

(785) 291-3051 ~~TKA~~

FILED

**AMENDED**

OCT 04 2010

SECRETARY OF STATE

**KANSAS GOVERNMENTAL ETHICS COMMISSION**

**RECEIPTS AND EXPENDITURES REPORT  
OF A CANDIDATE FOR STATE OFFICE**

January 10, 2010

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

**AMENDED**

A. Name of Candidate: JANA GOODMAN

Address: 410 BROADWAY ST.

City and Zip Code: LEAVENWORTH 66048 County: LEAVENWORTH

Office Sought: KS HOUSE OF REP. District: 41

B. Check only if appropriate:  Amended Filing  Termination Report

C. Summary (covering the period from January 1, 2009 through December 31, 2009)

1. Cash on hand at beginning of period .....	<u>450.54</u>	<u>257.58</u>
2. Total Contributions and Other Receipts (Use Schedule A) .....	<u>-0-</u>	<u>-0-</u>
3. Cash available this period (Add Lines 1 and 2) .....	<u>450.54</u>	<u>257.58</u>
4. Total Expenditures and Other Disbursements (Use Schedule C) .....	<u>5.00</u>	<u>-0-</u>
5. Cash on hand at close of period (Subtract Line 4 from 3) .....	<u>445.54</u>	<u>257.58</u>
6. In-Kind Contributions (Use Schedule B) .....	<u>-0-</u>	<u>105.00</u>
7. Other Transactions (Use Schedule D) .....	<u>-0-</u>	

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."

1/10/2010  
Date

[Signature]  
Signature of Candidate or Treasurer

10/13/2010

**SCHEDULE B  
IN-KIND CONTRIBUTIONS**

JANA GOODMAN  
(Name of Candidate)

Date	Name and Address of Contributor	List Occupation & Industry for Those Giving an In-Kind of More Than \$150	Description of In-Kind Contribution	Value of In-Kind Contribution
APRIL RMW/ 2009	JANA GOODMAN 410 S. BROADWAY LEAVENWORTH KS	CANDIDATE	CASH/FILING FEE	\$105.00
				}
<b>Subtotal This Page</b>				<b>105.00</b>

Complete if last page of Schedule B

Total Itemized ( <del>over \$100</del> ) In-Kind Contributions	105.00
Total Unitemized (\$100 or less) In-Kind Contributions	
<b>TOTAL IN-KIND CONTRIBUTIONS THIS PERIOD (to line 6 of Summary)</b>	<b>105.00</b>

**SCHEDULE C  
EXPENDITURES AND OTHER DISBURSEMENTS**

JANA GOODMAN

(Name of Candidate)

Date	Name and Address	Purpose of Expenditure or Disbursement	Amount
12/21/09	COMMERCE BANK 1000 WALNUT LEAVENWORTH, KS	SERVICE CHARGE	5.00
			5.00

Complete if last page of Schedule c

Total Itemized Expenditures This Period	5.00
Total Unitemized Expenditures of \$50 or less	-0-
	5.00