

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

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 Roy Andreas

1511 Chevy St      Winfield      KS      67156  
(Address)                      (City)                      (State)                      (Zip)

Telephone: Home 913-461-6954      Business: -

Office Sought: School Board      District No. 465

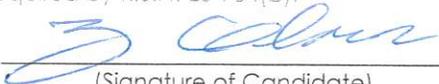
Jurisdiction: Winfield, USD 465  
(Name of City, School District, Community College, or Township)

**AFFIDAVIT:**  
State of Kansas  
County of Cowley

I, Roy Andreas, do swear (or affirm) that:

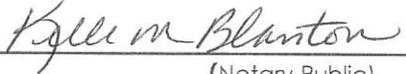
1. The information above is true and correct;
2. I intend to expend, contract to expend, or have expended on my behalf an aggregate amount or value of less than \$1,000.00 in the primary election period; and
3. I intend to receive or have received on my behalf (including contributions by myself) contributions 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).

4/25/25  
(Date)

  
(Signature of Candidate)

Subscribed and sworn to/affirmed before me, this 25<sup>th</sup> day of April, 2025

KELLI BLANTON  
DEPUTY COWLEY  
(Seal) COUNTY CLERK

  
(Notary Public)

My appointment expires: 1-8-29

Example 1: Candidate A intends to receive contributions of less than \$1,000.00 and make expenditures of less than \$1,000.00 in the primary election period. Candidate A does, however, intend to receive contributions in excess of \$1,000.00 during the general election period. He also intends to make expenditures (either actual or contractual) of more than \$1,000.00 during the general election period. Candidate A cannot properly file the affidavit of exemption. He must file all reports at the times required by K.S.A. 25-904(b).

Example 2: Candidate B meets all of the tests for exemption from filing the reports but fails to file the affidavit until after the date the first report for the primary election is due. Candidate B must file all reports since the affidavit was not filed in a timely manner.

Example 3: Candidate C intends to receive contributions and make expenditures of less than \$1,000.00 in each the primary and general election period; however, the \$1,000.00 limit was exceeded during the general election period. Candidate C shall within three (3) days of the date of such excess file all past due reports and shall file all such future reports on the dates required by K.S.A. 25-904(b).

IF YOU HAVE ANY QUESTIONS CONCERNING THIS AFFIDAVIT, PLEASE CONTACT:

Cowley County Clerk  
321 E. 10<sup>th</sup> Avenue  
Winfield KS 67156  
(620) 221-5400 or (620) 441-4500  
Fax (620) 221-5498

**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:**

Andrews	Roy	S
Last Name	First Name	MI
Spouse's Name		
1511 Cherry St		
Number & Street Name, Apartment Number, Rural Route, or P.O. Box Number		
Winfield, KS 67156		
City, State, Zip Code		
913-461-6954		
Home Phone		Business Phone

**B. OFFICE SOUGHT, HELD OR APPOINTED TO:**

School Board	
List Name of Office	
Board member	405
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. N/A -			
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. N/A -		
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.	KanOkla Networks	100 Kan Okla Ave	internet
2.		Caldwell, KS 67622	

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 0.

	NAME OF BUSINESS	ADDRESS	TYPE OF BUSINESS
1.	N/A-		
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 0.

	BUSINESS NAME AND ADDRESS	POSITION HELD	HELD BY WHOM
1.	N/A-		
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 X.

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

**H. DECLARATION:**

I, Roy Andreas, 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.

4/25/25  
 Date

  
 Signature of Person Making Statement

NUMBER OF ADDITIONAL PAGES \_\_\_\_\_.