

FILED

APR 19 2016

KRISTIN KOBACH  
SECRETARY OF STATE

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 checked="" type="checkbox"/> Amended Statement

COMMITTEE (PLEASE TYPE OR PRINT)

Name	Credit Union PAC of Kansas	
Mailing Address (Street, City, State, Zip Code)	901 SW Topeka Blvd, Topeka, KS 66612	Business Telephone ( 800 ) 392-3074

CHAIRPERSON

Name	Michael Augustine	Home Telephone ( )
Mailing Address (Street, City, State, Zip Code)	690 Eisenhower Road, Leavenworth, KS 66048	Business Telephone ( 913 ) 651-6575

TREASURER

Name	Haley DaVee	Home Telephone ( )
Mailing Address (Street, City, State, Zip Code)	901 SW Topeka Blvd, Topeka, KS 66612	Business Telephone ( 800 ) 392-3074

AFFILIATED OR CONNECTED ORGANIZATIONS

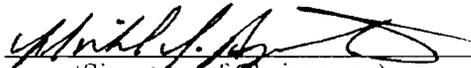
Name	Heartland Credit Union Association (formerly Kansas Credit Union Association)	
Mailing Address (Street, City, State, Zip Code)	901 SW Topeka Blvd, Topeka, KS 66612	

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."

4/18/14  
(Date)

  
(Signature of Chairperson)