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SEP 29 2011

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 checked="" type="checkbox"/> Initial Statement	<input type="checkbox"/> Amended Statement

COMMITTEE (PLEASE TYPE OR PRINT)

Name	Kansas Chiropractic Action committee		
Mailing Address (Street, City, State, Zip Code)	1334 S Topeka Blvd		Business Telephone (785) 233-0697

CHAIRPERSON

Name	Dr. Richard Brown	Home Telephone ()
Mailing Address (Street, City, State, Zip Code)	1334 S. Topeka Blvd Topeka, KS 66612	Business Telephone (785) 233-0697

TREASURER

Name	Dr. B. Kendall Payne	Home Telephone ()
Mailing Address (Street, City, State, Zip Code)	1334 S. Topeka Blvd Topeka, KS 66612	Business Telephone (785) 233-0697

AFFILIATED OR CONNECTED ORGANIZATIONS

Name	Kansas Chiropractic Association
Mailing Address (Street, City, State, Zip Code)	1334 S. 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."

9-27-2011
(Date)

Richard D Brown
(Signature of Chairperson)