KANSAS GOVERNMENTAL ETHICS COMMISSION

RECEIPTS AND EXPENDITURES REPORT OF A POLITICAL OR PARTY COMMITTEE

RECEIVED

July 27, 2020

JUL 2 7 2020

GEC Form Rev, 2020

FILE WITH SECRETARY OF STATES Governmental Ethics Commission SEE REVERSE SIDE FOR INSTRUCTIONS

A. Name of Committee: Kansas 4th Congressional District Democ	ratic Party Committee
Address: 1801 E Giltner Cir	
City and Zip Code: Wichita, 67211	
	olitical Committee
B. Check only if appropriate: Amended Filing T	ermination Report
C. Summary (covering the period from January 1, 2020 through July 23.	2020)
1. Cash on hand at beginning of period	
Total Contributions and Other Receipts (Use Schedule A)	
3. Cash available this period (Add Lines 1 and 2)	
4. Total Expenditures and Other Disbursements (Use Schedule C)	
5. Cash on hand at close of period (Subtract Line 4 from 3)	
6. In-Kind Contributions (Use Schedule B)	
7. Other Transactions (Use Schedule D)	
D. "I declare that this report, including any accompanying schedules and state and to the best of my knowledge and belief is true, correct and complete. failure to file this document or intentionally filing a false document is a complete.	I understand that the intentional
07/27/20 M ///M	
Date Signature of Treasurer	

SCHEDULE A CONTRIBUTIONS AND OTHER RECEIPTS

Kansas 4th Congressional District Democratic Party Committee

(Name of Party Committee or Political Committee)

Date	Name and Address of Contributor	Occupation of Individual Giving More Than \$150	Check Appropriate Box				Amount of Cash, Check,
			Cash	Check	Loan	E funds Other	Loan or Other Receipt
Subtotal This Page					\$0.00		

Complete if last page of Schedule A

Total Itemized Receipts for Period	\$0.00
Total Unitemized Contributions (\$50 or less)	
Sale of Political Materials (Unitemized)	
Total Contributions When Contributor Not Known	\$257.05
TOTAL RECEIPTS THIS PERIOD (to line 2 of Summary)	\$257.05

SCHEDULE C EXPENDITURES AND OTHER DISBURSEMENTS

Kansas 4th Congressional District Democratic Party 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	
06/29/20	Governmental Ethics Commission 901 S Kansas Ave Topeka, KS 66612	Registration Fee	\$50.00
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	Subtotal This Page		\$50.00

Complete if last page of Schedule C

Total Itemized Expenditures This Period	\$50.00
Total Unitemized Expenditures of \$50 or less	
TOTAL EXPENDITURES & OTHER DISBURSEMENTS THIS PERIOD (to line 4 of Summary)	\$50.00