

STATEMENT OF ORGANIZATION

JUL 15 2009

KS Governmental Ethics Commission

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: KNEA Shawnee Mission PAC

Mailing Address (Street, City, State, Zip Code): 11015 W 75 Terr, Shawnee, KS 66214
 Business Telephone: (913) 268-4005

CHAIRPERSON

Name: Jean Goodman Home Telephone: (913) 962-1183

Mailing Address (Street, City, State, Zip Code): 7519 Hauser DR, Lenexa KS 66216
 Business Telephone: (913) 993-1961

TREASURER

Name: David Kissack Home Telephone: (913) 859 9970

Mailing Address (Street, City, State, Zip Code): 10922 W 115 ST, Shawnee Mission KS 66210
 Business Telephone: (913) 993-7800

AFFILIATED OR CONNECTED ORGANIZATIONS

Name: KNEA Shawnee Mission

Mailing Address (Street, City, State, Zip Code): 11015 W 75 Terr, Shawnee KS 66214

If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors.

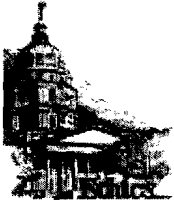
SIGNATURE:

"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."

7-13-09
(Date)

Jean Goodman
(Signature of Chairperson)

Thank you, your filing has been sent to GEC.
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**Campaign Finance
Statement of Organization
For Political Action Committees
And Party Committees**

Governmental Ethics Commission
109 W. 9th, Suite 504
Topeka, KS 66612
Phone (785) 296-4219
Fax (785) 296-2548
www.kansas.gov/ethics

This is a (Check one) Party Committee PAC

This is an (Check one) Initial Appointment Amended Statement

Committee

Name: **NEA Shawnee Mission PAC**
Address: **11015 W 75th TER**
City: **Shawnee** State: **KS** Zip: **66214**
Business Phone: **9132684005**
Email Address:

Chairperson

Name: **Randall Holt**
Address: **7400 W 86th ST**
City: **Overland Park** State: **KS** Zip: **66212**
Home Telephone: **9135225805** Business Phone: **9135225805**
Email Address: **randallholt@kc.rr.com**

Treasurer

Name: **David Kissack**
Address: **10922 W 115th ST**
City: **Overland Park** State: **KS** Zip: **66210**
Home Telephone: **9138599970** Business Phone: **9138599970**
Email Address: **dpkissack@everestkc.net**

**Affiliated or
Connected
Organizations**

Name: **NEA Shawnee Mission**
Address: **11015 W 75th TER**
City: **Shawnee** State: **KS** Zip: **66214**

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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.

Executed on:

Date: **7/22/2008 8:31:18 PM** Name of Chairperson: **Randall Holt**

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