

STATEMENT OF ORGANIZATION

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

(See Reverse Side For Instructions)

This is a (check one)

☐

Party Committee

☒

Political Action Committee

This is an (check one)

☐

Initial Statement

☐

Amended Statement

SEP 22 2008

COMMITTEE

(PLEASE TYPE OR PRINT)

Name

Kansas Health Care Association

Mailing Address (Street, City, State, Zip Code)

117 SW 6th Ave, Suite 200 66603

Business Telephone

(785) 267-6003

CHAIRPERSON

Name

Jim Klausman

Home Telephone

()

Mailing Address (Street, City, State, Zip Code)

117 SW 6th Ave, Suite 200 66603

Business Telephone

(785) 272-1535

TREASURER

Name

Nancy Benney

Home Telephone

()

Mailing Address (Street, City, State, Zip Code)

117 SW 6th Ave, Suite 200 66603

Business Telephone

(785) 271-6700

AFFILIATED OR CONNECTED ORGANIZATIONS

Name

Kansas Health Care Assoc.

Mailing Address (Street, City, State, Zip Code)

117 SW 6th Ave, Suite 200 Topeka, KS 66603

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

SIGNATURE:

"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."

8-28-08

(Date)

(Signature of Chairperson)

FILED

NOV 09 2005

FOR POLITICAL
SECRETARY OF STATE

STATEMENT OF ORGANIZATION

RECEIVED

NOV 07 2005

Governmental Ethics Commission
1000 W. 12TH STREET
TOPEKA, KANSAS 66612

(See Reverse Side For Instructions)

This is a (check one)	<input type="checkbox"/> Party Committee	<input checked="" type="checkbox"/> Political Action Committee
This is an (check one)	<input type="checkbox"/> Initial Statement	<input checked="" type="checkbox"/> Amended Statement

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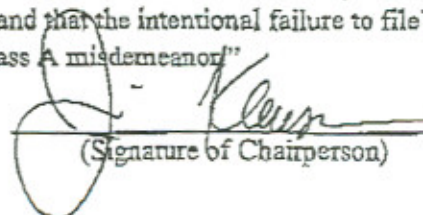
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11-7-05

(Date)


 (Signature of Chairperson)

Governmental Ethics Commission

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