## STATEMENT OF ORGANIZATION JUL 0 9 2008

	~ 111.			
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	<u></u>	(PLEASE TYPE OI	R PRINT)	
Name	TIZENS FOI	e RTASONAB	RE SUPCES	
Mailing Addre	ess (Street, City, State,		Business Telephone	
26/2			(785) 841-9	417
CHAIRPERSO	ON			
Name FEW	N GROENNA	LEN CTEMER	Home Telephone (785) 841-9	3/17
Mailing Addre	ess (Street, City, State,	Zip Code)	Business Telephone (785) 8411-9	3417
TREASURER		6.	6046	
Name KEV	W GROENN	HGEN	Home Telephone (785) 891-	9417
Mailing Addre	ess (Street, City, State,		Business Telephone	-9417
AFFILIATED	OR CONNECTED O	RGANIZATIONS	WY6	
Name	4	·		
Mailing Addre	ess (Street, City, State,	Zip Code)		
			·	
If not connected	or affiliated with an org	anization, identify the tra	ade, profession, or primary interes	st of the contributors.
SIGNATURE:		in ad by ma and:	to the best of my knowledge on	L
"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,				
	•	nt is a class A misdeme		
7/7/08		to		
(Date)	<del></del>	(Signat	ure of Chairperson)	
Governmental E	Ethics Commission			Rev.2000