

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



**Campaign Finance Receipts
& Expenditures Report**
1/10/2024

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: **Michael Seymour II**
Finance Address: **705 Hockaday st.**
Filing Report Address2:
City: **Council Grove** Zip: **66846** County: **Morris**
Home Phone: **(785) 577-4322** Business Phone:
Office Sought: **State Representative** District: **68**

SUMMARY (covering the period from 1/1/2023 through 12/31/2023)

1 CASH ON HAND AT BEGINNING OF PERIOD		\$592.27
2 TOTAL CONTRIBUTIONS AND OTHER RECEIPTS	(Schedule A) view/print	\$0.00
3 CASH AVAILABLE THIS PERIOD	(Add Lines 1 and 2)	\$592.27
4 TOTAL EXPENDITURES AND OTHER DISBURSEMENTS	(Schedule C) view/print	\$276.00
5 CASH ON HAND AT CLOSE OF PERIOD	Subtract Line 4 from 3)	\$316.27
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: **1/10/2024 8:39:21 PM**
Signature of Candidate or Treasurer: **Abram Harpel**

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

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

SCHEDULE C

EXPENDITURES AND OTHER DISBURSEMENTS

Candidate: Michael Seymour II

Date	Name and Address	Purpose of Expenditure or Disbursement	Amount
Total Itemized Expenditures This Period			\$0
Total Unitemized Expenditures of \$50 or less			\$276.00
TOTAL EXPENDITURES & OTHER DISBURSEMENTS THIS PERIOD			\$276.00

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