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## KANSAS GOVERNMENTAL ETHICS COMMISSION

RECEIPTS AND EXPENDITURES REPORT  
OF A CANDIDATE FOR STATE OFFICEJanuary 10, 2007  
~~OCTOBER 30, 2006~~

**RECEIVED**  
JAN 16 2007  
Governmental Ethics Commission  
109 WEST 9TH STREET  
TOPEKA, KANSAS 66612

FILE WITH SECRETARY OF STATE AND CANDIDATE'S COUNTY ELECTION OFFICER  
SEE REVERSE SIDE FOR INSTRUCTIONS

A. Name of Candidate: **DENNINS O'BRIEN**Address: **1583 - 17000 RD.**City and Zip Code: **PARSONS 67357**County: **LB**Office Sought: **DISTRICT REP.**District: **9**B. Check **only** if appropriate: ☐ Amended Filing ☐ Termination ReportC. Summary (covering the period from October 27, 2006 through December 31, 2006)

1. Cash on hand at beginning of period .....	469.00
2. Total Contributions and Other Receipts (Use Schedule A) .....	500.00
3. Cash available this period (Add Lines 1 and 2) .....	969.00
4. Total Expenditures and Other Disbursements (Use Schedule C) .....	936.18
5. Cash on hand at close of period (Subtract Line 4 from 3) .....	32.82
6. In-Kind Contributions (Use Schedule B) .....	
7. Other Transactions (Use Schedule D) .....	

D. "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."

Date

1/10/07

Signature of Treasurer

Robert D O'Brien

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## SCHEDULE A CONTRIBUTIONS AND OTHER RECEIPTS

DENNIS O'BRIEN

(Name of Candidate, Party Committee or Political Committee)

Date	Name and Address of Contributor	Occupation of Individual Giving More Than \$150	Check Appropriate Box				Amount of Cash, Check, Loan or Other Receipt
			Cash	Check	Loan	Other	
11/2/06	Kayala O'Brien		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$500.00
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Subtotal This Page</b>							<b>\$500.00</b>

Complete if last page of Schedule A

Total Itemized Receipts for Period	\$500.00
Total Unitemized Contributions (\$50 or less)	\$0.00
Sale of Political Materials (Unitemized)	\$0.00
Total Contributions When Contributor Not Known	\$0.00
<b>TOTAL RECEIPTS THIS PERIOD (to line 2 of Summary)</b>	<b>\$500.00</b>

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**SCHEDULE B  
IN-KIND CONTRIBUTIONS**

DENNIS O'BRIEN

(Name of Candidate, Party Committee or Political Committee)

Date	Name, Address and Occupation of Contributor List occupation for those giving an in-kind more than \$150	Description of In-Kind Contribution	Value of In-Kind Contribution
<b>Subtotal This Page</b>			\$0.00

Complete if last page of Schedule B

Total Itemized (over \$50) In-Kind Contributions	\$0.00
Total Unitemized (\$50 or less) In-Kind Contributions	
<b>TOTAL IN-KIND CONTRIBUTIONS THIS PERIOD (to line 6 of Summary)</b>	\$0.00

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## SCHEDULE C EXPENDITURES AND OTHER DISBURSEMENTS

DENNIS O'BRIEN

(Name of Candidate, Party Committee or Political Committee)

Date	Name and Address	Purpose of Expenditure or Disbursement	Amount
11/2/06	U.S.P.S.	STAMPS	\$14.20
1/2/07	PARSONS SUN	ADVERTISING	\$78.99
1/2/07	K.L.K.C.	RADIO ADVERTISING	\$360.00
1/4/07	TAYLOR NEWS PAPER	ADVERTISING	\$22.00
1/4/07	DENNIS O'BRIEN	CREDIT CARD REINBURSMENT	\$460.99
Subtotal This Page			\$936.18

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OTHER TRANSACTIONS**

DENNIS O'BRIEN

(Name of Candidate, Party Committee or Political Committee)

Date	Name and Address	Nature of Account or Loan Payable or Loan Receivable	Balance at Close of Period
Subtotal this Page			\$0.00

Complete if last page of Schedule D

**TOTAL OTHER TRANSACTIONS (to line 7 of Summary)**

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