

KANSAS GOVERNMENTAL ETHICS COMMISSION

RECEIPTS AND EXPENDITURES REPORT
OF A CANDIDATE FOR CITY/COUNTY OFFICE

January 10, 2016

FILE WITH COUNTY ELECTION OFFICER
SEE REVERSE SIDE FOR INSTRUCTIONS

A. Name of Candidate: Kenneth McGovern
Address: 4029 Harvard Rd.
City and Zip Code: Lawrence KS 66049 County: Douglas
Office Sought: County Sheriff District: _____

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

C. Summary (covering the period from January 1, 2015 through December 31, 2015)

1. Cash on hand at beginning of period 520.64
2. Total Contributions and Other Receipts (Use Schedule A) _____
3. Cash available this period (Add Lines 1 and 2) _____
4. Total Expenditures and Other Disbursements (Use Schedule C) _____
5. Cash on hand at close of period (Subtract Line 4 from 3) 520.64
6. In-Kind Contributions (Use Schedule B) _____
7. Other Transactions (Use Schedule D) _____

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DOUGLAS COUNTY CLERK
LAWRENCE, KANSAS
2016 JUN 5 PM 12 22

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."

1/5/2016
Date

[Signature] Treasurer
Signature of Candidate or Treasurer
for McGovern for Sheriff

**SCHEDULE A
CONTRIBUTIONS AND OTHER RECEIPTS**

Kenneth McGovern

(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	
	<i>— none —</i>						
Subtotal This Page							

Complete if last page of Schedule A

Total Itemized Receipts for Period	
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)	

**SCHEDULE B
IN-KIND CONTRIBUTIONS**

Kenneth McGovern

(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
	<i>none</i>			
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**

Kenneth McGovern
(Name of Candidate)

Date	Name and Address	Purpose of Expenditure or Disbursement	Amount
	<i>none</i>		
<i>Subtotal This Page</i>			

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 4 of Summary)	

SCHEDULE D
OTHER TRANSACTIONS

Kenneth McGovern

(Name of Candidate)

Date	Name and Address	Nature of Account or Loan Payable or Loan Receivable	Balance at Close of Period
	<i>— none —</i>		
Subtotal This Page			

Complete if last page of Schedule D

TOTAL OTHER TRANSACTIONS (to line 7 of Summary)