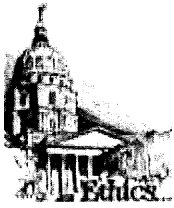


[Print this form](#) or [Go Back](#)



**Campaign Finance Receipts
& Expenditures Report**
1/10/2023

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 Candidate Name: **Cristel Heffron Love**

Finance Address: **1375 N. Broadway Rd**

Filing Report Address2:

City: **Peck** Zip: **67120** County: **Sumner**

Home Phone: Business Phone:

Office Sought: **State Representative** District: **79**

SUMMARY (covering the period from 10/28/2022 through 12/31/2022)

1 CASH ON HAND AT BEGINNING OF PERIOD		\$284.25
2 TOTAL CONTRIBUTIONS AND OTHER RECEIPTS	(Schedule A) view/print	\$25.75
3 CASH AVAILABLE THIS PERIOD	(Add Lines 1 and 2)	\$310.00
4 TOTAL EXPENDITURES AND OTHER DISBURSEMENTS	(Schedule C) view/print	\$10.00
5 CASH ON HAND AT CLOSE OF PERIOD	Subtract Line 4 from 3)	\$300.00
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: **1/11/2023 7:34:18 PM**

Signature of Candidate or Treasurer: **Danette Harris**

[Print this form](#) or [Go Back](#)

[Print this form](#) or [Go Back](#)

SCHEDULE A

CONTRIBUTIONS AND OTHER RECEIPTS

Candidate: Cristel Heffron Love

Date	Name and Address of Contributor	Type of Payment	Occupation of Individual Giving More Than \$150	Amount
		Cash, Check, Loan, E-funds, Other		
Total Itemized Receipts for Period				\$0.00
Total Unitemized Contributions (\$50 or less)				\$25.75
Sale of Political Materials (Unitemized)				\$0
Total Contributions When Contributor Not Known				\$0
TOTAL RECEIPTS THIS PERIOD				\$25.75

[Print this form](#) or [Go Back](#)

[Print this form](#) or [Go Back](#)

SCHEDULE C

EXPENDITURES AND OTHER DISBURSEMENTS

Candidate: Cristel Heffron Love

Date	Name and Address	Purpose of Expenditure or Disbursement	Amount
Total Itemized Expenditures This Period			\$0
Total Unitemized Expenditures of \$50 or less			\$10.00
TOTAL EXPENDITURES & OTHER DISBURSEMENTS THIS PERIOD			\$10.00

[Print this form](#) or [Go Back](#)