

KANSAS GOVERNMENTAL ETHICS COMMISSION

**RECEIPTS AND EXPENDITURES REPORT
OF A CANDIDATE FOR CITY OFFICE**

January 10, 2015

**FILE WITH COUNTY ELECTION OFFICER
SEE REVERSE SIDE FOR INSTRUCTIONS**

A. Name of Candidate: Michael Dever
Address: 1124 Oak Tree Dr.
City and Zip Code: Lawrence, KS 66049 County: Douglas
Office Sought: City Commission District: _____

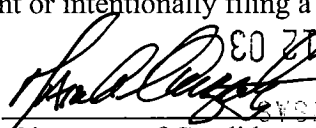
B. Check **only** if appropriate: _____ Amended Filing _____ Termination Report

C. Summary (covering the period from January 1, 2014 through December 31, 2014)

| | |
|----------------------------------------------------------------------|-----------------|
| 1. Cash on hand at beginning of period | <u>1733.23</u> |
| 2. Total Contributions and Other Receipts (Use Schedule A) | <u>0.00</u> |
| 3. Cash available this period (Add Lines 1 and 2) | <u>1,733.23</u> |
| 4. Total Expenditures and Other Disbursements (Use Schedule C) | <u>0.00</u> |
| 5. Cash on hand at close of period (Subtract Line 4 from 3) | <u>1,733.23</u> |
| 6. In-Kind Contributions (Use Schedule B) | <u>0.00</u> |
| 7. Other Transactions (Use Schedule D) | <u>0.00</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."

01/07/15
Date



Signature of Candidate or Treasurer

RECEIVED
DOUGLAS COUNTY CLERK
LAWRENCE, KANSAS
2015 JAN 9 PM 2 03

**SCHEDULE A
CONTRIBUTIONS AND OTHER RECEIPTS**

Michael Dever

(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 | <u>E funds</u> Other | |
| | NONE | | | | | | |
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| Subtotal This Page | | | | | | | \$0.00 |

**SCHEDULE A
CONTRIBUTIONS AND OTHER RECEIPTS**

Michael Dever

(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 | E funds Other | |
| | None | | | | | | |
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| Subtotal This Page | | | | | | | \$0.00 |

Complete if last page of Schedule A

| | |
|----------------------------------------------------------|---------------|
| Total Itemized Receipts for Period | \$0.00 |
| Total Unitemized Contributions (\$50 or less) | \$0.00 |
| Sale of Political Materials (Unitemized) | \$0.00 |
| Total Contributions When Contributor Not Known | \$0.00 |
| TOTAL RECEIPTS THIS PERIOD (to line 2 of Summary) | \$0.00 |

**SCHEDULE B
IN-KIND (Non-Monetary) CONTRIBUTIONS**

Michael Dever

(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 |
|---------------------------|---------------------------------|---------------------------------------------------------------------------|-------------------------------------|-------------------------------|
| | None | | | |
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| Subtotal This Page | | | | \$0.00 |

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| | |
|-----------------------------------------------------------------------|---------------|
| Total Itemized (over \$100) In-Kind Contributions | \$0.00 |
| Total Unitemized (\$100 or less) In-Kind Contributions | \$0.00 |
| TOTAL IN-KIND CONTRIBUTIONS THIS PERIOD (to line 6 of Summary) | \$0.00 |

**SCHEDULE C
EXPENDITURES AND OTHER DISBURSEMENTS**

Michael Dever

 (Name of Candidate)

| Date | Name and Address | Purpose of Expenditure or Disbursement | Amount |
|---------------------------|------------------|-------------------------------------------|---------------|
| | None | | |
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| Subtotal This Page | | | \$0.00 |

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|--------------------------------------------------------------------------------------------|---------------|
| Total Itemized Expenditures This Period | \$0.00 |
| Total Unitemized Expenditures of \$50 or less | \$0.00 |
| TOTAL EXPENDITURES & OTHER DISBURSEMENTS THIS PERIOD (to line 4 of Summary) | \$0.00 |

**SCHEDULE D
OTHER TRANSACTIONS**

Michael Dever

 (Name of Candidate)

| Date | Name and Address | Nature of Account or Loan Payable or Loan Receivable | Balance at Close of Period |
|---------------------------|------------------|---------------------------------------------------------|----------------------------------|
| | None | | |
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| Subtotal This Page | | | \$0.00 |

Complete if last page of Schedule D

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|--------------------------------------------------------|--------|
| TOTAL OTHER TRANSACTIONS (to line 7 of Summary) | \$0.00 |
|--------------------------------------------------------|--------|