



KANSAS SECRETARY OF STATE
**City/School Candidate's
 Declaration of Intention**

Rec'd Bu. Co. Election
 MAY 28 2025

1. **Name**
 List exactly as it will appear on ballot, including all punctuation.

Jonathan Smeeton

2. **City**

Elbing

3a. **Office sought**

USD 206 School Board

3b. **District Number**

206

4. **Term**

Regular Unexpired

5. **Preferred title**
 Used for mailing purposes.

Mr. Mrs. Ms. Dr.

6. **Residential address**
 Provide a street or rural route. Do not leave blank.

Address

326 Main Avenue

City: Elbing County: Butler Zip: 67041

7. **Mailing address**
 Complete if mailing address is different from above.

Address

PO Box 84

City: Elbing State: KS Zip: 67041

8. **Telephone number**

Home: 316-799-2144 Work: 316-644-5746 Cell:

9. **Email address**

jesmeeton@gmail.com

10. I declare that I intend to become a candidate for the above-stated office at the appropriate election.

Signature of Candidate
 X

County Election Officer or City Clerk
 X

Today's Date: Mo. 05 Day 28 Yr. 2025

Deputy Election Officer
 X

Please review to ensure completion.

Rec'd Bu. Co. Election

MAY 28 2025

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:

Smecton	Jonathan	E
Last Name	First Name	MI
LaDana Kay Smecton		
Spouse's Name		
326 N. Main PO Box 84		
Number & Street Name, Apartment Number, Rural Route, or P.O. Box Number		
Elbing KS 67041		
City, State, Zip Code		
316-799-2144		316-644-5746
Home Phone		Business Phone

B. OFFICE SOUGHT, HELD OR APPOINTED TO:

USD 206 School Board	
List Name of Office	
School Board	USD 206
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.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

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.	Marion County Special Education	1500 E Lawrence, Marion	School
2.	Koerner Heights Church	320 W. Meridian, Newark	Church

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.	Koerner Heights Church	320 W. Meridian, Newark	Church
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.	Kansas Association of School Psychologists PO Box 326 McPherson KS	Public Relations Chair	Self
2.			
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.

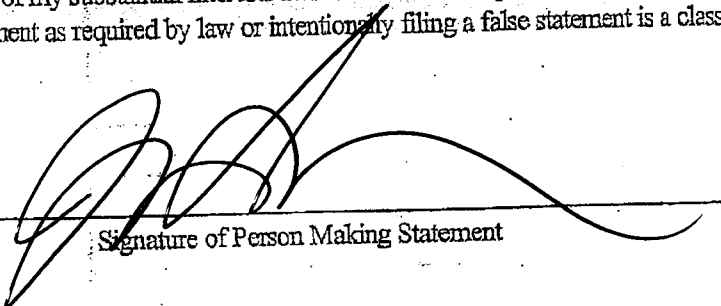
If you have nothing to report in Section "G", check here .

	NAME OF CLIENT / CUSTOMER	ADDRESS	RECEIVED BY
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			

H. **DECLARATION:**

I, Jan Smecker, 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.

05/28/2025
Date


Signature of Person Making Statement

NUMBER OF ADDITIONAL PAGES _____

APPOINTMENT OF
TREASURER OR CANDIDATE COMMITTEE FORM
FOR CANDIDATE FOR LOCAL OFFICE

MAY 28 2025

This is an (Check one)

Initial Appointment

Amended Statement

(Please Type or Print)

CANDIDATE

Name	Jonathan Smeeten				
Mailing Address	PO Box 84				
City	Elbas	County	Butler	Zip Code	67041
Telephone	316-799-2144	Email	jesmeeten@gmail.com		
Office Sought	School Board	District No.	206		

TREASURER

Date Appointed	05/28/2025				
Name	Jonathan Smeeten				
Mailing Address	PO Box 84				
City	Elbas	Zip Code	67041		
Telephone	316-799-2144	Email	jesmeeten@gmail.com		

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."

(Date)

(Signature of Candidate)

SEE REVERSE SIDE FOR INSTRUCTIONS

**AFFIDAVIT OF EXEMPTION
FROM FILING RECEIPTS AND EXPENDITURES REPORTS
BY A CANDIDATE FOR OFFICE IN A CITY (2nd & 3rd Class),
UNIFIED SCHOOL DISTRICT OR COMMUNITY COLLEGE.**

Rec'd Bu. Co. Election
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IF YOU ANTICIPATE RECEIVING OR EXPENDING MORE THAN \$1,000 IN THE PRIMARY OR GENERAL ELECTION, EXCLUSIVE OF THE CANDIDATE FILING FEE, THIS FORM MAY NOT BE USED.

File this report with the County Election Officer prior to July 28, 2025. If a candidate qualifies for this exemption, the candidate must maintain itemized records required by K.S.A. 25-904. See other side for examples.

NAME OF CANDIDATE Jonathan Smeeton
326 N. Main PO Box 84 Elbing KS 67041
(Address) (City) (State) (Zip)

Telephone: Home 316-799-2144 Business: 316-644-5746

Office Sought: School Board District No. 206

Jurisdiction: Reynolds USD 206
(Name of City, School District, Community College, or Township)

AFFIDAVIT:

State of Kansas
County of Butler

I, Jonathan Smeeton, do swear (or affirm) that:

1. The information above is true and correct;
2. I intend to expend, contract to expend, or have expended on my behalf an aggregate amount or value of less than \$1,000.00 in the primary election period; and
3. I intend to receive or have received on my behalf (including contributions by myself) contributions of an aggregate amount or value of less than \$1,000.00 in the primary election period; and
4. I understand that the payment of my filing fee, or the receipt of funds to pay my filing fee, is not included in the \$1,000.00 limits of paragraphs 2 and 3; and
5. I intend to expend, contract to expend, or have expended on my behalf an aggregate amount or value of less than \$1,000.00 in the general election period; and
6. I intend to receive or have received on my behalf (including contributions by myself) contributions of an aggregate amount or value of less than \$1,000.00 in the general election period; and
7. If contributions are received or expenditures made (actual or contractual) exceeding any of the amounts stated above, I shall within three (3) days of the date of such excess file all past due itemized statements and shall file all such future itemized statements as required by K.S.A. 25-904(b).

05/28/2025
(Date)

[Signature]
(Signature of Candidate)

Subscribed and sworn to/affirmed before me, this 28th day of May, 2025

Jennifer Currier
(Notary Public)

(Seal)

My appointment expires: 3/3/26



MAY 28 2025

CITY/ SCHOOL FILING CHECK OFF LIST

Candidate Name:

Jonathan Smeeton

Date Filed:

5-28-25

Filing Fee: \$20.00

RECVD	DATE	N/A
✓	5-28-25	

Candidate's Declaration of Intention:

✓	5-28-25	
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Statement of Substantial Interest:

✓	5-28-25	
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Appointment of Treasurer/Candidate Committee:

✓	5-28-25	
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Affidavit of Exemption:

(Fill out only if Receiving or Spending \$1000 or less)

✓	5-28-25	
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Itemized Statement of Receipts & Expenditures:

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EMPLOYEE:



***** Date Stamp Every Document

***** Keep Check List in Candidate's File