

KANSAS GOVERNMENTAL ETHICS COMMISSION

RECEIPTS AND EXPENDITURES REPORT OF A CANDIDATE FOR CITY OFFICE

October 31, 2022

FILE WITH COUNTY ELECTION OFFICER
SEE REVERSE SIDE FOR INSTRUCTIONS

A. Name of Candidate: STEVE JACOB
Address: 1829 KENTUCKY ST. #4
City and Zip Code: LAWRENCE County: DOUGLASS
Office Sought: COUNTY COMMISSIONER District: 1

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

C. Summary (covering the period from July 22, 2022 through October 27, 2022)

1. Cash on hand at beginning of period	<u>20</u>
2. Total Contributions and Other Receipts (Use Schedule A)	<u>700</u>
3. Cash available this period (Add Lines 1 and 2)	<u>700.00</u>
4. Total Expenditures and Other Disbursements (Use Schedule C)	<u>687.80</u>
5. Cash on hand at close of period (Subtract Line 4 from 3)	<u>32.20</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."

2-7-23
Date

Steve Jacob
Signature of Candidate or Treasurer

**SCHEDULE A
CONTRIBUTIONS AND OTHER RECEIPTS**

STEVE JACOB

(Name of Candidate)

Date	Name and Address of Contributor	Occupation 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	
7/29	LIBERTARIAN PARTY KANSAS			X			500.00
9/9	PATRICK WILBER 521 DURHAM CT. LAWRENCE, KS 66049	COMPUTER TECH SUPPORT		X			200.00
Subtotal This Page							700.00

SCHEDULE B IN-KIND CONTRIBUTIONS

(Name of Candidate) _____

Date	Name and Address of Contributor	List Occupation for Those Giving an In-Kind of More Than \$150	Description of In-Kind Contribution	Value of In-Kind Contribution
Subtotal This Page				

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)	

**SCHEDULE C
EXPENDITURES AND OTHER DISBURSEMENTS**

STEVE JACOB
(Name of Candidate)

Date	Name and Address	Purpose of Expenditure Or Disbursement	Amount
8/11	21224 1800 SEAPORT BLVD #400 REDWOOD CITY, CA 94063	BUSINESS CARDS	155.44
9/27	FAB SIGNS 1830 W. 4TH #2 LAWRENCE, KS 66044	SIGNS	248.18
9/27	FAB SIGNS 1830 W. 4TH #2 LAWRENCE, KS 66044	SIGNS	284.18
Subtotal This Page			687.80

SCHEDULE D **OTHER TRANSACTIONS**

(Name of Candidate) _____

Date	Name and Address	Nature of Account or Loan Payable or Loan Receivable	Balance at Close of Period
Subtotal This Page			

Complete if last page of Schedule D

TOTAL OTHER TRANSACTIONS (to line 7 of Summary)	
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**APPOINTMENT OF
TREASURER OR CANDIDATE COMMITTEE FORM
FOR CANDIDATE FOR LOCAL OFFICE**

This is an (Check one)



Initial Appointment



Amended Statement

CANDIDATE

(Please Type or Print)

Name <u>STEVE JACOB</u>			
Mailing Address <u>1829 KENTUCKY ST. #4</u>			
City <u>LAWRENCE</u>	County <u>POYD</u>	Zip Code <u>66044</u>	
Telephone <u>785-979-3222</u>	Email <u>LAWH51989@GMAIL.COM</u>		
Office Sought	District No.		

TREASURER

Date Appointed <u>4/20/2022</u>			
Name <u>STEVE JACOB</u>			
Mailing Address <u>1829 KENTUCKY ST. #4</u>			
City <u>LAWRENCE</u>	Zip Code <u>66044</u>		
Telephone <u>785-979-3222</u>	Email <u>LAWH51989@GMAIL.COM</u>		

OR CANDIDATE COMMITTEE

Date Appointed			
Chairperson's Name			
Mailing Address			
City	Zip Code		
Telephone	Email		
Treasurer's Name			
Mailing Address			
City	Zip Code		
Telephone	Email		

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."

2-7-23
(Date)

Steve Jacob
(Signature of Candidate)

SEE REVERSE SIDE FOR INSTRUCTIONS