

FILED

JUL 02 2008

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES
RON THOMPSON
SECRETARY OF STATE

STATEMENT OF ORGANIZATION

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

(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

COMMITTEE

(PLEASE TYPE OR PRINT)

Name Security Benefit Life Insurance PAC

Mailing Address (Street, City, State, Zip Code)
One Security Benefit Place, Topeka, KS, 66636-0001

Business Telephone
(785) 438-3000

CHAIRPERSON

Name John F. Guyot

Home Telephone
()

Mailing Address (Street, City, State, Zip Code)
One Security Benefit Place, Topeka, KS, 66636-0001

Business Telephone
(785) 438-3362

TREASURER

Name Natalie G. Haag

Home Telephone
()

Mailing Address (Street, City, State, Zip Code)
One Security Benefit Place, Topeka, KS, 66636-0001

Business Telephone
(785) 438-3121

AFFILIATED OR CONNECTED ORGANIZATIONS

Name Security Benefit Corporation

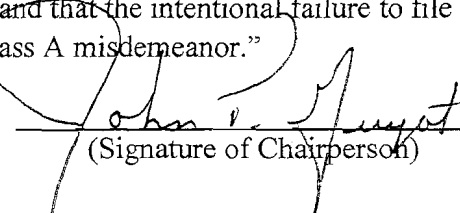
Mailing Address (Street, City, State, Zip Code)
One Security Benefit Place, Topeka, KS, 66636-0001

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."

07/01/08
(Date)


(Signature of Chairperson)

FILED

JUN 14 2004

RON THORNBURGH
SECRETARY OF STATE

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

COMMITTEE

(PLEASE TYPE OR PRINT)

Name

Security Benefit Life Insurance PAC

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

One Security Benefit Place, Topeka, KS. 66636-0001

Business Telephone

(785) 438-3000

CHAIRPERSON

Name

J. Michael Keefer

Home Telephone

()

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

One Security Benefit Place, Topeka, KS. 66636-0001

Business Telephone

(785) 438-3000

TREASURER

Name

Natalie G. Haag

Home Telephone

(785) 246-1063

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

One Security Benefit Place, Topeka, KS. 66636-0001

Business Telephone

(785) 438-3121

AFFILIATED OR CONNECTED ORGANIZATIONS

Name

Security Benefit Group of Companies

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

One Security Benefit Place, Topeka, KS. 66636-0001

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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."

6/8/04
(Date)

(Signature of Chairperson)