

KANSAS GOVERNMENTAL ETHICS COMMISSION

FILED

JAN 12 2015

KRIS W. KOBACH
SECRETARY OF STATE

RECEIPTS AND EXPENDITURES REPORT OF A POLITICAL OR PARTY COMMITTEE

RECEIVED

January 10, 2015

JAN 09 2015

KS Governmental Ethics Commission

**FILE WITH SECRETARY OF STATE
SEE REVERSE SIDE FOR INSTRUCTIONS**

A. Name of Committee: Kansas Occupational Therapy Association Political Action Committee

Address: 825 S Kansas Ave. Suite 500

City and Zip Code: Topeka, KS 66612

This is a (check one): ☐ Party Committee ☒ Political Committee

B. Check **only** if appropriate: ☐ Amended Filing ☐ Termination Report

C. Summary (covering the period from October 24, 2014 through December 31, 2014)

1. Cash on hand at beginning of period	7,520.16
2. Total Contributions and Other Receipts (Use Schedule A)	0
3. Cash available this period (Add Lines 1 and 2)	7520.16
4. Total Expenditures and Other Disbursements (Use Schedule C)	67.39
5. Cash on hand at close of period (Subtract Line 4 from 3)	7,452.77
6. In-Kind Contributions (Use Schedule B)	0
7. Other Transactions (Use Schedule D)	0

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."

1/07/2015
Date

Sandra Braden
Signature of Treasurer

**SCHEDULE C
EXPENDITURES AND OTHER DISBURSEMENTS**

Kansas Occupational Therapy Association Political Action Committee

(Name of Party Committee or Political Committee)

Date	Name and Address To Whom Expenditure is Made	Purpose of Expenditure	Amount
		If independent or in-kind expenditure in excess of \$300 is made for a candidate, list candidate name & address	
11/10/14	Intrust Bank PO Box 2121 Wichita, KS 67201	Bank card monthly merchant fees	\$40.39
12/10/14	Intrust Bank PO Box 2121 Wichita, KS 67201	Bank card monthly merchant fees	\$27.00
Subtotal This Page			\$67.39

Complete if last page of Schedule C

Total Itemized Expenditures This Period	\$67.39
Total Unitemized Expenditures of \$50 or less	\$0.00
TOTAL EXPENDITURES & OTHER DISBURSEMENTS THIS PERIOD (to line 4 of Summary)	\$67.39

Page ____ of ____