

# 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

**FILED**

NOV 02 2016

KRIS W. KOBACH  
SECRETARY OF STATE

### COMMITTEE

(PLEASE TYPE OR PRINT)

Name Kansas Nurse Anesthetists Association (KANA)

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

Business Telephone  
( 785 ) 506-8795

### CHAIRPERSON

Name Jeff Glasgow

Home Telephone  
( 785 ) 393-2872

Mailing Address (Street, City, State, Zip Code)  
5109 Kingsmill Road, Lawrence, KS 66047

Business Telephone  
( )

### TREASURER

Name Ruth Morris

Home Telephone  
( 913 ) 681-2457

Mailing Address (Street, City, State, Zip Code)  
10437 W 125th Terrace, Overland Park, KS 66213

Business Telephone  
( 913 ) 302-6073

### AFFILIATED OR CONNECTED ORGANIZATIONS

Name

Mailing Address (Street, City, State, Zip Code)

If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors.  
The members are nurse anesthetists who contribute and are interested in issues related to their profession and their scope of practice.

### 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."

10/27/16

(Date)

  
(Signature of Chairperson)

# STATEMENT OF ORGANIZATION

## FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

RECEIVED

JUN 22 2016

(See Reverse Side For Instructions)

KS Governmental Ethics Commission

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 Association of Nurse Anesthetists (KANA PAC)  
(KANA PAC)

Mailing Address (Street, City, State, Zip Code) 825 South Kansas Ave, Suite 500  
Leavenworth, KS 66042 Business Telephone (785) 626-8795

### CHAIRPERSON

Name Jeffrey W. Glasgow Home Telephone (785) 393-2872

Mailing Address (Street, City, State, Zip Code) SAME Business Telephone ( )

### TREASURER

Name Rebecca Lucke Home Telephone (316) 258-1448

Mailing Address (Street, City, State, Zip Code) SAME Business Telephone ( )

### AFFILIATED OR CONNECTED ORGANIZATIONS

Name American Association of Nurse Anesthetists (AANA)

Mailing Address (Street, City, State, Zip Code) 222 South Prospect, Park Ridge, IL 60068  
4037

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### 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."

6/22/14  
(Date)

Jeffrey W. Glasgow  
(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

RECEIVED  
FEB 04 2013  
KS Governmental Ethics Commission

COMMITTEE (PLEASE TYPE OR PRINT)

Name Kansas Association of Nurse Anesthetists CRNA PAC	
Mailing Address (Street, City, State, Zip Code) 1127 West 8th, Newton, KS 67114	Business Telephone ( 316 ) 288-6458

CHAIRPERSON

Name Jeff Glasgow CRNA	
Home Telephone ( 785 ) 393-2872	
Mailing Address (Street, City, State, Zip Code) 1005 Stonecreek Drive, Lawrence, KS 66049	Business Telephone ( 785 ) 393-2872

TREASURER

Name Ruth Morris	
Home Telephone ( 913 ) 302-6073	
Mailing Address (Street, City, State, Zip Code) 10437 W 125th Terr, Overland Park, KS 66213	Business Telephone ( 913 ) 302-6073

AFFILIATED OR CONNECTED ORGANIZATIONS

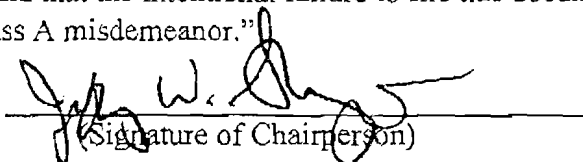
Name Kansas Association of Nurse Anesthetists	
Mailing Address (Street, City, State, Zip Code) 1127 West 8th, Newton, KS 67114	

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02/04/2013  
(Date)

  
(Signature of Chairperson)