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JUL 16 2013

STATEMENT OF ORGANIZATION

KS Governmental Ethics Commission
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 checked="" type="checkbox"/> Amended Statement

FILED

JUL 15 2013

KRIS W. KOBACH
SECRETARY OF STATE

COMMITTEE

(PLEASE TYPE OR PRINT)

Name Kansas Association of Health Underwriters PAC

Mailing Address (Street, City, State, Zip Code)
6001 W. 53rd Place, Mission, KS 66202Business Telephone
(913) 529-1130

CHAIRPERSON

Name Thomas A. Bryon

Home Telephone
(913) 385-5408Mailing Address (Street, City, State, Zip Code)
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TREASURER

Name Kay Schweiger

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6001 W. 53rd Place, Mission, KS 66202Business Telephone
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AFFILIATED OR CONNECTED ORGANIZATIONS

Name Kansas Association of Health Underwriters

Mailing Address (Street, City, State, Zip Code)
6001 W. 53rd Place, Mission, KS 66202

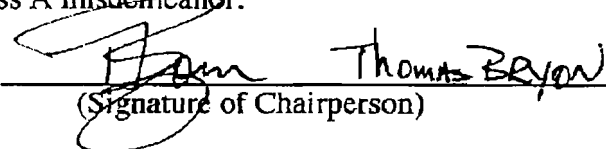
If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors.

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."

7-11-13

(Date)


(Signature of Chairperson)