

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. IDENTIFICATION:

FLORY JAMES E.

Last Name First Name MI

DONNA L. FLORY

Spouse's Name

540 N. 711TH ROAD

Number & Street Name, Apartment Number, Rural Route, or P.O. Box Number

LAWRENCE, KS 66047

City, State, Zip Code

785-842-0054

Home Phone

785-393-5305

Business Phone (CELL PHONE)

B. OFFICE SOUGHT, HELD OR APPOINTED TO:

COUNTY COMMISSIONER (DOUGLAS COUNTY)

List Name of Office

3

Position

District

CONTINUED ON NEXT PAGE

Date received (Official use only)

C. OWNERSHIP INTERESTS: 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. FLORY FINANCIAL CONSULTING	INVESTMENT ADVICE	OWNER/ SOLE PROPRIETOR	SELF
JAMES E. FLORY ATTORNEY-AT-LAW			
3. VANGUARD INFLATION PROTECTED SECURITIES FUND	MUTUAL FUND	SHAREHOLDER	SELF
4. VANGUARD TOTAL INTERNATIONAL STOCK INDEX FUND	MUTUAL FUND	SHAREHOLDER	SELF
5. VANGUARD TOTAL STOCK MARKET INDEX FUND	MUTUAL FUND	SHAREHOLDER	SELF
6. VANGUARD HIGH YIELD CORPORATE BOND FUND	MUTUAL FUND	SHAREHOLDER	SELF
7. VANGUARD EXTENDED MARKET INDEX FUND	MUTUAL FUND	SHAREHOLDER	SELF
8. VANGUARD REIT INDEX FUND	MUTUAL FUND	SHAREHOLDER	SELF
9. VANGUARD TOTAL BOND MARKET INDEX FUND	MUTUAL FUND	SHAREHOLDER	SELF
10. VANGUARD INTERNATIONAL VALUE FUND	MUTUAL FUND	SHAREHOLDER	SELF

[CONTINUED ON ADDITIONAL SHEET]

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.	FEDERAL EMPLOYEES RETIREMENT SYSTEM (FERS)	P.O. Box 45, Boyers, PA 16017-0045	FEDERAL PENSION
2.	FLORY FINANCIAL CONSULTING	540 N 711 ROAD, LAWRENCE, KS	INVESTMENT ADVICE

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.	KANSAS PUBLIC EMPLOYEES RETIREMENT SYSTEM (KPERs)	TOPEKA, KANSAS	KANSAS PENSION
2.	DOUGLAS COUNTY VNA, REHAB & HOSPICE CARE	200 MAIN STREET LAWRENCE, KS 66044	MEDICAL & SOCIAL SERVICES

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.	FLORY FINANCIAL CONSULTING 540 N 711 ROAD, LAWRENCE, KS 66047	SOLE PROPRIETOR	SELF
2.	JAMES E. FLORY, ATTORNEY AT LAW 540 N 711 ROAD, LAWRENCE, KS 66047	SOLE PROPRIETOR	SELF
3.			
4.			
5.			

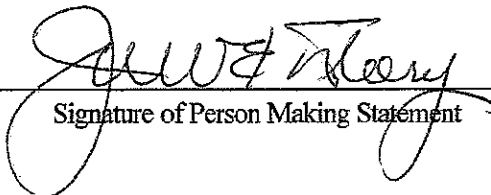
- G. RECEIPT OF FEES AND COMMISSIONS:** List each client or customer who paid fees or commissions to a business or combination of businesses from which fees or commissions you or your spouse received an aggregate of \$2,000 or more in the preceding calendar year. *The phrase "client or customer" relates 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.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			

H. DECLARATION:

I, JAMES E. FLORY, 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.

05/27/2008
Date


Signature of Person Making Statement

NUMBER OF ADDITIONAL PAGES 1.

C. Ownership Interests: (continued from Page 2)

Business Name	Type of Business	Description of Interests Held	Held By Whom
11. Vanguard Mid Cap Growth Index Fund	Mutual Fund	Shareholder	Self
12. Vanguard Morgan Growth Fund	Mutual Fund	Shareholder	Self
13. Vanguard Wellington Fund	Mutual Fund	Shareholder	Self
14. Vanguard Consumer Staples ETF	Exchange Traded Fund	Shareholder	Self
14. Vanguard Health Care ETF	Exchange Traded Fund	Shareholder	Self
15. Vanguard Financials ETF	Exchange Traded Fund	Shareholder	Self
16. Thrift Savings Plan (Federal) Government Securities Fund	Retirement Fund	Shareholder	Self
17. Thrift Savings Plan (Federal) LifeCycle Income Fund	Retirement Fund	Shareholder	Self
18. Vanguard Windsor II Fund	Mutual Fund	Shareholder	Spouse
19. Vanguard Total Stock Market Index Fund	Mutual Fund	Shareholder	Spouse
20. Vanguard Inflation Protected Securities Fund	Mutual Fund	Shareholder	Spouse
21. Vanguard Total Stock Market Index Fund	Mutual Fund	Shareholder	Joint: Self & Spouse
22. Vanguard Windsor II Fund	Mutual Fund	Shareholder	Joint: Self & Spouse
23. Vanguard 500 Index Fund	Mutual Fund	Shareholder	Joint: Self & Spouse
24. Vanguard Prime Money Market Fund	Mutual Fund	Shareholder	Joint: Self & Spouse
25. Citigroup	Stock	Shareholder	Joint: Self & Spouse
26. Bank of America	Stock	Shareholder	Joint: Self & Spouse