

KANSAS GOVERNMENTAL ETHICS COMMISSION

RECEIVED

RECEIPTS AND EXPENDITURES REPORT  
OF A POLITICAL OR PARTY COMMITTEE

JAN 03 2012

Kansas Governmental Ethics Commission

January 10, 2012

FILE WITH SECRETARY OF STATE  
SEE REVERSE SIDE FOR INSTRUCTIONS

A. Name of Committee: SHERIDAN COUNTY REPUBLICAN CENTRAL COMMITTEE  
 Address: RT 1, Box 57 M  
 City and Zip Code: Hoxie 67740  
 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, 2011 through December 31, 2011)

1. Cash on hand at beginning of period .....	<u>86.69</u>
2. Total Contributions and Other Receipts (Use Schedule A) .....	<u>0</u>
3. Cash available this period (Add Lines 1 and 2) .....	<u>86.69</u>
4. Total Expenditures and Other Disbursements (Use Schedule C) .....	<u>40.00</u>
5. Cash on hand at close of period (Subtract Line 4 from 3) .....	<u>46.69</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."

23 Dec 2011  
Date

Don D. Reinhold  
Signature of Treasurer

**SCHEDULE C  
EXPENDITURES AND OTHER DISBURSEMENTS**

SHERIDAN COUNTY REPUBLICAN CENTRAL 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	
JANUARY 2011	THE HOXIE SENTINEL 640 MAIN ST. HOXIE, KS 67740	PUBLICATION OF NOTICE FOR SHERIDAN COUNTY REGISTER OF DEEDS REPLACEMENT MEETING	40.00
Subtotal This Page			40.00

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EXPENDITURES AND OTHER DISBURSEMENTS**

SHERIDAN COUNTY REPUBLICAN CENTRAL 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	
<b>Subtotal This Page</b>			

Complete if last page of Schedule C

Total Itemized Expenditures This Period	40.00
Total Unitemized Expenditures of \$50 or less	0
<b>TOTAL EXPENDITURES &amp; OTHER DISBURSEMENTS THIS PERIOD (to line 4 of Summary)</b>	<b>40.00</b>