

KANSAS GOVERNMENTAL ETHICS COMMISSION

RECEIPTS AND EXPENDITURES REPORT OF A POLITICAL OR PARTY COMMITTEE

RECEIVED

JULY 28, 2008

AUG 07 2009

KS Governmental Ethics Commission

FILE WITH SECRETARY OF STATE
SEE REVERSE SIDE FOR INSTRUCTIONS

A. Name of Committee: ATCHISON COUNTY DEMOCRATIC CENTRAL
Address: 841 SOUTH 4TH STREET COMMITTEE
City and Zip Code: ATCHISON, KS 66002-2904
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, 2008 through July 24, 2008)

| | |
|--|---------------|
| 1. Cash on hand at beginning of period | <u>444.34</u> |
| 2. Total Contributions and Other Receipts (Use Schedule A) | <u>0</u> |
| 3. Cash available this period (Add Lines 1 and 2) | <u>444.34</u> |
| 4. Total Expenditures and Other Disbursements (Use Schedule C) | <u>7.00</u> |
| 5. Cash on hand at close of period (Subtract Line 4 from 3) | <u>437.34</u> |
| 6. In-Kind Contributions (Use Schedule B) | <u>0</u> |
| 7. Other Transactions (Use Schedule D) | <u>0</u> |

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."

8/23/2009
Date

Martha E. O'Keefe / Elizabeth E. Lane
Signature of Treasurer

ATCHISON COUNTY DEMOCRATIC CENTRAL COMMITTEE
(Name of Party Committee or Political Committee)

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**SCHEDULE A
CONTRIBUTIONS AND OTHER RECEIPTS**

ATCHISON COUNTY DEMOCRATIC CENTRAL COMMITTEE
(Name of Party Committee or Political Committee)

| Date | Name and Address of Contributor | Occupation & Industry of Individual Giving More Than \$150 | Check Appropriate Box | | | | Amount of Cash, Check, Loan or Other Receipt |
|---------------------------|------------------------------------|--|--------------------------|--------------------------|--------------------------|--------------------------|---|
| | | | Cash | Check | Loan | Other | |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| | | NONE | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Subtotal This Page | | | | | | | 0 |

Complete if Last page of Schedule A

| | |
|--|---|
| Total Itemized Receipts for Period | 0 |
| Total Unitemized Contributions (\$50 or less) | 0 |
| Sale of Political Materials (Unitemized) | 0 |
| Total Contributions When Contributor Not Known | 0 |
| TOTAL RECEIPTS THIS PERIOD (to line 2 of Summary) | 0 |

**SCHEDULE B
IN-KIND CONTRIBUTIONS**

ATCHISON COUNTY DEMOCRATIC CENTRAL COMMITTEE
(Name of Party Committee or Political Committee)

| Date | Name and Address of Contributor | List Occupation & Industry for Those Giving an In-Kind of More Than \$150 | Description of In-Kind Contribution | Value of In-Kind Contribution |
|--------------------|---------------------------------|---|-------------------------------------|-------------------------------|
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| Subtotal This Page | | | | 0 |

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|---|---|
| Total Itemized (over \$100) In-Kind Contributions | 0 |
| Total Unitemized (\$100 or less) In-Kind Contributions | 0 |
| TOTAL IN-KIND CONTRIBUTIONS THIS PERIOD (to line 6 of Summary) | 0 |

SCHEDULE C
EXPENDITURES AND OTHER DISBURSEMENTS

ATCHISON COUNTY DEMOCRATIC CENTRAL COMMITTEE
(Name of Party Committee or Political Committee)

| Date | Name and Address | Purpose of Expenditure | Amount |
|--------------------|-------------------------|--|--------|
| | | List candidate name & address if independent or in-kind expenditure in excess of \$300 | |
| 1/17/08 | EXCHANGE NATIONAL | CHECKING ACCT. MAINTENANCE | |
| 7/17/08 | BANK & TRUST | FEE | |
| | 600 COMMERCIAL | \$1.00 PER MONTH | \$7.00 |
| | P.O. BOX 189 | X 7 MONTHS | |
| | ATCHISON, KS 66002-0189 | | |
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| Subtotal This Page | | | \$7.00 |

SCHEDULE C
EXPENDITURES AND OTHER DISBURSEMENTS

ATCHISON COUNTY DEMOCRATIC CENTRAL COMMITTEE
(Name of Party Committee or Political Committee)

| Date | Name and Address of Contributor | Purpose of Expenditure | Amount |
|--------------------|---------------------------------|--|--------|
| | | List candidate name & address if independent or in-kind expenditure in excess of \$300 | |
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| Subtotal This Page | | | 0 |

Complete if last page of Schedule C

| | |
|--|---------------|
| Total Itemized Expenditures This Period | \$7.00 |
| Total Unitemized Expenditures of \$50 or less | 0 |
| TOTAL EXPENDITURES & OTHER DISBURSEMENTS THIS PERIOD (to line 4 of Summary) | \$7.00 |