FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

		(See Reverse Side F	For Instru	ctions)	ar 1900 miles
	This is a (check one)	Party Committee	e 🗸	Political Action Committee	ECEIVED
	This is an (check one)	Initial Statemer	nt 🗸	Amended Statement	DCT 1 6 2018
COMMITTEE		(PLEASE TYPE	OR PRIN	NT) KS Go	vernmental Ethics Commission
Name MAIN	Street Kansas PAC				
Mailing Addre PO Box 451	ess (Street, City, State, 2	Zip Code)		Business Telephone	2
CHAIRPERSO	ON				
Name Travis	Oliver			Home Telephone	
	ess (Street, City, State, Street, Lawrence; K			Business Telephone	÷
TREASURER					
Name	er Baysinger			Home Telephone	
Mailing Addre	ess (Street, City, State, peka Blvd; Topeka,	Zip Code) KS 66612		Business Telephone	;
AFFILIATED	OR CONNECTED O	RGANIZATIONS			
Name Kansa:	s Chamber of Comm	nerce			
_	ss (Street, City, State, beka Blvd; Topeka, K			-	
If not connected of	or affiliated with an orga	nnization, identify the	trade, pro	ofession, or primary interes	est of the contributors.
SIGNATURE:					
		examined by me ar	nd to the b	est of my knowledge a	nd
				al failure to file this doc	cument
or intentionally	filing a false documen	nt is a class A misde	meanor."		
(Data)	<u> </u>	(0)	Ba	MM// Champerson)	
Governmental E	ithias Commission	Gigi	iatule of	Cuarperson	D ~~ 2000
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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 MAIN' Street Kansas PAC
Mailing Address (Street, City, State, Zip Code) PO Box 4512, Olathe, K5 66063 (2007)
CHAIRPERSON
Name Travis Oliver Home Telephone
Mailing Address (Street, City, State, Zip Code) Business Telephone 3801 W 6th Street, Lawrence
TREASURER 66099
Name Jenniser Baysinger ()
Mailing Address (Street, City, State, Zip Code) POBOX 781717 Wichita 67206) Business Telephone
AFFILIATED OR CONNECTED ORGANIZATIONS
Name Kansas Chamber of Commerce
Mailing Address (Street, City, State, Zip Code) 835 SW Topeka Blvd, Topeka, KS 66612
If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributor
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."
(Date) Signature of Chairperson)
Governmental Ethics Commission Rev.200

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

(See Reverse Side For Instructions)					
	This is a (check one)	Party Committee	Political A	ction Committee	
;	This is an (check one)	Initial Statement	Amended	Statement	
COMMITTEE		(PLEASE TYPE	OR PRINT)		
\	Street Kansas Politi				
	ss (Street, City, State, 717, Wichita, KS 6		Busii (ness Telephone)	
CHAIRPERSO)NN				
Name Travis	Oliver		Home	Telephone)	
	ss (Street, City, State, Street, Lawrence, K		Busii (ness Telephone)	
TREASURER					
Name Jennife	er Baysinger		Home (Telephone)	
Mailing Addre PO Box 78	ss (Street, City, State, 1717, Wichita, KS 6	Zip Code) 37 20 6	Busii (ness Telephone)	
AFFILIATED	OR CONNECTED O	RGANIZATIONS			
Name Kansa	s Chamber of Comr	nerce			
)	ss (Street, City, State, eka Blvd, Topeka, I	• '			
If not connected	or affiliated with an org	anization, identify the	trade, profession, o	or primary interest	of the contributors.
belief is true, co or intentionally	his statement has been prrect and complete. I filing a false docume	understand that the	ntentional failure	•	
$\frac{7-13-1}{\text{(Date)}}$		(Sign	ature of Chairpers	son)	
	thics Commission	(~1811		,	Rev.2000

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES.

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		(See Reverse Side For			•
	This is a (check one)	Party Committee	V	Political Action Committee	
	This is an (check one)	Initial Statement	V	Amended Statement	
COMMITTEE		(PLEASE TYPE OI	R PRII	NT)	
Name MAIN	Street Kansas Politi	cal Action Committee	е		
	ss (Street, City, State, 717, Wichita, KS 67			Business Telephone	
CHAIRPERSC	ON				
Name Travis	Oliver			Home Telephone ()	
	ss (Street, City, State, 6th Street; Lawrence			Business Telephone	
TREASURER					
Name Rebec	ca McCormack			Home Telephone	_
Mailing Addres	ss (Street, City, State, 1717, Wichita, KS 6	Zip Code) 7206		Business Telephone	
AFFILIATED	OR CONNECTED O	RGANIZATIONS			
Name	s Chamber of Comr				
Mailing Addres	ss (Street, City, State, eka Blvd	Zip Code)			
If not connected o	or affiliated with an orga	anization, identify the tra	de, pro	ofession, or primary interest of t	the contributors.
belief is true, co	rrect and complete. I filing a false documer	understand that the int it is a class A misdeine	ention:	pest of my knowledge and al failure to file this documen	ıt
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