

RECEIVED

STATEMENT OF ORGANIZATION

AUG 05 2016

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

KS Governmental Ethics Commission

(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

COMMITTEE (PLEASE TYPE OR PRINT)

Name	Bleeding Kansas Advocates PAC	
Mailing Address (Street, City, State, Zip Code)	PO BOX 19426 Lenexa, KS 66285	
Business Telephone	(913) 396-9675	

CHAIRPERSON

Name	Lisa Sublett	Home Telephone	(913) 605-0238
Mailing Address (Street, City, State, Zip Code)	12416 W. 102 <sup>nd</sup> St. Lenexa, KS 66215		
Business Telephone	(913) 396-9675		

TREASURER

Name	Ric Koehn	Home Telephone	(720) 235-2854
Mailing Address (Street, City, State, Zip Code)	PO BOX 468 Cimarron, KS 67835		
Business Telephone			

AFFILIATED OR CONNECTED ORGANIZATIONS

Name	Bleeding Kansas Advocates, Inc
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.

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."

7/28/16  
(Date)

*Lisa Sublett*  
(Signature of Chairperson)