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SEP 17 2006

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 type="checkbox"/> Amended Statement

COMMITTEE

(PLEASE TYPE OR PRINT)

Name

Kansas State Rifle Association Political Action Committee

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

P.O. Box 1119 Wichita, KS 67201

Business Telephone

(316) 264-2727

CHAIRPERSON

Name

Bruce Williams

Home Telephone

(785) 638-2884

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

833 Santa Fe Road, Agra, KS 67621

Business Telephone

(785) 543-2114

TREASURER

Name

Mark Watson

Home Telephone

(316) 944-4419

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

518 N. Baehr Wichita, KS 67212

Business Telephone

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AFFILIATED OR CONNECTED ORGANIZATIONS

Name

Kansas State Rifle Association

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

P.O. Box 1119 Wichita, KS 67201

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."

9-7-08

(Date)

Bruce L. Williams

(Signature of Chairperson)