E STATEMENT OF ORGANIZATION CAL ACTION COMMITTEES AND PARTY COMMITTEES (See Reverse Side For Instructions) Political Action Committee Party Committee This is a (check one) Amended Statement Initial Statement This is an (check one) COMMITTEE (PLEASE TYPE OR PRINT) Name DEOD # 1445 PAC Fund Mailing Address (Street, City, State, Zip Code) NW NOMES TOOKE BS (06608 (785) 233.4369 CHAIRPERSON Home Telephone Name (785) 806-0948 Business Telephone Mailing Address (Street, City, State, Zip Code)) 233-43109 TIDDOKa TREASURER Home Telephone Name (785) 806-6972 ames W. Shounds Business Telephone Mailing Address (Street, City, State, Zip Code) 212 NW Norms Topeka KS 66408 (785) 233-4369 AFFILIATED OR CONNECTED ORGANIZATIONS Name Cornenters District Co of Kansas Mailing Address (Street, City, State, Zip, Code) St. Suite DOI Hansas Cety, mo 025 1D 39th If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors. Union Labor Organization SIGNATURE: "I declare that this statement has been examined by me and to the best of my knowledge and

"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."

/-9-04 (Date)

(Signature of Chairperson)

Governmental Ethics Commission

Rev.2000