(See Reverse Side Fo	Transmissional Properties
This is a (check one) Party Committee	or Instructions)  RECEIVED  Political Action Committee
This is an (check one) Initial Statement	Amended Statement Jill 19201
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COMMITTEE (PLEASE TYPE C	
Name Kansas City Life Insurance Company Employ	rees PAC - Fund I
Mailing Address (Street, City, State, Zip Code) 3520 Broadway	Business Telephone (816) 753-7000
CHAIRPERSON	
Name Charlie R. Duffy, Jr.	Home Telephone ( 816 ) 536-9503
Mailing Address (Street, City, State, Zip Code) 3520 Broadway, Kansas City, MO 64111	Business Telephone ( 816 ) 753-7000
FREASURER	·
Name	Home Telephone
Richard Ropp	(816 ) 523-8304
Mailing Address (Street, City, State, Zip Code) 3520 Broadway, Kansas City, MO 64111	Business Telephone ( 816 ) 753-7000
AFFILIATED OR CONNECTED ORGANIZATIONS	
Name Kansas City Life Insurance Company	
Mailing Address (Street, City, State, Zip Code) 3520 Broadway, Kansas City, MO 64111	
not connected or affiliated with an organization, identify the t	rade profession or primary interest of the contributo
	protestion of primary modern of the contribution

Governmental Ethics Commission

Rev.2000

## STATEMENT OF ORGANIZATION

## FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

	(See	Reverse Side For I	nstructions)		
	This is a (check one)	Party Committee		on Committee <b>FEC</b>	EIVED
•	This is an (check one)	Initial Statement	Amended Sta	atement	z 6 z009
COMMITTI	EE (P.	LEASE TYPE OR	PRINT)		warma commissio
Name KAN	ISAS CITY LIFE INSURAN	ICE COMPANY E	EMPLOYEES P	AC - FUND I	
	lress (Street, City, State, Zip OADWAY, KANSAS CITY,		Busines (816	s Telephone ) 753-7000	·
CHAIRPER	SON			·	
Name ROE	BERT MILROY		Home Te ( 913	elephone ) 262-0763	
	lress (Street, City, State, Zip ( DADWAY, KANSAS CITY,		Busines ( 816	s Telephone ) 753-7000	
TREASURE	ER	· · · · · · · · · · · · · · · · · · ·		· :	
Name RICI	HARD ROPP		Home Te ( 816	elephone ) 523-8304	
Mailing Add 3520 BR	lress (Street, City, State, Zip ( OADWAY, KANSAS CITY,	Code) MO 64111	Busines ( 816	s Telephone ) 753-7000	·
AFFILIATE	D OR CONNECTED ORGA	NIZATIONS			
Name KAN	ISAS CITY LIFE INSURAN	CE COMPANY			
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	d or affiliated with an organizat		le profession or p	orimary interest of t	the contributors
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SIGNATUR	E:		-		
"I declare tha	t this statement has been exar	•	•	_	
	correct and complete. I underly filing a false document is a			file this documen	it .
6/27	$r/\rho q$		The le		
(Date)	<del>/                                    </del>	(Signatur	re of Chairperson		
· ^	Ethios Commission		. /	/	Day 2000

## STATEMENT OF ORGANIZATION

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FOR PO	LITICAL ACT	ION COMMITTEE	S AND PARTY COMMI	TTEES		
		(See Reverse Side For Ir		May 19 one		
	This is a (check one)	Party Committee	1 Dillion / Fattan Committee	the said that		
*	This is an (check one)	Initial Statement	Amended Statement	mental Etnics Comi WEST 9TH STRE		
COMMITTEE		(PLEASE TYPE OR		EKA, KANSAS 666		
Name KANS	AS CITY LIFE INSU	JRANCE COMPANY E	MPLOYEES PAC FUND 1			
	ss (Street, City, State DWAY, KANSAS C	, Zip Code) CITY, MISSOURI 64111	Business Telephone (816 ) 753-7000			
CHAIRPERSO	ON					
Name ROBE	RT MILROY		Home Telephone ( 913 ) 262-0763			
	ss (Street, City, State, DWAY, KANSAS C	, Zip Code) SITY, MISSOURI 64111	Business Telephone (816) 753-7000			
TREASURER						
Name FRED	A TILLING		Home Telephone ( 816 ) 523-7918			
Mailing Addre 3520 BROA	ss (Street, City, State ADWAY, KANSAS	, Zip Code) CITY, MISSOURI 6411	Business Telephone 1 (816 ) 753-7000			
AFFILIATED	OR CONNECTED C	RGANIZATIONS				
Name KANS	AS CITY LIFE INSU	JRANCE COMPANY				
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If not connected of	or affiliated with an org	ganization, identify the trad	e, profession, or primary interest of the	ne contributors.		
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SIGNATURE:	his statement has been	a avaninad by ma and to	the best of my knowledge and			
			ntional failure to file this document			
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5-18-06						
(Date)		(Signature	e of Chairperson)			
Governmental E	thics Commission			Rev.2000		