## STATEMENT OF ORGANIZATION

## FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

_	(See Reverse Side For Instructions)			RECEIVED
	This is a (check one)	Party Committee	Political Action Committ	- /
	This is an (check one)	Initial Statement	Amended Statement	Sovernmens.
COMMITTEE	COMMITTEE (PLEASE TYPE OR PRINT)			ee FEB 0 4 2013  Bovelnmental Ethics Commissi
Name Kansa	s Association of N	lurse Anesthetists CR	NA PAC	
1	s (Street, City, State th, Newton, KS 6	•	Business Telepho (316 ) 288-6	
CHAIRPERSO:	N			
Name Jeff Gla	asgow CRNA		Home Telephone ( 785 ) 393-2	872
<b>-</b>	s (Street, City, State reek Drive, Lawre	, <u>.</u>	Business Telepho ( 785 ) 393-2	
TREASURER				
Name Ruth Mo	orris		Home Telephone ( 913 ) 302-6	6073
	s (Street, City, State 5th Terr, Overland	, Zip Code) J Park, KS 66213	Business Telepho ( 913 ) 302-6	
AFFILIATED C	R CONNECTED C	DRGANIZATIONS		
Name Kansas	Association of Nu	irse Anethetistis		
_	(Street, City, State h, Newton, KS 67	• •		
f not connected or	affiliated with an org	ganization, identify the tra	ide, profession, or primary into	erest of the contributors.
			o the best of my knowledge	
	-	I understand that the into nt is a class A misdeme	entional failure to file this do anor."¶	ocument
02/04/	2013	John C	J. Dly	
(Date)		J (Signatu	re of Chairperson)	
fovernmental Eth	ics Commission			Rev.2000

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## FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

(See Reverse Side For Instructions)		
	RECEIVE	>
This is an (check one) Initial Statement Amended Statement	DEC 12200	
COMMITTEE (PLEASE TYPE OR PRINT)	Tenies Conce Con	Deni.
Name KANA-PAC	E-li'	arussioi
Mailing Address (Street, City, State, Zip, Code)  Business Telephone  1755 Sw Stutieu Rd Todeka, (56665 (785) 478-014		
CHAIRPERSON		
Name Sonya Jurgens Home Telephone (785) 478-0146		
Mailing Address (Street, City, State, Zip Code)  1735 SW Stuffey Road (785) 554-1089		
TODEKA, KS WOOLS TREASURER		
Name Home Telephone (913) 681-24	.57	
Mailing Address (Street, City, State, Zip Code)  Business Telephone  (SUNC)		
CHECLAND POWK, KS 64213 AFFILIATED OR CONNECTED ORGANIZATIONS		
Name RANSOS ASSOCIOTION OF DURSE Anest	hetists	
Mailing Address (Street, City, State, Zip Code)		
12014 Apple Drive Empiria, Cansas 668	501	
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."		
(Date) Signature of Chairperson)		
Governmental Ethics Commission	Rev.2000	