STATEMENT OF ORGANIZATION

JUN 2 9 2009

mission

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES	
(See Reverse Side For Instructions)	
This is a (check one) Party Committee	✓ Political Action Committee
This is an (check one) Initial Statement	Amended Statement
COMMITTEE (PLEASE TYPE OR PRINT)	
Name Kansas Funeral Directors Association PAC	
Mailing Address (Street, City, State, Zip Code) 1200 S. Kansas Ave., Topeka, KS 66612	Business Telephone (785) 232-7789
CHAIRPERSON	
Name Larry McElwain	Home Telephone (785) 841- 399ω
Mailing Address (Street, City, State, Zip Code) 120 W. 13th St., Lawrence, KS 66044	Business Telephone (785) 843-1120
TREASURER	The state of the s
Name Home Telephone Pam Scott	
Mailing Address (Street, City, State, Zip Code) 1200 S. Kansas Ave., Topeka, KS 66612	Business Telephone (785) 232-7789
AFFILIATED OR CONNECTED ORGANIZATIONS	
Name Kansas Funeral Directors Association, Inc	
Mailing Address (Street, City, State, Zip Code) 1200 S. Kansas Ave., Topeka, KS 66612	
If not connected or affiliated with an organization, identify the tra funeral service	de, profession, or primary interest of the contributors.
SIGNATURE: "I declare that this statement has been examined by me and to belief is true, correct and complete. I understand that the integration or intentionally filing a false document is a class Amedemes	entional failure to file this document
$\frac{6/24/c9}{\text{(Date)}}$	ure of Chairperson)
Governmental Ethics Commission	Rev 2000