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**Campaign Finance Receipts  
& Expenditures Report**  
January 10 2015

Governmental Ethics Commission  
109 W. 9th, Suite 504  
Topeka, KS 66612  
Phone (785) 296-4219  
Fax (785) 296-2548  
www.kansas.gov/ethics

Check only if appropriate  Amended Filing  Termination Report

Campaign Finance Candidate Name: **Deena L Horst**  
Filing Report Address: **920 South Ninth Street**  
Address2:  
City: **Salina** Zip: County: **Saline**  
Home Phone: **(785) 827-8540** Business Phone:  
Office Sought: **State Board of Education** District: **6**

SUMMARY (covering the period from January 01 2014 through December 31 2014)		
1	CASH ON HAND AT BEGINNING OF PERIOD	\$159.16
2	TOTAL CONTRIBUTIONS AND OTHER RECEIPTS	(Schedule A) <a href="#">view/print</a> \$1,000.00
3	CASH AVAILABLE THIS PERIOD	(Add Lines 1 and 2) \$1,159.16
4	TOTAL EXPENDITURES AND OTHER DISBURSEMENTS	(Schedule C) <a href="#">view/print</a> \$0.00
5	CASH ON HAND AT CLOSE OF PERIOD	Subtract Line 4 from 3) \$1,159.16
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: **1/21/2016 8:45:49 AM**  
Signature of Candidate or Treasurer: **Brenda R. Smith**

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**SCHEDULE A**  
**CONTRIBUTIONS AND OTHER RECEIPTS**

Candidate: Deena L Horst

Date	Name and Address of Contributor	Type of Payment	Occupation And Industry of Individual Giving More Than \$150	Amount
		Cash, Check, Loan, Other		
12/04/15	Deena Horst 920 S 9th Salina KS 67401	Check	Retired Education	\$1,000.00
<b>Total Itemized Receipts for Period</b>				\$1000.00
<b>Total Unitemized Contributions (\$50 or less)</b>				\$0.00
<b>Sale of Political Materials (Unitemized)</b>				\$0.00
<b>Total Contributions When Contributor Not Known</b>				\$0.00
<b>TOTAL RECEIPTS THIS PERIOD</b>				\$1000.00

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**SCHEDULE C**  
**EXPENDITURES AND OTHER DISBURSEMENTS**

Candidate: Deena L Horst

Date	Name and Address	Purpose of Expenditure or Disbursement	Amount
Total Itemized Expenditures This Period			\$0
Total Unitemized Expenditures of \$50 or less			\$0.00
<b>TOTAL EXPENDITURES &amp; OTHER DISBURSEMENTS THIS PERIOD</b>			<b>\$0.00</b>

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