

KANSAS GOVERNMENTAL ETHICS COMMISSION

RECEIPTS AND EXPENDITURES REPORT
OF A CANDIDATE FOR CITY OFFICE

January 10, 2009

FILE WITH COUNTY ELECTION OFFICER
SEE REVERSE SIDE FOR INSTRUCTIONS

RECEIVED
DOUGLAS COUNTY CLERK
LAWRENCE, KANSAS
2009 JAN -6 P 3:25

A. Name of Candidate: MICHAEL T. AMYX
Address: 1555 ALVAMAR CT
City and Zip Code: LAWRENCE 66047 County: DOUGLAS
Office Sought: CITY COMMISSIONER District: _____

B. Check **only** if appropriate: _____ Amended Filing _____ Termination Report

C. Summary (covering the period from January 1, 2008 through December 31, 2008)

1. Cash on hand at beginning of period	<u>\$1,142.87</u>
2. Total Contributions and Other Receipts (Use Schedule A)	<u>0</u>
3. Cash available this period (Add Lines 1 and 2)	<u>1,142.87</u>
4. Total Expenditures and Other Disbursements (Use Schedule C)	<u>0</u>
5. Cash on hand at close of period (Subtract Line 4 from 3)	<u>1,142.87</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."

Jan 5, 2009
Date

Charles F Fisher
Signature of Candidate or Treasurer

**SCHEDULE A
CONTRIBUTIONS AND OTHER RECEIPTS**

MICHAEL T AMYX

(Name of Candidate)

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	
Subtotal This Page							0

Complete if last page of Schedule A

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

**SCHEDULE B
IN-KIND CONTRIBUTIONS**

MICHAEL T AMYX

(Name of Candidate)

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
Subtotal This Page				0

Complete if last page of Schedule B

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

**SCHEDULE C
EXPENDITURES AND OTHER DISBURSEMENTS**

MICHAEL T. AMYX
(Name of Candidate)

Date	Name and Address	Purpose of Expenditure or Disbursement	Amount
Subtotal This Page			0

Complete if last page of Schedule C

Total Itemized Expenditures This Period	
Total Unitemized Expenditures of \$50 or less	
TOTAL EXPENDITURES & OTHER DISBURSEMENTS THIS PERIOD (to line 2 of Summary)	0

