

**STATEMENT OF ORGANIZATION**  
**FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES**

**FILED**

**JUL 10 2014**

**KRIS W. KOBACH**  
**SECRETARY OF STATE**

(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

**COMMITTEE** (PLEASE TYPE OR PRINT)

Name **Kansas Society of Professional Engineers Political Action Committee**

Mailing Address (Street, City, State, Zip Code)  
**825 S. Kansas, Suite 500**

Business Telephone  
( 785 ) 233-4512

**CHAIRPERSON**

Name  
**Tom Roberts**

Home Telephone  
( 785 ) 565-1286

Mailing Address (Street, City, State, Zip Code)  
**2015 Pierre Street, Manhattan, Kansas 66502**

Business Telephone  
( )

**TREASURER**

Name  
**Ronald Gaches**

Home Telephone  
( 785 ) 633-6514

Mailing Address (Street, City, State, Zip Code)  
**825 S. Kansas, Suite 500, Topeka, Kansas 66612**

Business Telephone  
( 785 ) 233-4512

**AFFILIATED OR CONNECTED ORGANIZATIONS**

Name  
**Kansas Society of Professional Engineers**

Mailing Address (Street, City, State, Zip Code)  
**825 S. Kansas, Suite 500, Topeka, Kansas 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."

July 11, 2014  
(Date)

  
(Signature of Chairperson)

# 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

RECEIVED

JUN 30 2011

no Governmental Ethics Commission

### COMMITTEE

(PLEASE TYPE OR PRINT)

Name Kansas Society of Professional Engineers Political Action Committee

Mailing Address (Street, City, State, Zip Code) Business Telephone  
825 S. Kansas Avenue, Suite 500, Topeka, KS 66612 ( 785 ) 233-4512

### CHAIRPERSON

Name Richard Hayter Home Telephone  
( 785 ) 537-8176

Mailing Address (Street, City, State, Zip Code) Business Telephone  
1920 Grandview Drive, Manhattan, KS 66502 ( )

### TREASURER

Name Ronald Gaches Home Telephone  
( 785 ) 633-6514

Mailing Address (Street, City, State, Zip Code) Business Telephone  
825 S. Kansas Avenue, Suite 500, Topeka, KS 66612 ( 785 ) 233-2121

### AFFILIATED OR CONNECTED ORGANIZATIONS

Name Kansas Society of Professional Engineers

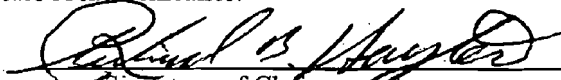
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825 S. Kansas Avenue, Suite 500, Topeka, KS 66612

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"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."

June 23, 2011  
(Date)

  
(Signature of Chairperson)