

MAR 16 2007

RON THORN BURG
FOR LOSA STATE
SECRETARY

STATEMENT OF ORGANIZATION

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 checked="" type="checkbox"/> Initial Statement	<input type="checkbox"/> Amended Statement

COMMITTEE

(PLEASE TYPE OR PRINT)

Name

Citizens for Sound Governance

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

607 North Lake, Harrisonville, MO 64701

Business Telephone

(816)769-9881

CHAIRPERSON

Name

Matthew D. Crowell

Home Telephone

(816)769-9881

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

607 North Lake, Harrisonville, MO 64701

Business Telephone

(816)753-5678

TREASURER

Name

Matthew D. Crowell

Home Telephone

(816 769-9881

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

607 North Lake, Harrisonville, MO 64701

Business Telephone

(816 753-5678

AFFILIATED OR CONNECTED ORGANIZATIONS

Name

Not Applicable

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

If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors. The contributions seek to promote the sound use of taxpayers' funds, in particular to avoid unnecessary taxation.

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."

3-15-07

(Date)



(Signature of Chairperson)