

KANSAS GOVERNMENTAL ETHICS COMMISSION

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

JANUARY 10, 2025

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

RECEIVED
JAN 13 2025
KS Governmental Ethics Commission

A. Name of Committee: Kansas Pet Advocates PAC
Address: 11460 Tomahawk Creek Parkway, Suite 300
City and Zip Code: Leawood, KS 66211
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. Cash on hand at beginning of period | <u>\$2,604.81</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>\$2,604.81</u> |
| 4. Total Expenditures and Other Disbursements (Use Schedule C) | <u>\$500.00</u> |
| 5. Cash on hand at close of period (Subtract Line 4 from 3) | <u>\$2,104.81</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."

1/13/2025
Date

Kathys Powley
Signature of Treasurer

**SCHEDULE C
EXPENDITURES AND OTHER DISBURSEMENTS**

(Name of Party Committee or Political Committee) _____

| Date | Name and Address To Whom Expenditure is Made | Purpose of Expenditure | Amount |
|---------------------------|--|--|-----------------|
| | | <u>If independent or in-kind expenditure in excess of \$300 is made for a candidate, list candidate name & address</u> | |
| 12/17/24 | Kansas Senate Democrats PO Box 1811 Topeka, KS 66601 | Home for the Holidays event sponsorship | \$500.00 |
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| | | | |
| Subtotal This Page | | | \$500.00 |

Complete if last page of Schedule C

| | |
|--|-----------------|
| Total Itemized Expenditures This Period | \$500.00 |
| Total Unitemized Expenditures of \$50 or less | |
| TOTAL EXPENDITURES & OTHER DISBURSEMENTS THIS PERIOD (to line 4 of Summary) | \$500.00 |