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NOV 14 2008

KS Governmental Ethics Commission

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 Society of Professional Engineers Political Action Committee

Mailing Address (Street, City, State, Zip Code)	Business Telephone
825 S. Kansas Avenue, Suite 500 Topeka, KS 66612	(785) 233-2121

CHAIRPERSON

Name Michael Crow Home Telephone ()

Mailing Address (Street, City, State, Zip Code)	Business Telephone
825 S. Kansas Avenue, Suite 500 Topeka, KS 66612	(785) 233-2121

TREASURER

Name Ronald Gaches Home Telephone (785) 842-7798

Mailing Address (Street, City, State, Zip Code)	Business Telephone
825 S. Kansas Avenue, Suite 500 Topeka, KS 66612	(785) 233-2121

AFFILIATED OR CONNECTED ORGANIZATIONS

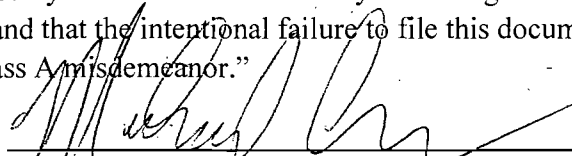
Name Kansas Society of Professional Engineers

Mailing Address (Street, City, State, Zip Code)
825 S. Kansas Avenue, Suite 500 Topeka, KS 66612

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."

10-24-2008
(Date)
(Signature of Chairperson)