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FILED SEP 2 5 2008	RGH STA	TEMENT OF	ORGANIZATIO	N
FORPOLL	PICAL ACT	ION COMMI	FTEES AND PAH	N RTY COMMITTEES
SECT		(See Reverse Side		
	is is a (check one) is is an (check one)	Party Commi Initial Staten	·	DENED
COMMITTEE		(PLEASE TYP	E OD DDINIT)	SEP 2 6 2008
Name	ity Bank			NO GUVAIIIMAINA COMM
Mailing Address (S 3003 SW	Street, City, State	, Zip Code) $\mathcal{R}$	peka KS Busines 66611 (785	s Telephone ) 271-1404
CHAIRPERSON				
Name Pat k	-erscher	١	Home Te ( <i>62</i> 0	lephone ) 896 - 7353
Mailing Address (S	Street, City, State, above !!	, Zip Code)		s Telephone ) 271-1404
TREASURER				
Name Nikk	Dohrma	~	Home Te (785	lephone ) 771-3881
Mailing Address (S B <sup>4</sup> Same W		, Zip Code)		s Telephone ) 271-14 <u>04</u>
AFFILIATED OR (	CONNECTED O	RGANIZATIONS		
Name Commu	inity Bank	ers Associa	tion of Kon	a.s
Mailing Address (S	treet, Eity, State, <u>2 <i>A</i>love</u>	Zip Code)	· .	<u> </u>
If not connected or aff	iliated with an org	anization, identify t	ne trade, profession, or pr	imary interest of the contribu
belief is true, correct	and complete. I	understand that th	and to the best of my kr e intentional failure to t	-
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UN 2 6 2008 STATEMENT OF OR	
FOR POLITICAL ACTION COMMITTE	EES AND PARTY COMMITTEES
(See Reverse Side For	Instructions)
This is a (check one)Party CommitteeThis is an (check one)Initial Statement	Political Action Committee
COMMITTEE (PLEASE TYPE OF	R PRINT)
Name Community Bankers PAC	
Mailing Address (Street, City, State, Zip Code) 3003 SW Van Buren, Sulte A Topeka	Business Telephone (adol1 (785)271-1404
CHAIRPERSON	
Name Pat Kerschen	Home Telephone (620) 896-7353
Mailing Address (Street, City, State, Zip Code) Same as above	Business Telephone (785) 271-1404
TREASURER	
Name Sharon Weber	Home Telephone
Mailing Address (Street, City, State, Zip Code) Same as above	Business Telephone
AFFILIATED OR CONNECTED ORGANIZATIONS	
Name Community Bankers Association Mailing Address (Street, City, State, Zip Code)	n of Kansar
Same as above	
If not connected or affiliated with an organization, identify the tra	ade, profession, or primary interest of the contributor
SIGNATURE: "I declare that this statement has been examined by me and t belief is true, correct and complete. I understand that the intr or intentionally filing a false document is a class A misdeme	entional failure to file this document
4/25/08 /ahrek	Ballucchen
(Date) (Signatu	ure of Chairperson)

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STATEMENT OF ORGANIZATION	
STATEMENT OF OROMINIZATION J2	÷
FOR POLITICAL ACTION COMMITTEES AND PARTY COMMI	TTEESmissio
(See Reverse Side For Instructions)	
This is a (check one) Party Committee Political Action Committee	
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COMMITTEE (PLEASE TYPE OR PRINT)	
Name Community Bankers PAC	
Mailing Address (Street, City, State, Zip Code) 3003 SW Van Buren, Suite A Typekaldel 785) 271-1404	-f
	<u> </u>
CHAIRPERSON	
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Mailing Address (Street, City, State, Zip Code) Business Telephone	
Same as above ()	]
TREASURER	
Name Home Telephone ()	
Mailing Address (Street, City, State, Zip Code)     Business Telephone	
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AFFILIATED OR CONNECTED ORGANIZATIONS	
Name	
Community Bankers Association of KS Mailing Address (Street, City, State, Zip Code)	
Zame as above	
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(Date) (Signature of Chairperson)	
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STATEMENT OF ORGANIZATION	
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RON THORNBURGH (See Reverse Side For Instructions)	
This is a (check one) Party Committee Political Action Committee	
This is an (check one) Initial Statement Amended Statement	
COMMITTEE (PLEASE TYPE OR PRINT)	
Name Community Barkers PAC	
Mailing Address (Street, City, State, Zip Code) 3003 SW Van Buren, Suite A Topeka (785) 271-1404	
CHAIRPERSON	
Name Home Telephone	
Mailing Address (Street, City, State, Zip Code) Business Telephone	-
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TREASURER	
Name Home Telephone	
Mailing Address (Street, City, State, Zip Code) Same ao above ()	
Sume as work	
AFFILIATED OR CONNECTED ORGANIZATIONS	
Name Community Banters Association of Kansas	
Mailing Address (Street, City, State, Zip Code)	
Same as above	
If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the	contributors.
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(Date) (Signature of Chairperson)	
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