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1.	Name List exactly as it will appear on ballot, including all punctuation.								
2.	City								
3a.	Office sought				3b.	Distr Num			
4.	Term	🔲 Regular 🔲 Unexpired		Preferred title Used for mailing pu	ırposes.	☐ Mr.	Mrs.	☐ Ms.	Dr.
6.	Residential address Provide a street or rural route. Do not leave blank.	Address							
		City		County			Zip		
7.	Mailing address Complete if mailing address is different from above.	Address							
		City		State			Zip		
8.	Telephone number	Home	Work			Cell			
9.	Email address								
10.	I declare that I intend to	become a candidate for the a	bove-stat	ed office at the	e approp	riate el	ection.		
Sign X	ature of Candidate		Today' Date:	s Mo.		Day		Yr.	
Cou X	nty Election Officer or City Clerk		Deputy E X	Election Officer					

DOWNLOAD THIS FORM AT WWW.SOS.KS.GOV

Nominee Information		Nomination					
Name Residential Address		I, the undersigned, an elector of the appropriate election district, county of and state of Kansas, and a duly registered voter, and a member of the Party, hereby nominate the candidate herein named to be voted for at the primary election to be held on the first Tuesday in August in the					
Residential Address	City	year, as representing the principles of such party; and I further declare that I intend to support the candidate and that I have not signed and will not sign any					
Office Sought District No. (if applicable)		nomination petition for any other person, for such office at such	i primary election.				
Print Name	Signature	Street Number or Rural Route City	Date				
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							

Affidavit of petition circulator

STATE OF KANSAS	
COUNTY OF ss.	
I, , Print Name	
(check one):	
I am the circulator of this petition. I am qualified to circulat witnessed the signing of the petition by each person whose	
I am the candidate	
Signature	
Circulator's residence address	
Subscribed and sworn to before me this day of	, 20
(SEAL) Person authorized t	o administer oaths
My appointment expires, 20	

Kansas law states that a petition circulator is a person who is a U.S. citizen, at least 18 years of age, and has not been convicted of a felony, or if convicted of a felony has been pardoned or restored to such person's civil rights.

DEFINITIONS

"Business" means any corporation, association, partnership, proprietorship, trust, joint venture, and every other business interest, including ownership or use of land for income.

"Candidate for Local Office" means any candidate for nomination or election to any elective office of a governmental subdivision.

"**Compensation**" means any money, thing of value or economic benefit conferred on, or received by, any person in return for services rendered, or to be rendered, by that person or another.

"Governmental Subdivision" means any city, county, township, school district, drainage district or other governmental subdivision of the state having authority to receive or hold public moneys or funds.

"Preceding Calendar Year" has its usual meaning, except that in the case of candidates and individuals newly appointed to office or employment, it means the 12 months immediately preceding a required filing date.

WHO SHALL FILE AND WHEN

Statement of substantial interests shall be filed by the following individuals at the time specified:

- By a candidate for local office who becomes a candidate on or before the filing deadline for the office, not later than 10 days after the filing deadline, unless before that time the candidacy is officially declined or rejected.
- By a candidate for local office who becomes a candidate after the filing deadline for that office, within five days of becoming a candidate, unless within that period the candidacy is officially declined or rejected.
- By an individual appointed between January 1 and April 30 to fill a vacancy in an elective office of a governmental subdivision, between April 15 and April 30, inclusive of that year.
- By an individual appointed after April 30 of any year to fill a vacancy in elective office of a governmental subdivision, within 15 days after the appointment.
- By an individual holding an elective office of a governmental subdivision, between April 15 and April 30, inclusive, of any year if, during the preceding calendar year, any change occurred in the individual's substantial interests.

SECTION GUIDE TO FORM

A_B NAME & POSITION: Self-explanatory.

C OWNERSHIP INTERESTS: The value or percentage of a business interest is to be determined at the time of the required filing. The value assigned to a holding is the fair market value. Ownership of stocks and shares including traded and closely held stocks shall constitute legal or equitable interests for the purpose of this section. In addition, all retirement accounts and mutual funds must be listed. In reporting retirement accounts and mutual funds, include the name of the entity that holds the retirement plan assets or mutual funds and not the specific holdings of that plan, unless the holdings are specifically owned in the individual's name. (See Governmental Ethics Commission Opinion 2000-52.) Business interests include, among other things, property held for rental, farming, commercial purposes, and ownership of mineral rights. Also included are businesses operated out of your home. The address reported for land without a street address should include the rural route, town and state or township, county and state. For the purpose of this section, certificates of deposit, bank savings, or checking accounts in a savings and loan, shares in a credit union, life insurance policies, annuities which are not part of a retirement plan, notes, bonds, debentures, and mortgages need not be disclosed under this provision.

D GIFTS IN THE FORM OF GOODS OR SERVICES: If a gift is received for which the value is unknown, you are required to list the donor. You are not required to list the donor of a gift (1) if the gift or bequest was received as the result of the death of the donor; (2) if the gift was from a spouse, parent, grandparent, sibling, aunt, or uncle; or (3) if acting as a trustee of a trust for the benefit of another.

E COMPENSATION: The disclosure required under this section shall include the name and address of the business or combination of businesses, the type of business and a description of whether the compensation was received by the individual, the individual's spouse, or both. The receipt of interest, dividends and mineral royalties does not constitute "compensation" as defined in K.S.A. 75-4301a(i), and those matters need not be reported under this provision; however, ownership interests concerning these items may need to be reported under section "C".

F OFFICER OR DIRECTOR OF AN ORGANIZATION OR BUSINESS: The disclosure under this section shall include the name and address of the business or organization and the position held. A person holding the position of administrator or executor of an estate shall not be considered reportable under this section. The holding of a position of officer or director of an organization or business includes for profit and nonprofit organizations.

G RECEIPT OF FEES AND COMMISSION: The disclosure under this section shall include the name and address of the client or customer and a description of whether the fees or commissions were received by the individual, the individual's spouse, or both. In the case of a partnership, it is the partner's proportionate share of the business, and hence of the fee, which is significant, without regard to expenses of the partnership. An individual who receives a salary as opposed to portions of fees or commissions is generally not required to report under this provision.

	Sec. of St. bar code	STATE OF KANSAS	ICCION
		OVERNMENTAL ETHICS COMM	
	<u>STATEMEI</u>	NT OF SUBSTANTIAL INTERESTS	<u>FORM</u>
<u>INST</u>		es 1 through 4) must be completed by indivintentionally fails to file as required by law for for a class B misdemeanor.	
	completing sections "C" through	finition" section provided with this form for "G". If you have questions or wish assista 9 th , Topeka, KS or call 785-296-4219.	
A.	IDENTIFICATION:	PLEASE TYPE OR PRINT	
	Last Name	First Name	MI
	Spouse's Name		
	Number & Street Name, Apartm	ent Number, Rural Route, or P.O. Box Nur	mber
	K City, State, Zip Code	KS	
	Home Phone Number (include a	<i>Trea code</i>) Business Pho	one Number (include area code)
B.		TO BE FILED BECAUSE YOU ARE:	
	 1. State Elected Officia State Treasurer, Secr Education, or Distric 2. Appointed Member of 	of a State Board, Council, Commission or A tion is Subject to Senate Confirmation; Agency or University; State Office; Office;	ntative, Member of State Board of
List N	lame of Agency, Board, University	v or Elected Position (You may use abbrevia	ations but not acronyms)
*		n if applicable (May use acronyms) al security number will aid in identifying y s information is optional.	Position you from others with the same
			Rev. 3/2006

C. <u>OWNERSHIP INTERESTS</u>: List any corporation, partnership, proprietorship, trust, joint venture and every other business interest, including land used for income, and specific stocks, mutual funds or retirement accounts in which either you or your spouse has owned within the preceding 12 months a legal or equitable interest exceeding \$5,000 or 5%, whichever is less. If you or your spouse own more than 5% of a business, you must disclose the percentage held. Please insert additional page if necessary to complete this section.

2

If you have nothing to report in Section "C", check here _____.

E	BUSINESS NAME AND ADDRESS	TYPE OF BUSINESS	DESCRIPTION OF INTERESTS HELD	PERCENT OF OWNERSHIP INTERESTS	HELD BY WHOM
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					

D. <u>**GIFTS OR HONORARIA:**</u> List any person or business from whom you or your spouse either individually or collectively, have received gifts or honoraria having an aggregate value of \$500 or more in the preceding 12 months.

If you have nothing to report in Section "D", check here _____.

	NAME OF PERSON OR BUSINESS FROM WHOM GIFT RECEIVED	ADDRESS	RECEIVED BY:
1.			
2.			
3.			

- E. <u>RECEIPT OF COMPENSATION:</u> List all places of employment in the last calendar year, and any other businesses from which you or your spouse received \$2,000 or more in compensation (salary, thing of value, or economic benefit conferred on in return for services rendered, or to be rendered), which was reportable as taxable income on your federal income tax returns.
 - YOUR PLACE(S) OF EMPLOYMENT OR OTHER BUSINESS IN THE PRECEDING CALENDAR YEAR. IF SAME AS SECTION "B", CHECK HERE _____. If you have nothing to report in Section "E"1, check here _____.

	NAME OF BUSINESS	ADDRESS	TYPE OF BUSINESS
1.			
2.			

2. SPOUSE'S PLACE(S) OF EMPLOYMENT OR OTHER BUSINESS IN THE PRECEDING CALENDAR YEAR.

If you have nothing to report in Section "E"2, check here _____.

	NAME OF BUSINESS	ADDRESS	TYPE OF BUSINESS
1.			
2.			

F. OFFICER OR DIRECTOR OF AN ORGANIZATION OR BUSINESS: List any organization or business in which you or your spouse hold a position of officer, director, associate, partner or proprietor at the time of filing, irrespective of the amount of compensation received for holding such position. Please insert additional page if necessary to complete this section. If you have nothing to report in Section "F", check here

BUSINESS NAME AND ADDRESS	POSITION HELD	HELD BY WHOM
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		

G. <u>RECEIPT OF FEES AND COMMISSIONS:</u> List each client or customer who pays fees or commissions to a business or combination of businesses from which fees or commissions you or your spouse received an aggregate of \$2,000 or more in the preceding calendar year. The phrase "client or customer" relates only to businesses or combination of businesses. In the case of a partnership, it is the partner's proportionate share of the business, and hence of the fee, which is significant, without regard to expenses of the partnership. An individual who receives a salary as opposed to portions of fees or commissions is generally not required to report under this provision. Please insert additional page if necessary to complete this section.

If you have nothing to report in Section "G", check here _____.

	NAME OF CLIENT / CUSTOMER	ADDRESS	RECEIVED BY
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			

H. <u>DECLARATION:</u>

I, ______, declare that this statement of substantial interests (including any accompanying pages and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of all of my substantial interests and other matters required by law. I understand that the intentional failure to file this statement as required by law or intentionally filing a false statement is a class B misdemeanor.

Date

Signature of Person Making Statement

NUMBER OF ADDITIONAL PAGES _____.

Return your completed statement to the Secretary of State, Elections Division, Memorial Hall, First Floor, 120 SW 10th, Topeka, Kansas 66612-1594.

APPOINTMENT OF

TREASURER OR CANDIDATE COMMITTEE FORM

FOR CANDIDATE FOR LOCAL OFFICE

	This is an (Check one)	Initial Appointment	Amended Statement	
CANDIDAT	E	(Please Type or Print)		
Name				
Street				
City		County	Zip Code	
Home Telephone		Business Tele	ephone	
Office Sought			District No.	
TREASURE	R			
Date Appointed				
Name				
Address				
City			Zip Code	
Home Telephone		Business Tele	phone	
OR CANDII	DATE COMMITTI	EE		
Date Appointed				
Chairperson's N	ame			
Address				
City			Zip Code	
Home Telephone	2	Business Tele	ephone	
Treasurer's Nan	ne			
Address				
City			Zip Code	
Home Telephone		Business Tele	ephone	
				_

SIGNATURE

"I declare that this statement 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."

(Date)

(Signature of Candidate)

SEE REVERSE SIDE FOR INSTRUCTIONS

Governmental Ethics Commission

Rev.2000

INSTRUCTIONS

This form must be completed by each candidate for local office and filed with your County Election Officer. A candidate must appoint a treasurer, or in lieu thereof a candidate committee, not later than ten (10) days after becoming a candidate. This form must be filed not later than ten (10) days following such appointment. Also, a new form must be filed whenever there is a change in treasurers or other information previously reported.

For further information contact:

Kansas Governmental Ethics Commission 109 West 9th, Suite 504 Topeka, Kansas 66612 Ofc 785-296-4219 Fax 785-296-2548

AFFIDAVIT OF EXEMPTION FROM FILING RECEIPTS AND EXPENDITURES REPORTS BY A CANDIDATE FOR STATE OFFICE

IOF	х то јі	ITH THE SECRETARY OF STATE (Mem JLY 25, 2016. If a candidate qualifies for this er must maintain the required records. (K.S.A	s exemption, he or she still must app 25-4144) See reverse for examples	point a treasurer or candidate comm	
	PLEASE PRINT OR TYPE Name of Candidate				
		ess			
		e Telephone	_		
	Office	e Sought	District No		
		ty of)	, do swear (or affirm) that:		
	i,, do swear (or aritim) that.				
	1.	The information in Item A above is true a			
	2.	I intend to expend, contract to expend, or have expended, on my behalf an aggregate amount or value of less than one thousand dollars (\$1,000) in the primary election period; and			
	3.	I intend to receive or have received on my behalf (including amounts contributed by myself) contributions of an aggregate amount or value of less than one thousand dollars (\$1,000) in the primary election period; and			
	4.	I understand that the payment of my filing fee, or the receipt of funds to pay my filing fee, is not included in the limitations set forth in paragraphs 2 & 3; and			
	5.	I intend to expend, contract to expend or have expended on my behalf an aggregate amount or value of less than			
		one thousand dollars (\$1,000) in the general election period; and			
	6.	I intend to receive or have received on my behalf (including amounts contributed by myself) contributions of an			
	 aggregate amount or value of less than one thousand dollars (\$1,000) in the general election period; and If contributions are received or expenditures made (actual or contractual) in excess of any of the amounts set out 				
	above, I shall within three (3) days of the date of such excess file all past due Receipts and Expenditures Reports and shall file all such future reports on the dates required by K.S.A. 25-4148. (K.S.A. 25-4174)				
		(Date)	(Signature of Candidate)		
2	Subscrib	bed and sworn to (affirmed) before me this	day of	, 20	
:	Subscrib	bed and sworn to (affirmed) before me this	day of		
4	Subscrib	bed and sworn to (affirmed) before me this			

Governmental Ethics Commission

Rev. 2016

Example 1: Candidate A intends to receive contributions of less than \$1,000 and make expenditures of less than \$1,000 in the primary election period. Candidate A does, however, intend to receive contributions in excess of \$1,000 during the general election period. He also intends to make expenditures (either actual or contractual of more than \$1,000 during the general election period. Candidate A cannot properly file the affidavit of exemption. He must file all reports at the times required by K.S.A. 25-4148.

Example 2: Candidate B meets all of the tests for exemption from filing the reports but fails to file the affidavit until after the date the first report for the primary election is due. Candidate B must file all reports since the affidavit was not filed in a timely manner.

Example 3: Candidate C intends to receive contributions and make expenditures of less than \$1,000 in each the primary and general election period; however, the \$1,000 limit was exceeded during the general election period. Candidate C shall within three(3) days of the date of such excess file all past due reports and shall file all such future reports on the dates required by K.S.A. 25-4148.

IF YOU HAVE ANY QUESTIONS CONCERNING THIS AFFIDAVIT, PLEASE CONTACT THE GOVERNMENTAL ETHICS COMMISSION 901 S. Kansas Avenue Topeka, Kansas 66612 office (785) 296-4219 fax (785) 296-2548