

KANSAS GOVERNMENTAL ETHICS COMMISSION

FILED
JUL 28 2008
RON THORNBURGH
SECRETARY OF STATE

RECEIPTS AND EXPENDITURES REPORT
OF A POLITICAL OR PARTY COMMITTEE

JULY 28, 2008

FILE WITH SECRETARY OF STATE
SEE REVERSE SIDE FOR INSTRUCTIONS

A. Name of Committee: Johnson County Victory Fund
Address: PO Box 94
City and Zip Code: Olathe 66051
This is a (check one): Party Committee Political Committee

B. Check only if appropriate: Amended Filing Termination Report

C. Summary (covering the period from January 1, 2008 through July 24, 2008)

Table with 2 columns: Description and Amount. Rows include Cash on hand at beginning of period (1.67), Total Contributions and Other Receipts (20.00), Cash available this period (21.67), Total Expenditures and Other Disbursements (20.00), Cash on hand at close of period (1.67), In-Kind Contributions (0.00), and Other Transactions (0.00).

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."

July 27, 2008
Date Signature of Treasurer

**SCHEDULE A  
CONTRIBUTIONS AND OTHER RECEIPTS**

Johnson County Victory Fund

(Name of Party Committee or Political Committee)

Date	Name and Address of Contributor	Occupation & Industry of Individual Giving More Than \$150	Check Appropriate Box				Amount of Cash, Check, Loan or Other Receipt
			Cash	Check	Loan	Other	
<b>Subtotal This Page</b>							<b>\$0.00</b>

**Complete if last page of Schedule A**

Total Itemized Receipts for Period	\$0.00
Total Unitemized Contributions (\$50 or less)	\$20.00
Sale of Political Materials (Unitemized)	\$0.00
Total Contributions When Contributor Not Known	\$0.00
<b>TOTAL RECEIPTS THIS PERIOD (to line 2 of Summary)</b>	<b>\$20.00</b>

**SCHEDULE C  
EXPENDITURES AND OTHER DISBURSEMENTS**

Johnson County Victory Fund

(Name of Party Committee or Political Committee)

Date	Name and Address	Purpose of Expenditure	Amount
		List candidate name & address if independent or in-kind expenditure in excess of \$300	
<b>Subtotal This Page</b>			\$0.00

Complete if last page of Schedule c

Total Itemized Expenditures This Period	\$0.00
Total Unitemized Expenditures of \$50 or less	\$20.00
<b>TOTAL EXPENDITURES &amp; OTHER DISBURSEMENTS THIS PERIOD (to line 4 of Summary)</b>	<b>\$20.00</b>