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**Campaign Finance Receipts
& Expenditures Report**
1/10/2025

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: **Osage County Democratic Central Committee**

Filing Report Address: **30967 S California Rd**

Address2:

City: **Melvern** Zip: **66510**

Chairperson Home Phone: Chairperson Business Phone:

Party Committee PAC

SUMMARY (covering the period from 10/25/2024 through 12/31/2024)		
1	CASH ON HAND AT BEGINNING OF PERIOD	\$205.80
2	TOTAL CONTRIBUTIONS AND OTHER RECEIPTS	(Schedule A) view/print \$290.00
3	CASH AVAILABLE THIS PERIOD	(Add Lines 1 and 2) \$495.80
4	TOTAL EXPENDITURES AND OTHER DISBURSEMENTS	(Schedule C) view/print \$25.00
5	CASH ON HAND AT CLOSE OF PERIOD	Subtract Line 4 from 3) \$470.80
6	IN-KIND (NON-MONETARY) CONTRIBUTIONS	(Schedule B) view/print \$0.00
7	OTHER TRANSACTIONS	(Schedule D) view/print \$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: **1/3/2025 11:39:38 PM**

Signature of Treasurer: **Kenneth E. Yocum**

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SCHEDULE A
CONTRIBUTIONS AND OTHER RECEIPTS

Committee: Osage County Democratic Central Committee

Date	Name and Address of Contributor	Type of Payment	Occupation of Individual Giving More Than \$150	Amount
		Cash, Check, Loan, E-funds, Other		
Total Itemized Receipts for Period				\$0.00
Total Unitemized Contributions (\$50 or less)				\$290.00
Sale of Political Materials (Unitemized)				\$0
Total Contributions When Contributor Not Known				\$0
TOTAL RECEIPTS THIS PERIOD				\$290.00

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SCHEDULE C

EXPENDITURES AND OTHER DISBURSEMENTS

Committee: Osage County Democratic Central Committee

Date	Name and Address	Purpose of Expenditure or Disbursement Candidate Name & address if independent or in-kind expenditure in excess of \$300	Amount
Total Itemized Expenditures This Period			\$0
Total Unitemized Expenditures of \$50 or less			\$25.00
TOTAL EXPENDITURES & OTHER DISBURSEMENTS THIS PERIOD			\$25.00

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