

KANSAS GOVERNMENTAL ETHICS COMMISSION

RECEIVED

JAN 07 2009

RON THORNBURGH
SECRETARY OF STATE

RECEIPTS AND EXPENDITURES REPORT
OF A POLITICAL OR PARTY COMMITTEE

January 10, 2009

FILE WITH SECRETARY OF STATE
SEE REVERSE SIDE FOR INSTRUCTIONS

A. Name of Committee: Kansas Pharmacists Association's Political Action Committee

Address: 1020 SW Fairlawn Rd

City and Zip Code: Topeka KS 66604

This is a (check one): Party Committee Political Committee

B. Check only if appropriate: Amended Filing Termination Report

C. Summary (covering the period from October 24, 2008 through December 31, 2008)

1. Cash on hand at beginning of period	<u>2121.99</u>
2. Total Contributions and Other Receipts (Use Schedule A)	<u>0.00</u>
3. Cash available this period (Add Lines 1 and 2)	<u>2121.99</u>
4. Total Expenditures and Other Disbursements (Use Schedule C)	<u>0.00</u>
5. Cash on hand at close of period (Subtract Line 4 from 3)	<u>2121.99</u>
6. In-Kind Contributions (Use Schedule B)	<u>0.00</u>
7. Other Transactions (Use Schedule D)	<u>0.00</u>

D. "I declare that this report, including any accompanying schedules and statements, 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."

1-9-09
Date

Doug Fink
Signature of Treasurer

**SCHEDULE A
CONTRIBUTIONS AND OTHER RECEIPTS**

Kansas Pharmacists Association's Political Action Committee

(Name of Party Committee or Political Committee)

Date	Name and Address of Contributor	Occupation & Industry of Individual Giving More Than \$150	Check Appropriate Box				Amount of Cash, Check, Loan or Other Receipt
			Cash	Check	Loan	Other	
Subtotal This Page							\$0.00

Complete if last page of Schedule A

Total Itemized Receipts for Period	\$0.00
Total Unitemized Contributions (\$50 or less)	\$0.00
Sale of Political Materials (Unitemized)	\$0.00
Total Contributions When Contributor Not Known	\$0.00
TOTAL RECEIPTS THIS PERIOD (to line 2 of Summary)	\$0.00

**SCHEDULE C
EXPENDITURES AND OTHER DISBURSEMENTS**

Kansas Pharmacists Association's Political Action Committee
 (Name of Party Committee or Political Committee)

Date	Name and Address	Purpose of Expenditure	Amount
		List candidate name & address if independent or in-kind expenditure in excess of \$300	
Subtotal This Page			\$0.00

Complete if last page of Schedule c

Total Itemized Expenditures This Period	\$0.00
Total Unitemized Expenditures of \$50 or less	\$0.00
TOTAL EXPENDITURES & OTHER DISBURSEMENTS THIS PERIOD (to line 4 of Summary)	\$0.00

