

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

COMMITTEE

(PLEASE TYPE OR PRINT)

Name	Kansans for Quality Mental Health	
Mailing Address (Street, City, State, Zip Code)	502 W. 30th Hays, Kansas 67601	Business Telephone (785) 628-2871

CHAIRPERSON

Name	Walter Hill	Home Telephone (785) 621-2094
Mailing Address (Street, City, State, Zip Code)	502 W. 30th Hays, Kansas 67601	Business Telephone (785) 628-2871

TREASURER

Name	Randy Callstrom	Home Telephone (913) 671-8508
Mailing Address (Street, City, State, Zip Code)	7353 Falmouth Prairie Village, Kansas 66208	Business Telephone (913) 233-3300

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.
Mental Health

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."

7-15-2014
(Date)

Walter Hill
(Signature of Chairperson)