

KANSAS GOVERNMENTAL ETHICS COMMISSION

RECEIPTS AND EXPENDITURES REPORT
OF A POLITICAL OR PARTY COMMITTEE

RECEIVED

JUL 25 2018

July 30, 2018

FILE WITH SECRETARY OF STATE
SEE REVERSE SIDE FOR INSTRUCTIONS

KS Governmental Ethics Commission

A. Name of Committee: Kansas Dental Hygienists' PAC
Address: 1838 SW Village Dr
City and Zip Code: Topeka KS 66604
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, 2018 through July 26, 2018)

1. Cash on hand at beginning of period	<u>982.83</u>
2. Total Contributions and Other Receipts (Use Schedule A)	<u>.36</u>
3. Cash available this period (Add Lines 1 and 2)	<u>983.19</u>
4. Total Expenditures and Other Disbursements (Use Schedule C)	<u>53.00</u>
5. Cash on hand at close of period (Subtract Line 4 from 3)	<u>930.19</u>
6. In-Kind Contributions (Use Schedule B)	_____
7. Other Transactions (Use Schedule D)	_____

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."

7/22/18
Date

Shanna Clark
Signature of Treasurer

**SCHEDULE B
IN-KIND CONTRIBUTIONS**

KS Dental Hygienists' PAC

(Name of Party Committee or Political Committee)

Date	Name and Address of Contributor	List Occupation for Those Giving an In-kind of More Than \$150	Description of In-Kind Contribution	Value of In-Kind Contribution
12/31	CAPITOL Fed Bank interest income		interest +	.12
3/31	↓		↓	.12
6/30	↓		↓	.12
Subtotal This Page				

Complete if last page of Schedule B

Total Itemized (over \$100) In-Kind Contributions	✓
Total Unitemized (\$100 or less) In-Kind Contributions	.36
TOTAL IN-KIND CONTRIBUTIONS THIS PERIOD (to line 6 of Summary)	.36

**SCHEDULE C
EXPENDITURES AND OTHER DISBURSEMENTS**

KS Dental Hygienists' PAC

(Name of Party Committee or Political Committee)

Date	Name and Address To Whom Expenditure is Made	<u>Purpose of Expenditure</u> If independent or in-kind expenditure in excess of \$300 is made for a candidate, list candidate name & address	Amount
6/25	CAPITOL Federal Bank	cashier CK Fee	3.00
6/25	KS Ethics Commission	Annual Fee	50.00
Subtotal This Page			

Complete if last page of Schedule C

Total Itemized Expenditures This Period	53.00
Total Unitemized Expenditures of \$50 or less	53.00
TOTAL EXPENDITURES & OTHER DISBURSEMENTS THIS PERIOD (to line 4 of Summary)	53.00