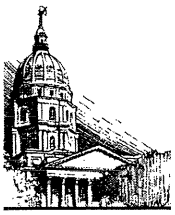
Print this form or Go Back



# Campaign Finance Receipts & Expenditures Report
**10/26/2026**

Kansas Public Disclosure Commission
901 S. Kansas Ave.
Topeka, KS 66612
Office (785) 296-4219
Fax (785) 296-2548
https://kpdc.kansas.gov/

Check only if appropriate ☐ **Amended Filing** ☐ **Termination Report**

Campaign Finance Filing Report

Organization Name: **Stand for Justice PAC, Inc.**
Address: **9508 Foster Street**
Address2:
City: **Overland Park** Zip: **66212**
Chairperson Home Phone: Chairperson Business Phone: **(913) 980-3994**

☐ **Party Committee** ☑ **PAC**

| SUMMARY (covering the period from 7/24/2026 through 10/22/2026) | | | |
|---|---|---|---|
| 1 | **CASH ON HAND AT BEGINNING OF PERIOD** | | **$413.15** |
| 2 | **TOTAL CONTRIBUTIONS AND OTHER RECEIPTS** | **(Schedule A) view/print** | **$0.00** |
| 3 | **CASH AVAILABLE THIS PERIOD** | (Add Lines 1 and 2) | **$413.15** |
| 4 | **TOTAL EXPENDITURES AND OTHER DISBURSEMENTS** | **(Schedule C) view/print** | **$2.00** |
| 5 | **CASH ON HAND AT CLOSE OF PERIOD** | Subtract Line 4 from 3) | **$411.15** |
| 6 | **IN-KIND (NON-MONETARY) CONTRIBUTIONS** | **(Schedule B) view/print** | **$0.00** |
| 7 | **OTHER TRANSACTIONS** | **(Schedule D) view/print** | **$0.00** |

"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."

Electronically filed on: **10/26/2026 11:42:06 AM**
Signature of Treasurer: **Aaron Trost**

Print this form or Go Back

Print this form or Go Back

## SCHEDULE C

## EXPENDITURES AND OTHER DISBURSEMENTS

**Committee: Stand for Justice PAC, Inc.**

| Date | Name and Address | Purpose of Expenditure or Disbursement Candidate Name & address if independent or in-kind expenditure in excess of $300 | Primary Total | General Total | Amount |
|---|---|---|---|---|---|
| Total Itemized Expenditures This Period | | | | | $0 |
| Total Unitemized Expenditures of $50 or less | | | | | $2.00 |
| TOTAL EXPENDITURES & OTHER DISBURSEMENTS THIS PERIOD | | | | | $2.00 |

Print this form or Go Back