

### STATEMENT OF ORGANIZATION

### FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

(See Reverse Side For Instructions)

JUL 17 2014

This is a (check one)	<input type="checkbox"/> Party Committee	<input checked="" type="checkbox"/> Political Action Committee
This is an (check one)	<input type="checkbox"/> Initial Statement	<input type="checkbox"/> Amended Statement

KS Governmental Ethics Commission

#### COMMITTEE (PLEASE TYPE OR PRINT)

Name	Kansas Dental PAC	
Mailing Address (Street, City, State, Zip Code)	5200 SW Huntoon, Topeka, KS 66604	Business Telephone ( 785 ) 272-7360

#### CHAIRPERSON

Name	Dr. Mark Armfield, DDS	Home Telephone ( 316 ) 775-2698
Mailing Address (Street, City, State, Zip Code)	2814 Ohio St., Augusta, KS 67010	Business Telephone ( 316 ) 775-5451

#### TREASURER

Name	Nick Rogers	Home Telephone ( 620 ) 442-8086
Mailing Address (Street, City, State, Zip Code)	1939 N 11th Street, Arkansas City, KS 67005	Business Telephone ( 620 ) 442-5660

#### AFFILIATED OR CONNECTED ORGANIZATIONS

Name	Kansas Dental Association	
Mailing Address (Street, City, State, Zip Code)	5200 SW Huntoon, Topeka, KS 66604	

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."

7/16/2014  
(Date)

Mark Armfield DDS  
(Signature of Chairperson)

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

**FILED**  
**JUL 30 2012**  
 KRIS W. KOBACH  
 SECRETARY OF STATE

COMMITTEE (PLEASE TYPE OR PRINT)

Name Kansas Dental Political Action Committee

Mailing Address (Street, City, State, Zip Code)  
5200 SW Huntoon St, Topeka, KS 66604

Business Telephone  
( 785 ) 272.7360

CHAIRPERSON

Name Mark Armfield, DDS

Home Telephone  
( 316 ) 775.2698

Mailing Address (Street, City, State, Zip Code)  
2814 Ohio St, Augusta, KS 67010

Business Telephone  
( 316 ) 775.5451

TREASURER

Name P. Nick Rogers, DDS

Home Telephone  
( 620 ) 442.8086

Mailing Address (Street, City, State, Zip Code)  
1939 N 11th St, Arkansas City, KS 67005

Business Telephone  
( 620 ) 442.5660

AFFILIATED OR CONNECTED ORGANIZATIONS

Name Kansas Dental Association

Mailing Address (Street, City, State, Zip Code)  
5200 SW Huntoon St, Topeka, KS 66604

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."

7/30/2012  
(Date)

Mark Armfield, DDS  
(Signature of Chairperson)