

STATEMENT OF ORGANIZATION

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

FILED

JAN 13 2012

KRIS W. KOBACH
SECRETARY OF STATE

COMMITTEE

(PLEASE TYPE OR PRINT)

Name MAINSTREAM POLITICAL ACTION COMMITTEE

Mailing Address (Street, City, State, Zip Code)
PO BOX 861086; SHAWNEE, KS 66286-1086

Business Telephone
(913-) 649-3316

(New 1/5/12)

CHAIRPERSON

Name MARK DUGAN

Home Telephone
(913) 385-0381

Mailing Address (Street, City, State, Zip Code)
5530 W 85TH ST; OVERLAND PARK, KS 69207

Business Telephone
(816) 714-7126

TREASURER

Name SALLY LEVITT

Home Telephone
(913) 422-7081

Mailing Address (Street, City, State, Zip Code)
21007 W 60TH TERRACE; SHAWNEE, KS 66218

Business Telephone
(913) 481-4222

AFFILIATED OR CONNECTED ORGANIZATIONS

Name MAINSTREAM COALITION

Mailing Address (Street, City, State, Zip Code)
5960 DEARBORN, STE 213; MISSION, KS 66202

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"

1/7/2011
(Date)

(Signature of Chairperson)

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**Campaign Finance
Statement of Organization
For Political Action Committees
And Party Committees**

Governmental Ethics Commission
109 W. 9th, Suite 504
Topeka, KS 66612
Phone (785) 296-4219
Fax (785) 296-2548
www.kansas.gov/ethics

This is a (Check one) **Party Committee** **PAC**

This is an (Check one) **Initial Appointment** **Amended Statement**

Committee

Name: **Mainstream Political Action Committee Inc**

Address: **PO Box 6073**

City: **Leawood** State: **KS** Zip: **66206**

Business Phone: **9136493326**

Email Address: **slevitt2007@kc.rr.com**

Chairperson

Name: **Mark Dugan**

Address: **55830 W 85th ST**

City: **Shawnee Mission** State: **KS** Zip: **66207**

Home Telephone: Business Phone:

Email Address: **dugan@sshlaw.com**

Treasurer

Name: **Sally Levitt**

Address: **21007 W 60th TER**

City: **Shawnee** State: **KS** Zip: **66218**

Home Telephone: **9134227081** Business Phone: **9134227081**

Email Address: **slevitt2007@kc.rr.com**

**Affiliated or
Connected
Organizations**

Name: **Mainstream Coalition**

Address: **5350 W 94th TER**

City: **Prairie Village** State: **KS** Zip: **66207**

If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors.

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.

Executed on:

Date: **1/10/2010 3:18:24 PM** Signature of Chairperson: **Mark Dugan**

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