

# KANSAS PUBLIC DISCLOSURE COMMISSION

## WAIVER REQUEST FORM

### Instructions

To be considered for a waiver request, this form and supplemental documentation must be completed and submitted within thirty (30) days of the assessment order pursuant to K.A.R. 19-4a-1. THIS FORM IS A PUBLIC DOCUMENT AND WILL BE INCLUDED IN PUBLIC MEETING MATERIALS. ANY PERSONALLY IDENTIFIABLE INFORMATION WILL BE REDACTED TO THE FULLEST EXTENT ALLOWED BY LAW, PURSUANT TO K.S.A. 45-215 THROUGH K.S.A.

45-223. The intentional filing of false information on this form is a class A misdemeanor.

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- No activity during the reporting period.
- Previous compliance or being a first-time filer.
- No longer with the committee, campaign, or organization.
- Loss of primary or withdrawal of candidacy.

Name	Position
Associated Organization, Office Sought, or Lobbying Client(s)	

**Please select the appropriate form or report.**

- Appointment of Treasurer (Candidate or Candidate Committee)
- Statement of Organization (Political Action or Party Committee)
- Receipts & Expenditures Report (Candidate or Committee)
- Employment & Expenditures Report (Lobbyist)
- Registration (Political Action Committee or Lobbyist)
- Statement of Substantial Interests (Public Officials)

FOR OFFICE USE ONLY
Report Due
Failure to File Notice Sent
Report Received
Date Assessed
Amount Assessed

**Please select all that apply and provide an accompanying explanation in the space provided.**

Categories of Good Cause	Supplemental Documentation Examples
<u>Medical Circumstances</u> of a person essential to filing or their immediate family member that caused the delay in filing.	Doctor's statement with date(s), hospital bills, police incident report, death certificate/obituary, etc.
<u>Financial Hardship</u> - the assessed civil penalty creates an undue financial burden.	The financial hardship declaration <u>must</u> be completed.
<u>Natural Disaster or Theft</u> making timely filing impossible due to the unavailability of records.	Police incident, fire, or insurance report(s) with dates provided and the details of the loss or damage.
<u>Other Unique Circumstances</u> not previously mentioned that did not arise from the filer's delay or negligence.	Any documentation that will substantiate the reason as to why the filing was delayed.

Additional Explanation

I swear, or affirm, under penalty of perjury, that the foregoing information is true and correct. Further, I understand that some or all of the information included on and with this declaration may be made publicly available under the Kansas Open Records Act (K.S.A. 45-215 through K.S.A. 45-223).

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Signature

**Submitting the Form**

This form and related documents may be emailed to [KPDC@ks.gov](mailto:KPDC@ks.gov) or mailed/delivered to:

Kansas Public Disclosure Commission  
901 S. Kansas Ave.  
Topeka, KS 66612

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