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**Campaign Finance Receipts
& Expenditures Report**
1/10/2021

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 Candidate Name: **Susan L Concannon**
Filing Report Address: **921 North Mill**
Address2:
City: **Beloit** Zip: **67420** County: **Mitchell**
Home Phone: **(785) 738-3161** Business Phone:
Office Sought: **State Representative** District: **107**

SUMMARY (covering the period from 10/23/2020 through 12/31/2020)		
1	CASH ON HAND AT BEGINNING OF PERIOD	\$42,227.73
2	TOTAL CONTRIBUTIONS AND OTHER RECEIPTS	(Schedule A) view/print \$750.00
3	CASH AVAILABLE THIS PERIOD	(Add Lines 1 and 2) \$42,977.73
4	TOTAL EXPENDITURES AND OTHER DISBURSEMENTS	(Schedule C) view/print \$61.00
5	CASH ON HAND AT CLOSE OF PERIOD	Subtract Line 4 from 3) \$42,916.73
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: 1/6/2021 5:17:22 AM Signature of Candidate or Treasurer: Tamarah S. Pruitt		

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[Print this form](#) or [Go Back](#)**SCHEDULE A****CONTRIBUTIONS AND OTHER RECEIPTS****Candidate:** Susan L Concannon

Date	Name and Address of Contributor	Type of Payment	Occupation of Individual Giving More Than \$150	Amount
		Cash, Check, Loan, E-funds, Other		
12/22/20	Kansans for Quality MHS 2117 Cedar Springs Lane Independence KS 67301	Check		\$500.00
11/12/20	Sanofi US Services P O Box 6944 Bridgewater NJ 8807-0944	Check		\$250.00
Total Itemized Receipts for Period				\$750.00
Total Unitemized Contributions (\$50 or less)				\$0
Sale of Political Materials (Unitemized)				\$0
Total Contributions When Contributor Not Known				\$0
TOTAL RECEIPTS THIS PERIOD				\$750.00

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SCHEDULE C
EXPENDITURES AND OTHER DISBURSEMENTS

Candidate: Susan L Concannon

Date	Name and Address	Purpose of Expenditure or Disbursement	Amount
10/24/20	Susan Concannon 921 North Mill Beloit KS 67420	Postage/Shipping reimbursement	\$11.00
10/24/20	Minneapolis Messenger P O Box 108 Minneapolis KS 67467	Subscription 1 year subscription	\$50.00
Total Itemized Expenditures This Period			\$61.00
Total Unitemized Expenditures of \$50 or less			\$0
TOTAL EXPENDITURES & OTHER DISBURSEMENTS THIS PERIOD			\$61.00

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