STATEMENT OF ORGANIZATION	
FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES	D
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COMMITTEE (PLEASE TYPE OR PRINT)	
Name Propane Marketers Association of Kansas PA	70
Mailing Address (Street, City, State, Zip Code) Business Telephone	
501 SE Jefferson St. Suite 2000 (785-) 354-1749 Topeka, Kanses, 66607 CHAIRPERSON	<b>_</b>
Name Home Telephone Don Reinert (620) 382 - 5923	
Mailing Address (Street, City, State, Zip Code) 14300 E.615 St. North Wichita, Ks (316)744-6722	
TREASURER	
Name Greg Noll (785)633-5587	
Mailing Address (Street, City, State, Zip Code)Business Telephone501 5E Jefferson St.Suite 2000(785) 354-1749	
TOPEKA, KS. 66607 AFFILIATED OR CONNECTED ORGANIZATIONS	
Name Propane Marketers Association of Kansas Mailing Address (Street, City, State, Zip Code) 501 SE Jefferson St., Soite 2000 Topeka, KS 6660	7.
If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contribu	
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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Propane Marketers Association of Kansas PAC	
Mailing Address (Street, City, State, Zip Code) 50, SE Jefferson, Suite 2000 Torska (785) 354-1749	
Ks 66607	
CHAIRPERSON	
Name Greg Noll Home Telephone (785)673-5587	
Mailing Address (Street, City, State, Zip Code) 501 SE Jefferson Suite 2000 Topsha (785-)354-1749	
TREASURER	
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Name Don Reinert (Propane Central)()	
Mailing Address (Street, City, State, Zip Code)Business Telephone14300 E 61 - Wichita KS 67228(316) 744-6722	
AFFILIATED OR CONNECTED ORGANIZATIONS	
Name	
Mailing Address (Street, City, State, Zip Code)	
If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors	-
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(Date) (Signature of Chairperson)	
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