RECEIPTS AND EXPENDITURES REPORT 10 2017 OF A POLITICAL OR PARTY COMMITTEE C

FILE WITH SECRETARY OF STATE SEE REVERSE SIDE FOR INSTRUCTIONS

	Address: 825 S. Kansas Ave., Ste. 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 28, 2016 through December 31, 2016)	
	1. Cash on hand at beginning of period	\$ 9,791.39
	2. Total Contributions and Other Receipts (Use Schedule A)	\$ 0
	3. Cash available this period (Add Lines 1 and 2)	\$ 9,791.39
	4. Total Expenditures and Other Disbursements (Use Schedule C)	\$ 44.15
	5. Cash on hand at close of period (Subtract Line 4 from 3)	\$ 9,747.24
	6. In-Kind Contributions (Use Schedule B) \$0	
	7. Other Transactions (Use Schedule D)	
D.	"I declare that this report, including any accompanying schedules and statements, has been exand to the best of my knowledge and belief is true, correct and complete. I understand that failure to file this document or intentionally filing a false document is a class A misdemean	the intentional

SCHEDULE A CONTRIBUTIONS AND OTHER RECEIPTS

Kansas Occupational Therapy Association Political Action Committee
(Name of Party Committee or Political Committee)

	Name and Address of Contributor	Occupation of Individual Giving More Than \$150	Check Appropriate Box				Amount of Cash, Check,
Date			Cash	Check	Loan	E funds Other	Loan or Other Receipt
-,	-						
-							
		1					
	0 9 9						
			2.				
	Subtotal This Page						\$0.

Complete if last page of Schedule A

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

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		If independent or in-kind expenditure in excess of \$300 is made for a candidate, list candidate name & address	1 I M U M I
11/02/16	Intrust Bank 1035 SW Topeka Topeka, KS 66612	credit card fees	\$24.15
12/02/16	Merchant Services Inc. 9012 Research Dr. #200 Irvine, CA 92618	credit card fees	\$20.00
			×
	Subtotal This Page		\$44.15

Complete if last page of Schedule C

Total Itemized Expenditures This Period	\$44.15
Total Unitemized Expenditures of \$50 or less	\$0.00
TOTAL EXPENDITURES & OTHER DISBURSEMENTS THIS PERIOD (to line 4 of Summary)	\$44.15