## STATEMENT OF ORGANIZATION

FOR POL	TICAL ACT	ION COMMIT	TEES AND PARTY,	SCONTINE ISTERUEN
00 2014 —		(See Reverse Side	For Instructions)	107 9 0 701¢
JUL 3 0 2014 T	his is a (check one)	Party Committe	ee 🛛 Political Action Com	E
ernmental Ethics Comp	กเรรเอก his is an (check one)	Initial Stateme	nt Amended Statement	Beceined
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COMMITTEE		(PLEASE TYPE	OR PRINT)	·
Name Kans	as Citi	zens For	Life	
Mailing Address	Street, City, State dshaw Le	e, Zip Code) ne xa, KS b	Business Tele	phone 7-768/
CHAIRPERSON	,			•
Name N			Home Telepho	ne
Doug	$ \cup$ $0$ $N_{X}$	15on		707-768/cel
Mailing Address (8513 Bro	Street, City, State	e, Zip Code) Leneva, HS	Business Tele 66215 (913) 31	phone
TREASURER				
Name			Home Telepho	ne
Sam	e as ab	ove	( )	
Mailing Address (	Street, City, State	e, Zip Code)	Business Tele	phone
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	CONNECTED (	ORGANIZATIONS	<del></del>	· · · · · · · · · · · · · · · · · · ·
Name	N/12	•	•	•
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Mailing Address (	Street, City, State	;, Zip Code)		
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If not connected or a	ffiliated with an or	ganization, identify th	e trade, profession, or primary	interest of the contributor
		Abortion		
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SIGNATURE:			14 41 - 1 - 4 - 6 1 1	1 1
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	ng a raise docum		district.	
1/50/19		Nou	plance John	rar_
(Date) '		(Sig	dature of Chairperson)	
0 (1501)	cs Commission			Rev.200