

STATEMENT OF ORGANIZATION

RECEIVED

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

JUL 21 2009

KS Governmental Ethics Commission

(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 Association of Health Plans PAC | |
| Mailing Address (Street, City, State, Zip Code) | 815 SW Topeka Blvd, Suite 2C, Topeka, KS 66612 | Business Telephone (785) 783-7111 |

CHAIRPERSON

| | | |
|---|---|-------------------------------------|
| Name | Bruce Witt | Home Telephone (785) 783-7111 |
| Mailing Address (Street, City, State, Zip Code) | 815 SW Topeka Blvd, Sute 2C, Topeka, KS 66612 | Business Telephone (785) 783-7111 |

TREASURER

| | | |
|---|--|-------------------------------------|
| Name | Bill Tracey | Home Telephone (785) 783-7111 |
| Mailing Address (Street, City, State, Zip Code) | 815 SW Topeka Blvd, Suite 2C, Topeka, KS 66612 | Business Telephone (785) 783-7111 |

AFFILIATED OR CONNECTED ORGANIZATIONS

| | | |
|---|---|--|
| Name | Kansas Association of Health Plans | |
| Mailing Address (Street, City, State, Zip Code) | 815 SW Topeka Blvd., Suite 2C, 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."

7/17/09 (Date)

Bruce Witt By Marel Carpenter (Signature of Chairperson)

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| Mailing Address (Street, City, State, Zip Code) | Business Telephone |
| 815 SW Topeka Blvd, Suite 2C, Topeka, KS 66612 | (785) 783-7111 |

CHAIRPERSON

| | |
|--------------|----------------|
| Name | Home Telephone |
| Steve Robino | () |

| | |
|---|--------------------|
| Mailing Address (Street, City, State, Zip Code) | Business Telephone |
| 8320 Ward Parkway, Kansas City, MO 64114 | (816) 460-4441 |

TREASURER

| | |
|------------|----------------|
| Name | Home Telephone |
| Bruce Witt | () |

| | |
|---|--------------------|
| Mailing Address (Street, City, State, Zip Code) | Business Telephone |
| 8535 East 21st Street North, Wichita, KS 67206 | (316) 609-2315 |

AFFILIATED OR CONNECTED ORGANIZATIONS

Name Kansas Association of Health Plans

Mailing Address (Street, City, State, Zip Code)
815 SW Topeka Blvd. Suite 2C, Topeka, Kansas 66612

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1/23/09
(Date)

Steve Robino signed by *Marcie Carpenter*
(Signature of Chairperson)

FILED

JUL 29 2008

RON THORNISBURY
SECRETARY OF STATE

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COMMITTEE (PLEASE TYPE OR PRINT)

| | | |
|---|--|--|
| Name | Kansas Assoc. of Health Plans PAC | |
| Mailing Address (Street, City, State, Zip Code) | 212 SW 8th Ave Suite 201 Topeka KS 66603 | |
| Business Telephone | (785) 640-2747 | |

CHAIRPERSON

| | | | |
|---|--|----------------|-----|
| Name | Steven Robino | Home Telephone | () |
| Mailing Address (Street, City, State, Zip Code) | 212 SW 8th Ave Suite 201 Topeka KS 66603 | | |
| Business Telephone | (785) 640-2747 | | |

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Health Insurance

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7-30-08
(Date)

Steven Robino by [Signature]
(Signature of Chairperson)