

**KANSAS GOVERNMENTAL ETHICS COMMISSION**

**RECEIPTS AND EXPENDITURES REPORT OF A POLITICAL OR PARTY COMMITTEE**

**RECEIVED**  
JUL 26 2016

**July 25, 2016**

**KS Governmental Ethics Commission**

**FILE WITH SECRETARY OF STATE  
SEE REVERSE SIDE FOR INSTRUCTIONS**

A. Name of Committee: **Kansas Independent Pharmacy PAC**  
Address: **3512 SW Fairlawn Rd, Ste 300**  
City and Zip Code: **Topeka, KS 66614**  
This is a (check one):  Party Committee  Political Committee

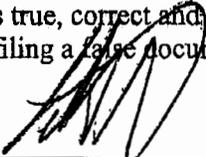
B. Check only if appropriate:  Amended Filing  Termination Report

C. Summary (covering the period from January 1, 2016 through July 21, 2016)

1. Cash on hand at beginning of period .....	<u><b>\$12,549.75</b></u>
2. Total Contributions and Other Receipts (Use Schedule A) .....	<u><b>\$1,750.00</b></u>
3. Cash available this period (Add Lines 1 and 2) .....	<u><b>\$14,299.75</b></u>
4. Total Expenditures and Other Disbursements (Use Schedule C) .....	<u><b>\$1,602.34</b></u>
5. Cash on hand at close of period (Subtract Line 4 from 3) .....	<u><b>\$12,697.41</b></u>
6. In-Kind Contributions (Use Schedule B) .....	<u><b>\$0.00</b></u>
7. Other Transactions (Use Schedule D) .....	<u><b>\$0.00</b></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."

**07/25/2016**  
Date

  
Signature of Treasurer

**SCHEDULE A  
CONTRIBUTIONS AND OTHER RECEIPTS**

Kansas Independent Pharmacy PAC

(Name of Party Committee or Political Committee)

Date	Name and Address of Contributor	Occupation of Individual Giving More Than \$150	Check Appropriate Box				Amount of Cash, Check, Loan or Other Receipt
			Cash	Check	Loan	E funds Other	
06/10/16	Washington Pharmacy 227 "C" Street Washington, KS 66968	Pharmacy		✓			\$250.00
06/10/16	Oakley Healthmart 103 Center Ave Oakley, KS 67748	Pharmacy		✓			\$500.00
06/10/16	Medical Park Pharmacy 1309 Polk Great Bend, KS 67530	Pharmacy		✓			\$500.00
06/10/16	CK Pharmacies 200 E Pack Moundridge, KS 67107	Pharmacy		✓			\$50.00
06/27/16	Kiowa County Pharmacy 721 W Kansas Ave, Ste 100 Greensburg, KS 67054	Pharmacy		✓			\$200.00
<b>Subtotal This Page</b>							<b>\$1,500.00</b>

**SCHEDULE A  
CONTRIBUTIONS AND OTHER RECEIPTS**

Kansas Independent Pharmacy PAC

(Name of Party Committee or Political Committee)

Date	Name and Address of Contributor	Occupation of Individual Giving More Than \$150	Check Appropriate Box				Amount of Cash, Check, Loan or Other Receipt
			Cash	Check	Loan	E funds Other	
06/27/16	Bollier for State Representative 6910 Overhill Rd Mission Hills, KS 66208	Return of contribution previously made as Rep-now running for Sen		✓			\$250.00
<b>Subtotal This Page</b>							<b>\$250.00</b>

**Complete if last page of Schedule A**

Total Itemized Receipts for Period	\$1,750.00
Total Unitemized Contributions (\$50 or less)	\$0.00
Sale of Political Materials (Unitemized)	\$0.00
Total Contributions When Contributor Not Known	\$0.00
<b>TOTAL RECEIPTS THIS PERIOD (in line 2 of Summary)</b>	<b>\$1,750.00</b>

**SCHEDULE C  
EXPENDITURES AND OTHER DISBURSEMENTS**

Kansas Independent Pharmacy PAC

(Name of Party Committee or Political Committee)

Date	Name and Address To Whom Expenditure is Made	Purpose of Expenditure	Amount
		If independent or in-kind expenditure in excess of \$300 is made for a candidate, list candidate name & address	
07/05/16	Schmidt for Kansas Senate 5906 SW 43rd Ct Topeka, KS 66610	Political contribution	\$750.00
07/21/16	KPSC 3512 SW Fairlawn Rd, Ste 300 Topeka, KS 66614	Postage for 01/01/16 - 07/21/16	\$2.34
06/20/16	Kansas Governmental Ethics Commision 109 W 9th Ste, Ste 504	Registration fee	\$300.00
06/30/16	US Bank PO Box 1800 St Paul, MN 55101	Credit card fees 01/01/16 - 07/21/16	\$50.00
06/30/16	CBIZ MHM 11440 Tomahawk Creek Pkwy Leawood, KS 66211	Account/compilation services for PAC Account January 1, 2016 - July 21, 2016	\$500.00
Subtotal This Page			\$1,602.34

Complete if last page of Schedule C

Total Itemized Expenditures This Period	<b>\$0.00</b>
Total Unitemized Expenditures of \$50 or less	<b>\$0.00</b>
<b>TOTAL EXPENDITURES &amp; OTHER DISBURSEMENTS (THIS PERIOD) (to line 4 of Summary)</b>	<b>\$1,602.34</b>