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

COMMITTEE (PLEASE TYPE OR PRINT)

Name: Kansas Insurance Agents Political Action Committee

Mailing Address (Street, City, State, Zip Code): 815 SW Topeka Blvd. Topeka, KS 66612

Business Telephone: (785) 232-0561

CHAIRPERSON

Name: William R Hessen

Home Telephone: ( )

Mailing Address (Street, City, State, Zip Code): 420 E Washington, Hutch, KS 67501

Business Telephone: (620) 347-5679

TREASURER

Name: Kerri L Spielman

Home Telephone: ( )

Mailing Address (Street, City, State, Zip Code): 815 SW Topeka Blvd. Topeka KS 66612

Business Telephone: (785) 232-0561

AFFILIATED OR CONNECTED ORGANIZATIONS

Name: Kansas Assn of Insurance Agents

Mailing Address (Street, City, State, Zip Code): 815 SW 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."

9-24-12
(Date)

(Signature of Chairperson)

FILED
SEP 25 2012
KRIS W KOBACH
SECRETARY OF STATE

Governmental Ethics Commission

Rev. 2009