JUN 3 0 2014

STATEMENT OF ORGANIZATION

KRIS W. KOBACH SECRETARY OF STAT

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

•	(See Reverse Side For	Instructions)		
	This is a (check one)	Party Committee	X Political Action Committee		
	This is an (check one)	Initial Statement	Amended Statement		
					-
COMMITTEE	,	(PLEASE TYPE OF	R PRINT)	<u> </u>	
Name Kansas Ci	ty Regional Assoc	iation of Realt	ors-Kansas Realtors Politic	cal Action C	ommittee
	ss (Street, City, State, 2 brook Road, Suite		Business Telephone KS 66 1 11) 913-661-1600		
CHAIRPERSO	ON _				
Name Chris	topher D. Collins		Home Telephone (913)825-7588		
	ss (Street, City, State, Z . 106th St., Over		Business Telephone 66212 (913) 825-7500		i
TREASURER			·		
Name John Je	ffrey Carson		Home Telephone (816) 225-6880		
Mailing Addres 11150 Over	ss (Street, City, State, Z brook Rd, Ste 100	ip Code) , Leawood, KS 6	Business Telephone 66211 (913) 266-5916	<u>.</u>	
AFFILIATED	OR CONNECTED OR	GANIZATIONS	·	<u>·</u>	
Name Kansas C	ity Regional Asso	ciation of Real	tors		
Mailing Addres	ss (Street, City, State, Z erbrook Rd, Ste 1	ip Code)			
If not connected c	or affiliated with an organ	ization, identify the tra	de, profession, or primary interest of the	contributors.	
belief is true, co	nis statement has been e rrect and complete. I u filing a false document	nderstand that the inte	// '		THE PROPERTY OF THE PROPERTY O
(Date)	<u>14</u> .	(Signatu	re of Chairperson)		
Fovernmental F	thics Commission		•	Rev.2000	

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FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

		(See]	Reverse Side For	Instru	ctions)	I			
	This is a (check one)		Party Committee	√	Political Action Committee	1/	FILED NOV 08 2012		
	This is an (check one)		Initial Statement	✓	Amended Statement	$\rfloor \! / \! \rfloor$	NOV 08 201		
COLO METER		/DI			TITI	7			
COMMITTEE		(PI	LEASE TYPE OF	K PRII	NT)		KRIS W. KOBACH SECRETARY OF STAT		
Name Kansa	s City Regional Ass	ociat	ion of Realtors-l	Kansa	as Realtors Political Ac	tion			
	ss (Street, City, State, brook Road, Suite 1			211_	Business Telephone (913) 661-160				
CHAIRPERSO	ON			_					
Name Jeffrey	/ Hill				Home Telephone (816) 716-7712	2			
	ess (Street, City, State 75th Street, Prairie			_	Business Telephone (913) 652-040				
TREASURER									
Name John J	: Jeffrey Carson				Home Telephone (816) 225-688	30			
Mailing Addre	ess (Street, City, State erbrook Road, Suite	Zip (100,	Code) Leawood, KS 6	6211	Business Telephone (913) 266-59				
AFFILIATED	OR CONNECTED C	RGA	NIZATIONS						
Name Kansa	s City Regional Ass	ociat	ion of Realtors						
	ess (Street, City, State brook Road, Suite 1	-	•	211					
:==	Diook Noau, Suite	00, L	eawood, NS 00	211					
If not connected	or affiliated with an org	ganizat	ion, identify the tr	ade, pr	ofession, or primary intere	st of	f 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."									
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Nsv 2, 20 (Date)	012_			1/1/	NA)	_			
(Date)			(Skgrka)	fure of	Chairperson)				
Governmental I	Ethics Commission	on an apply of the sudering Philosophical				V-F 84 NR-7-9	Rev.2000		