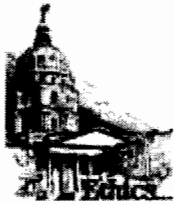


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**Campaign Finance Receipts  
& Expenditures Report**  
1/10/2023

Governmental Ethics Commission  
901 S. Kansas Ave.  
Topeka, KS 66612  
Office (785) 296-4219  
Fax (785) 296-2548  
ethics.kansas.gov

Check only if appropriate  Amended Filing  Termination Report

Campaign Organization Name: **Northern Flyer Alliance, Inc.**

Finance Address: **876 N. Diane Dr.**

Filing Report Address2:

City: **Olathe** Zip: **66061**

Chairperson Home Phone: Chairperson Business Phone: **(913) 827-8380**

Party Committee  PAC

SUMMARY (covering the period from 10/28/2022 through 12/31/2022)		
1	CASH ON HAND AT BEGINNING OF PERIOD	\$0.00
2	TOTAL CONTRIBUTIONS AND OTHER RECEIPTS	(Schedule A) <a href="#">view/print</a> \$500.00
3	CASH AVAILABLE THIS PERIOD	(Add Lines 1 and 2) \$500.00
4	TOTAL EXPENDITURES AND OTHER DISBURSEMENTS	(Schedule C) <a href="#">view/print</a> \$500.00
5	CASH ON HAND AT CLOSE OF PERIOD	Subtract Line 4 from 3) \$0.00
6	IN-KIND (NON-MONETARY) CONTRIBUTIONS	(Schedule B) <a href="#">view/print</a> \$0.00
7	OTHER TRANSACTIONS	(Schedule D) <a href="#">view/print</a> \$0.00

"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."

Electronically filed on: **12/30/2022 11:33:30 AM**

Signature of Treasurer: **Mark A. Corrison**

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**SCHEDULE A**

**CONTRIBUTIONS AND OTHER RECEIPTS**

**Committee:** Northern Flyer Alliance, Inc.

<b>Date</b>	<b>Name and Address of Contributor</b>	<b>Type of Payment</b>	<b>Occupation of Individual Giving More Than \$150</b>	<b>Amount</b>
		Cash, Check, Loan, E-funds, Other		
10/12/22	Mark Corrison 876 North Diane Drive Olathe KS 66061	Check	Archivist-Retired	\$500.00
Total Itemized Receipts for Period				\$500.00
Total Unitemized Contributions (\$50 or less)				\$0
Sale of Political Materials (Unitemized)				\$0
Total Contributions When Contributor Not Known				\$0
<b>TOTAL RECEIPTS THIS PERIOD</b>				<b>\$500.00</b>

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**SCHEDULE C**

**EXPENDITURES AND OTHER DISBURSEMENTS**

**Committee:** Northern Flyer Alliance, Inc.

<b>Date</b>	<b>Name and Address</b>	<b>Purpose of Expenditure or Disbursement Candidate Name &amp; address if independent or in-kind expenditure in excess of \$300</b>	<b>Amount</b>
10/11/22	Laura Kelly P.O. Box 2098 Topeka KS 66601	Donation/Contrib Campaign Contribution Laura Kelly P.O. Box 2098 Topeka KS 66601	\$500.00
Total Itemized Expenditures This Period			\$500.00
Total Unitemized Expenditures of \$50 or less			\$0
<b>TOTAL EXPENDITURES &amp; OTHER DISBURSEMENTS THIS PERIOD</b>			<b>\$500.00</b>

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