KANSAS GOVERNMENTAL ETHICS COMMISSION

RECEIPTS AND EXPENDITURES REPORT OF A POLITICAL OR PARTY COMMITTEE CEIVED

JANUARY 10, 2025

JAN 13 2025

FILE WITH SECRETARY OF STATE SEE REVERSE SIDE FOR INSTRUCTIONS Ethics Commission

	Name of Committee. Kansas Chiropractic Association PAC	
A.	900 SW Jackson Suite 1416C	
	City and Zip Code: Topeka, KS 66612	
3	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 25, 2024 through December 31, 2024)	1,702.76
	1. Cash on hand at beginning of period	
	2. Total Contributions and Other Receipts (Use Schedule A)	690.00
	3. Cash available this period (Add Lines 1 and 2)	2,392.76
	4. Total Expenditures and Other Disbursements (Use Schedule C)	0.00
	5. Cash on hand at close of period (Subtract Line 4 from 3)	2,392.76
	6. In-Kind Contributions (Use Schedule B)	
	7. Other Transactions (Use Schedule D)	
D.	"I declare that this report, including any accompanying schedules and statements, has been exact and to the best of my knowledge and belief is true; correct and complete. I understand that the failure to file this document or intentionally filing a false document is a class A misdemeanor.	mined by me le intentional r."
	1/9/25	
Dat	e Signature of Treasurer	
	GEC FO	orm 2024

SCHEDULE A CONTRIBUTIONS AND OTHER RECEIPTS

Kansas Chiropractic Association PAC

(Name of Party Committee or Political Committee)

	Name and Address	Occupation of Individual Giving More	Check Appropriate Box			x	Amount of Cash, Check, Loan or Other	
Date	of Contributor	Than \$150	Cash	Check	Loan	E funds Other	Receipt	
12/15/24	Brett Counselman 1408 S Topeka Blvd Topeka, KS 66612	Chiroprator				~	\$120.00	
	Subtotal This Page						\$120.00	

SCHEDULE A CONTRIBUTIONS AND OTHER RECEIPTS

Kansas	Chiro	practic	Asso	ciation	PA	C
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(Name of Party Committee or Political Committee)

Date	Name and Address	Occupation of Individual Giving More		Ch Approp	Amount of Cash, Check,		
	of Contributor	Than \$150	Cash	Check	Loan	E funds Other	Loan or Other Receipt
	Justin Fulk 609 Baptiste Dr. Paola, KS 66071-1334	Chiropractor				~	\$30.00
	Rebekah Cates 4425 W Zoo Blvd, Suite #4 Wichita, KS 67212-1611					~	\$60.00
	Holee Bea 18300 S Spruce St Gardner, KS 66030					~	\$120.00
	Casey Merritt 8825 Long St. Lenexa, KS 66215-3586					~	\$60.00
	Thad Schneider 1096 US hwy 56 Council Grove, KS 66846					~	\$30.00
	Pete Workman 1945 S Ohio St, Suite D Salina, KS 67401					~	\$120.00
	Thomas Owen 119 N Mill St Beloit, KS 67420-2343					'	\$60.00
	Katie Benson 10600 Quivira Rd, Suite 470 Overland Park, KS 66215					~	\$60.00
	Subtotal This Page						\$540.00

Complete if last page of Schedule A

Total Itemized Receipts for Period	\$690.00
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)	\$690.00

SCHEDULE A CONTRIBUTIONS AND OTHER RECEIPTS

Kansas Ch	iropractic	Association	PAC
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(Name of Party Committee or Political Committee)

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