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 Stop Brownback PAC	
Mailing Address (Street, City, State, Zip Code) PD BOX 442434 Lawrence, KS 6	Business Telephone 2604 (785) 748-1235
CHAIRPERSON	
Name Rex Gardner	Home Telephone (785) 748-1235
Mailing Address (Street, City, State, Zip Code) Business Telephone 4621 TRAFL (CD. LAWRENCE, KS 6684)	
TREASURER	
Name Rex Gardner	Home Telephone (785) 748-1235
Mailing Address (Street, City, State, Zip Code) Business Telephone 4021 Trail Rol Lawrence, KS 46044()	
AFFILIATED OR CONNECTED ORGANIZATIONS	
Name	
Mailing Address (Street, City, State, Zip Code)	
If not connected or affiliated with an organization, identify the tra Our mission is to stop Governor sa any more damage to our state a	m Brownback from doing
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.	
4/9/4	Hard.
(Date) (Signati	ure of Chairperson)
Governmental Ethics Commission	Rev.2000