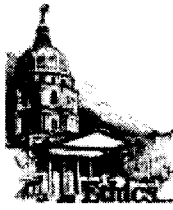


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**Campaign Finance  
Statement of Organization  
For Political Action Committees  
And Party Committees**

Governmental Ethics Commission  
901 S. Kansas Ave.  
Topeka, KS 66612  
Office (785) 296-4219  
Fax (785) 296-2548  
ethics.kansas.gov

This is a (Check one)  Party Committee  PAC

This is an (Check one)  Initial Appointment  Amended Statement

**Committee** Name: **Kansas Pharmacists Association - PAC**

Address: **1020 SW Fairlawn Rd**

Address2:

City: **Topeka** State: **KS** Zip: **66604**

Business Phone: **(785) 228-2327**

Email Address: **aaron@ksrx.org**

**Chairperson** Name: **Matt Morrison**

Address: **2101 Hillpointe Way**

Address2:

City: **Dodge City** State: **KS** Zip: **67801**

Home Telephone: **(785) 764-2906** Business Phone:

Email Address: **mattmku5@gmail.com**

**Treasurer** Name: **Nate Rockers**

Address: **23937 Eagle Court**

Address2:

City: **Paola** State: **KS** Zip: **66071**

Home Telephone: Business Phone:

Email Address: **nate@rockersrx.com**

**Affiliated or** Name: **Kansas Pharmacists Association**

**Connected** Address: **1020 SW Fairlawn Rd**

**Organizations** Address2:

City: **Topeka** State: **KS** Zip: **66604**

If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors.

**I declare that this statement 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.**

Executed on:

Date: **8/19/2021 10:41:58 AM** Signature of Chairperson: **Matt Morrison**

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