

## STATEMENT OF ORGANIZATION

## FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

(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 checked="" type="checkbox"/> Amended Statement

AUG 28 2008

## COMMITTEE

(PLEASE TYPE OR PRINT)

Name	Kansans For Truth In Politics
Mailing Address (Street, City, State, Zip Code)	P.O. Box 780631, Wichita, KS 67278
Business Telephone	(316) 516-3034

## CHAIRPERSON

Name	Cheryl Sullenger	Home Telephone	(316) 634-1037
Mailing Address (Street, City, State, Zip Code)	P.O. Box 781045, Wichita, KS 67278	Business Telephone	(316) 516-3034

## TREASURER

Name	Randall Sullenger	Home Telephone	(316) 634-1037
Mailing Address (Street, City, State, Zip Code)	P.O. Box 781045, Wichita, KS 67278	Business Telephone	(316) 516-3034

## 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.  
Primary interest of contributors is family, traditional values.

## 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."

Jan. 7, 2008  
(Date)

Cheryl Sullenger  
(Signature of Chairperson)