STATEMENT OF SUBSTANTIAL INTERESTS FOR LOCAL OFFICE

INSTRUCTIONS. 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> :	
Herbert Matthew J	
Last Name MI	
Rachael E. Sudlow	
Spouse's Name	
523 Kasold Drive	
Number & Street Name, Apartment Number, Rural Route, or P.O. Box Number	
Lawrence, K5 66049	
City, State, Zip Code	
785 - 550 - 2085 Home Phone Business Phone	 ne
B. OFFICE SOUGHT, HELD OR APPOINTED TO:	
Lawrence City Commission	
List Name of Office	
Commissionel	
Position District	
CONTINUED ON NEXT PAGE	
Date received (Official use only)	<u> </u>
Governmental Ethics Commission	Rev. 2001

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. Renaissance Property 523 Kasold, Lawrence KS 66049	Property management	Owner, 100%	501e Proprietorskij
2. Sudlow Jewelry 523 Kasold, Lawrence KS 66049	Jewelry	Spouse owned	Rochael Sudlow
3. Herbert Investments LLC 1012 N. Preserve Ct, Wichita KS 67206	Property management	50% partner (wife 25%, me 25%)	Rachael Sudlow and I
4.			
5.			
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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.	RECEIPT OF COMPENSATION: 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		ADDRESS	TYPE OF BUSINESS
1. Lawrence Public Schools ((LHS)	1901 Louisiana, Lawrence Ks	High School
2. Renaissance Property		523 Kasold, Lawrence	Property management

... See a delitional sheet

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 BUS	INESS
1. Sudlon	Jevelry		523 Kasold Drive, Lawrence	Jeweler/	Sale proprietorship
2. Phoenix	Gallery		825 Massachusetts, Lawrence	wholesaler'	
50	e additional sheet				

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. Renaissance Property Management 523 Kasold Dr. Lawrence, KS 66049	Owner/ Sole proprietorship	matthew Herbert
2. Herbert Investments LLC 1012 N. Preserve Ct Udichita Ks 67206	50% partner	Matthew Herbelt Rachael Sudlaw
3. Sudlow Jewelry 523 Kasold Lawrence, KS 66049	Owher/ Sole proprietorship	Rachael Sudlow
4.		
5.	·	

E.	RECEIPT OF COMPENSATION: 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	ADDRESS	TYPE OF BUSINESS
3. City	of Lawrence	6 E. 6th, Lawrence KS	City Commission Salary
2.			

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. Lawrence Arts Center	940 New Hampshire, Lawrence Ks	Community Education
2.		

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.				
2.				
3.				
4.			<u>.</u>	
5.		<u> </u>		

G. 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. Robert Herman	10420 Capital Place, St. Louis Mo	Renaissance Property
2. Kevin Polian	10420 Capital Place, St. Louis Mo 904 Summerfield Ct., Laurence KS	Rencissance Proporty
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12.		

H. <u>DECLARATION:</u>

I, Mathew Herbert , 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 tru
correct and complete statement of all of my substantial interests and other matters required by law. I understand the
the intentional failure to file this statement as required by law or intentionally filing a false statement is a class B
misdemeanor.

2-7-17 Date

Signature of Person Making Statement

NUMBER OF ADDITIONAL PAGES