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## STATEMENT OF ORGANIZATION

JUL 2.1 2009

## FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

(See Reverse Side For Instructions)							
	This is a (check one)	Party Committee	Political Action Comm	nittee			
	This is an (check one)	Initial Statement	Amended Statement				
COMMITTEE		(PLEASE TYPE O	R PRINT)	· · · · · · · · · · · · · · · · · · ·			
Name Topeka Ho	me Builders Politi	cal Action Commi	ttee				
	ess (Street, City, State, airlawn, Topeka, K		Business Teler (785 ) 273-				
CHAIRPERS	ON _	<u></u>	· .				
Name Neil Carl	son		Home Telephor ( 785 ) 232-				
_	ess (Street, City, State, Buren, Topeka, KS	* '	Business Telep ( 785 ) 925				
TREASURER	<u>.</u>	<u> </u>					
Name Dustin Ha	wks		Home Telephor ( 785 ) 925				
	ess (Street, City, State, airlawn, Topeka, K		Business Tele ( 785 ) 925	phone -3688			
AFFILIATED	OR CONNECTED O	RGANIZATIONS					
Name Topeka Ho	me Builders Associ	ation					
1	ess (Street, City, State, airlawn, Topeka, I	•					
If not connected Building		anization, identify the t	rade, profession, or primary	interest of the contributors.			
SIGNATURE	S:	<del>-</del>					
"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."							
2/17/2009		$\left( \begin{array}{c} 1 \\ 1 \end{array} \right)$	eil (also	u_			
(Date)		`(Signa	ature of Chairperson)				
Governmental	Ethics Commission		•	Pey 2000			

## STATEMENT OF ORGANIZATION

FERORA	JRGH JEJEFCAL ACTION COMMITTE	EES AND PARTY COMMI	TTEES			
RONTHON	(See Reverse Side For Instructions)					
SE	This is a (check one) Party Committee	Political Action Committee				
	This is an (check one) Initial Statement	Amended Statement				
СОММІТТЕ	E (PLEASE TYPE O	R PRINT)				
Name Topeka Hor	me Builders Political Action Commi	ttee	,			
_	ess (Street, City, State, Zip Code) airlawn, Topeka, KS 66604	Business Telephone (785) 273-1260				
CHAIRPERSO	ON					
Name Neil Carls	son	Home Telephone ( 785 ) 232-0515				
T . T	ess (Street, City, State, Zip Code) Buren, Topeka, KS 66612	Business Telephone (785) 925-1622				
TREASURER						
Name Dustin Hav	wks	Home Telephone ( 785 ) 925-3688				
	ess (Street, City, State, Zip Code) 205, Topeka, KS 66667	Business Telephone (785) 925-3688				
AFFILIATED	OR CONNECTED ORGANIZATIONS					
Name Topeka Hon	me Builders Association					
_	ss (Street, City, State, Zip Code)					
1505 SW Fa	airlawn, Topeka, KS 66604					
If not connected of Building i	or affiliated with an organization, identify the tra	ade, profession, or primary interest of th	e contributors.			
SIGNATURE:						
	his statement has been examined by me and	•				
	orrect and complete. I understand that the integration of filing a false document is a class Amigdement.					
2/17/2009 (Date)	(Signat	ure of Chairperson)				
Governmental E	Ethics Commission	·	Rev.2000			

## STATEMENT OF ORGANIZATION

Rev.2000

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

					NANSAS 66612		
(See Reverse Side For Instructions)							
	This is a (check one)	Party Committee		Political Action Committee	S		
71	This is an (check one)	Initial Statement		Amended Statement	i.e		
					I		
COMMITTEE		(PLEASE TYPE OR	PRIN	T)			
Name Tope Ka Home Bulders Political Action Committee							
Mailing Addre	ss (Street, City, State, Sw Far N	Zip Code) Topeka Ks		Business Telephone (785) 272	260		
CHAIRPERSO	ON						
Name Q.	Meil Carlso	W		Home Telephone (785) 27272	07		
Mailing Addres	ss (Street, City, State, LOSW Van Bure	Zip Code) n Topeka Ks 6660	4	Business Telephone (785) 232 05	15		
TREASURER					N HOS		
Name DAU	W WRIGHT	2.7		Home Telephone (785)273-40	761		
Mailing Address (Street, City, State, Zip Code)  Business Telephone  1505 6W FAIRLAWN, TOTALA, KSW604, 785 ) 273-1260							
AFFILIATED	OR CONNECTED OF	RGANIZATIONS					
Name TOPERA HOME BUILDERS ASSOCIATION							
Mailing Address (Street, City, State, Zip Code) 1505 5 W FAIRLAWN, TODEKA KS 66604							
If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors.							
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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)							
(Dignature of Champerson)							

Governmental Ethics Commission