RECEIVED DOUGLAS COUNTY CLERK LAWRENCE, KANSAS

Rev. 2001

# STATEMENT OF SUBSTANTIAL INTERESTS EQR

<u>INSTRUCTIONS</u>. This statement must be completed by each person required to do so by K.S.A. 75-4301a. Upon completion, mail or hand deliver your completed statement to the office where you filed your declaration of candidacy. If appointed to fill a vacancy in a local elective office, file this form where your predecessor filed for office.

PLEASE TYPE OR PRINT
A. <u>IDENTIFICATION</u> :
Denney James R Last Name First Name MI
Last Name / First Name MI
Denney Sandra J Spouse's Name
Spouse's Name
1254 N 1000 Rd
Number & Street Name, Apartment Number, Rural Route, or P.O. Box Number
Lawrence, Ks 66047
City, State, Zip Code
785 - 841 - 7804  Home Phone Business Phone
Figure 1 hone
B. OFFICE SOUGHT, HELD OR APPOINTED TO:
Douglas County Commissioner
List Name of Office
District 3
Position District
CONTINUED ON NEXT PAGE
Date received (Official use only)

**Governmental Ethics Commission** 

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. Please attach additional pages if necessary to complete this section. If you have nothing to report in Section "C", check here \_\_\_\_\_.

BUSINESS NAME AND ADDRESS	TYPE OF BUSINESS	DESCRIPTION OF INTERESTS HELD	HELD BY WHOM
1 Denney Book Shelf 1254 N 1000 Rd Lawrence, KS1660	Internet 47 Bookstore	owner	Spouse
2 Security Benefit 403 B	Retirement Anot	owner	Self
3. Zurich Life Po Box, 9097 Greenville SC 296		owner	Self
4. TIRA-CREF 8500 Andrew Cornegie Blud Charlotte	·	- owner	Self
PO BOX 2577 Omaha No 68103	18262 IRA Retirem	ent owner	Se14
6. + D Ameritrade PO Box 2577 Omaha NE 68103	IRA Retirement Aoct	owner	Sporse
7. Zurich Life	RetirementAcct		Spouse
PO βοχ 19097 Green ville Sc 2968	3 CHICHICATICAL	DWHEN	P803C
9.			
10.			

D. GIFTS IN THE FORM OF GOODS OR SERVICES: List any person, business or combination of businesses from which you or your spouse either individually or collectively, have received in the preceding 12 months, without reasonable and valuable consideration, goods or services having an aggregate value of \$500 or more.

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.	<b>RECEIPT OF COMPENSATION:</b> 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 you or your spouse in return for services rendered, or to be rendered), which was reportable as taxable
	income on your federal income tax returns.

1.	YOUR PLACE(S) OF EMPLOYMENT OR OTHER BUSINESS IN THE PRECEDING CALENDAR
	YEAR.

If you have nothing to report in Section "E"1, check here \_\_\_\_.

NAME	OF BUSINESS ADI	PRESS TYPE OF BUSINESS
IKPERS	611 5 1	Rangastive Stop Pension
2. Social Sec	curity	Retirement

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. Denr	ieu Book Shelf	1254 N 1000 Rd Lawren	e Internet Books	tore
2. Socia	1 Security		Retirement	

F. OFFICER OR DIRECTOR OF AN ORGANIZATION OR BUSINESS: List any organization or business in which you or your spouse hold a position as 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 pages 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. Denney Book Shelf 1254 N 1000 Rd Lawrence to	owner	Spouse
2.		
3.		
4.		·
5.		

**RECEIPT OF FEES AND COMMISSIONS:** List each client or customer who paid 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 the 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 the 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 pages 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.			

### H. <u>DECLARATION:</u>

I, <u>James R. Denney</u>, 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.

Man 6, 2016

Signature of Person Making Statement

NUMBER OF ADDITIONAL PAGES 🔬



### JAMIE SHEW

DOUGLAS COUNTY CLERK

1100 Massachusetts Lawrence, KS 66044

Marni Penrod Chief Deputy Clerk Phone: 785-832-5267 Fax: 785-832-5192 Benjamin Lampe Deputy Clerk-Elections

## Candidate Pronunciation Form

Candidate's Name (as it will appear on the ballot):	
Jim Denney	
Phonetic Pronunciation of Candidate's First Name:	
Jim	
Phonetic Pronunciation of Candidate's Last Name:	
Deh-knee	

As part of the Help America Vote Act it is now required that each polling location provides a secure voting method for all voters. Voters with visual disabilities can listen to, and vote for, candidates without assistance in Douglas County with the AutoMark. Please fill out the above information to assure that your full name is correctly pronounced. Thank you for your assistance.