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STATEMENT OF ORGANIZATION

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FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

Governmental Ethics Commission
109 WEST 9TH 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 type="checkbox"/> Amended Statement

COMMITTEE (PLEASE TYPE OR PRINT)

Name: SUNFLOWER AGRI PAC

Mailing Address (Street, City, State, Zip Code): 212 SW 8TH ST, STE 201 TOPEKA KS 66603

Business Telephone: (785) 239-2131

CHAIRPERSON

Name: BYRON LEHMAN

Home Telephone: (620) 327-2119

Mailing Address (Street, City, State, Zip Code): 5308 MERIDIAN NEWTON, KS 67114

Business Telephone: (620) _____

TREASURER

Name: ~~BOB~~ CHRISTINE A WILSON

Home Telephone: () _____

Mailing Address (Street, City, State, Zip Code): ~~13001 25TH~~ 4210 WARMTEAR DR WAMEGO 66547

Business Telephone: (785) 456-5835

AFFILIATED OR CONNECTED ORGANIZATIONS

Name: KANSAS DAIRY ASSOCIATION

Mailing Address (Street, City, State, Zip Code): 212 SW 8TH ST, STE 201 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."

8-20-05
(Date)

Byron Lehman
(Signature of Chairperson)