KANSAS GOVERNMENTAL ETHICS COMMISSION

RECEIPTS AND EXPENDITURES REPORT OF A CANDIDATE FOR STATE OFFICE

July 30, 2012

FILE WITH SECRETARY OF STATE
SEE REVERSE SIDE FOR INSTRUCTIONS

	FILED	-
	JUL 30 2012	
SE	KRIS W. KOBACH CRETARY OF STATE	/

A.	Name of Candidate: MIChael Deterson Address: 450 M. 17 Wh St City and Zip Code: 400505 Clay 45 County: Office Sought: District:	Wy 33
В.	Check only if appropriate: Amended Filing Termination Rep	oort
C.	Summary (covering the period from January 1, 2012 through July 26, 2012) 1. Cash on hand at beginning of period	13148.69 1350.00 13498.69 455.00 13043.69
D. To	2.8. Sanda A.	at the intentional

SCHEDULE A CONTRIBUTIONS AND OTHER RECEIPTS

Michael Deterson

Name and Address		Occupation & Industry of Individual Giving More			eck riste Bo)X	Amount of Cash, Check,
Date	of Contributor	Than \$150	Cash	Check	Loan	It funds Other	Losn or Other Receipt
6/28/	Int. Assocot						
10	Fire Fighters			1			500°0
75/12	Lo Cable PAC			1	-		250°
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13	40 Box 4407 Topeka			1			100
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SCHEDULE A CONTRIBUTIONS AND OTHER RECEIPTS

Michael J Herson

	Name and Address	Occupation & Industry of Individual Giving More	Check Appropriate Box			Amount of Cash, Check,	
Date	of Contributor	Than \$150	Cash	Check	Loan	E funds Other	Loan or Othe Receipt
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	Subtotal This Page						

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Total Itemized Receipts for Period	
Total Unitemized Contributions (\$50 or less)	
Sale of Political Materials (Uniternized)	
Total Contributions When Contributor Not Known	
TOTAL RECEIPTS THIS PERIOD (to line 2 of Summary)	_

SCHEDULE B IN-KIND CONTRIBUTIONS

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

SCHEDULE C EXPENDITURES AND OTHER DISBURSEMENTS

(Name of Candidate)

Date	Name and Address	Purpose of Expenditure or Disbursement	Amount
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SCHEDULE C EXPENDITURES AND OTHER DISBURSEMENTS

(Name of Candidate)

Date	Name and Address	Purpose of Expenditure or Disbursement	Amount
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Total Itemized Expenditures This Period	
Total Unitemized Expenditures of \$50 or less	, —
TOTAL EXPENDITURES & OTHER DISBURSEMENTS THIS PERIOD (to line 4 of Summary)	·

SCHEDULE D OTHER TRANSACTIONS

Name of Candidate)

Date	. Name and Address	Nature of Account or Loan Payable or Loan Receivable	
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TOTAL OTHER 7	RANSACTION	S (to line 7 of Sumi	mary)	