## STATEMENT OF ORGANIZATION

	,JUL 28,2010
	E GOVERNMENT OF THE CONTRACT O
FOR PO	LITICAL 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	(PLEASE TYPE OR PRINT)
Name	oity Bankers PAC
_	
3003 5	W Van Buren Ste, A Topeta KS Business Telephone (785)271-1404
CHAIRPERSO	ON
Name_	Home Telephone
Gary	Kay ( )
_	ss (Street, City, State, Zip Code)  Business Telephone
San	e as above ()
TREASURER	
Name Shaw	Home Telephone  ()
Mailing Addre	ss (Street, City, State, Zip Code)  Business Telephone
	Same as above ( )
AFFILIATED	OR CONNECTED ORGANIZATIONS
Name Omm Mailing Addre	ss (Street, City, State, Zip Code)
	Same as above
If not connected	or affiliated with an organization, identify the trade, profession, or primary interest of the contributors.
belief is true, co	his statement has been examined by me and to the best of my knowledge and brrect and complete. I understand that the intentional failure to file this document filing a false document is a class A misdemeanor."  (Signature of Chairperson)

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FILE

RON THORNBURGH SECRETARY OF STATE

## STATEMENT OF ORGANIZATION

SECRETARY OF STATE	
FOR POLITICAL ACTION COMMITT	EES AND PARTY COMMITTEES
(See Reverse Side Fo	or Instructions)
This is a (check one) Party Committee	<del></del>
This is an (check one)  Initial Statement	
This is an (check one)	A monded dutament
COMMITTEE (PLEASE TYPE C	OR PRINT)
Name Community Banker PAC	
Mailing Address (Street, City, State, Zip Code)	Business Telephone
3003 SW Van Buren Ste A	(785) 271-1404
CHAIRPERSON Topeka, KS 666	219 
Name O i	Home Telephone
Galen Felton	( )
Mailing Address (Street, City, State, Zip Code)	Business Telephone
11 Same as above "	
TREASURER	
Name Shawn Mitchell	Home Telephone
Mailing Address (Street, City, State, Zip Code)	Business Telephone
Sure as above	(785)27/-1404
AFFILIATED OR CONNECTED ORGANIZATIONS	
Name Community Bankers Association	and Community Bankow Services Dru
Mailing Address (Street, City, State, Zip Code)	
Some as Committee	ee address_
If not connected or affiliated with an organization, identify the t	rade, profession, or primary interest of the contributors.
SIGNATURE:	
"I declare that this statement has been examined by me and	•
belief is true, correct and complete. I understand that the in or intentionally filing a false document is a class A misden	
7-16-09 (Date) (Signa	ature of Chairperson)
(Date) - (Signa	ture of Charryerson)
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SEP 25 LUCUS STATEMENT OF ORGANIZATION
( aE O
This is a (check one)  Party Committee  Political Action Committee  RECEIVED
This is an (check one) Initial Statement Amended Statement
COMMITTEE (PLEASE TYPE OR PRINT)
Name Oa o
Community Bankers PAC
Mailing Address (Street, City, State, Zip Code) Topeka KS Business Telephone 3003 SW Van Busen, Suite A 6661 (785) 271-1404
CHAIRPERSON
Name Home Telephone
Pat Kerschen (620)896-7353
Mailing Address (Street, City, State, Zip Code)  Business Telephone
"Same as above" (785)271-1404
TREASURER
Name Wikk Oohrman (785) 771-3881
Mailing Address (Street, City, State, Zip Code)  Business Telephone  (785) 271-1404
AFFILIATED OR CONNECTED ORGANIZATIONS
Name
Community Barkers Association of Kansas
Mailing Address (Street, City, State, Zip Code)
Same as above
If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributor
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."
(Date) (Signature of Chairperson)

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