STATEMENT OF ORGANIZATION ASSOCIATION FOR POLITICAL ACTION COMMITTEES AND PARTY-COM (See Reverse Side For Instructions) Party Committee This is a (check one) Political Action Committee This is an (check one) Initial Statement Amended Statement COMMITTEE (PLEASE TYPE OR PRINT) Name Mailing Address (Street, City, State, Zip Code) 120 W. ASh., PO Box 5870 SQLM Business Telephone CHAIRPERSON Name Home Telephone Sheldon Walle Mailing Address (Street, City, State, Zip Code) 120 W. Ash, Po Box 580 Saling, L Business Telephone 107402-0586 TREASURER Home Telephone Name Business Telephone (785) &27-93 AFFILIATED OR CONNECTED ORGANIZATIONS Name 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."

12/3/07

(Signature of Chairperson)

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STATEMENT OF ORGANIZATION

RECEIVED

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)
Political Action Council of Saling
Mailing Address (Street, City, State, Zip Code) Business Telephone
120 W. Ash, PO Box 586, SqlMa, K.S (785) 827-930/
CHAIRPERSON
Sheldon Walle Home Telephone
Mailing Address (Street, City, State, Zip Code) 120 W.Ash, Po Box 580 Salina, VS (785) 827-930
TREASURER 67402-0586
Name Home Telephone ()
Mailing Address (Street, City, State, Zip Code) 120 W. ASh, Po Box 586, Soling, KS (785) 827-930/
67402-0584 AFFILIATED OR CONNECTED ORGANIZATIONS
Name
Mailing Address (Street, City, State, Zip Code)
f 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."
(Date) (Signature of Chairperson)

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JUL 2 1 2004 STATEMENT OF ORGANIZATION AL ACTION COMMITTEES AND PARTY COMMITTEES Governmental Ethics Commission 109 WEST STH STREET 1555 (A. KANSAS 66612 (See Reverse Side For Instructions) Party Committee Political Action Committee This is a (check one) This is an (check one) Initial Statement Amended Statement (PLEASE TYPE OR PRINT) COMMITTEE Name Political Action Council of Salina Mailing Address (Street, City, State, Zip Code) Business Telephone 120 W. Ash, PO Box 586, Salina, KS 67402-0586 (785 827-9301 CHAIRPERSON Name Home Telephone Sheldon Walle Business Telephone Mailing Address (Street, City, State, Zip Code) 120 W. Ash, PO Box 586, Salina, KS 67402-0586 827-9301 TREASURER Name Home Telephone Gerald Cook Business Telephone Mailing Address (Street, City, State, Zip Code) (785) 827-9301 120 W. Ash, PO Box 586, Salina, KS 67402-0586 AFFILIATED OR CONNECTED ORGANIZATIONS Name Mailing Address (Street, City, State, Zip Code)

SIGNATURE:

(Date)

"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."

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