

# STATEMENT OF ORGANIZATION

## FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

SECRET

(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 Chamber of Commerce Political Action Committee	
Mailing Address (Street, City, State, Zip Code)	Business Telephone	
835 SW Topeka Blvd., Topeka, KS 66612	( 785 )	357-6321

### CHAIRPERSON

Name	Home Telephone
Michael Maddox	( )
Mailing Address (Street, City, State, Zip Code)	Business Telephone
835 SW Topeka Blvd., Topeka, KS 66612	( 785 ) 357-6321

### TREASURER

Name	Home Telephone
Jeff Glendening	( )
Mailing Address (Street, City, State, Zip Code)	Business Telephone
835 SW Topeka Blvd., Topeka, KS 66612	( 785 ) 357-6321

### AFFILIATED OR CONNECTED ORGANIZATIONS

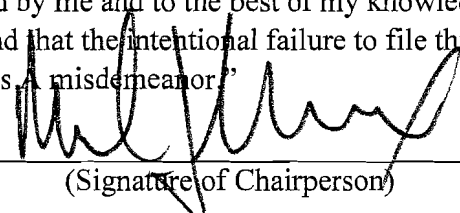
Name	Kansas Chamber of Commerce
Mailing Address (Street, City, State, Zip Code)	835 SW Topeka, Blvd. Topeka, KS 66612

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."

5-19-08  
(Date)

  
(Signature of Chairperson)