE OF PERIOD	Subtract Line 4 from 3) \$2,848.17
6	IN-KIND (NON-MONETARY) CONTRIBUTIONS	(Schedule B) <a href="#">view/print</a> \$0.00
7	OTHER TRANSACTIONS	(Schedule D) <a href="#">view/print</a> \$0.00

"I declare that this report, including any accompanying schedules and statements, has been examined by me and to the best of my knowledge and belief is true, correct and complete. I understand that the intentional failure to file this document or intentionally filing a false document is a class A misdemeanor."

Electronically filed on: **10/27/2024 1:58:24 PM**  
Signature of Treasurer: **John F Maddock Jr**

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[Print this form](#) or [Go Back](#)**SCHEDULE A****CONTRIBUTIONS AND OTHER RECEIPTS**

Committee: Miami County Kansas Republican Party

Date	Name and Address of Contributor	Type of Payment	Occupation of Individual Giving	Amount
		Cash, Check, Loan, E-funds, Other	More Than \$150	
Total Itemized Receipts for Period				\$0.00
Total Unitemized Contributions (\$50 or less)				\$65.00
Sale of Political Materials (Unitemized)				\$0
Total Contributions When Contributor Not Known				\$0
<b>TOTAL RECEIPTS THIS PERIOD</b>				<b>\$65.00</b>

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[Print this form](#) or [Go Back](#)**SCHEDULE C****EXPENDITURES AND OTHER DISBURSEMENTS**

Committee: Miami County Kansas Republican Party

Date	Name and Address	Purpose of Expenditure or Disbursement Candidate Name & address if independent or in-kind expenditure in excess of \$300	Amount
<b>Total Itemized Expenditures This Period</b>			<b>\$0</b>
<b>Total Unitemized Expenditures of \$50 or less</b>			<b>\$2.70</b>
<b>TOTAL EXPENDITURES &amp; OTHER DISBURSEMENTS THIS PERIOD</b>			<b>\$2.70</b>

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