

STATEMENT OF ORGANIZATION

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JUL 24 2017

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 SOUTH CENTRAL Ks NEA EDUCATOR PAC

Mailing Address (Street, City, State, Zip Code) 7701 E KELLOGG, SUITE 880, WICHITA KS 67207 Business Telephone (316) 685-2397

CHAIRPERSON

Name SHELLEY BALLARD Home Telephone (316) 253-4473

Mailing Address (Street, City, State, Zip Code) 6030 W DRIFTWOOD CT, WICHITA KS 67205 Business Telephone () ()

TREASURER

Name DEBRA A HELBERG Home Telephone (316) 640-6398

Mailing Address (Street, City, State, Zip Code) 1717 W 125th St N, SEDGWICK, KS 67135 Business Telephone () ()

AFFILIATED OR CONNECTED ORGANIZATIONS

Name KANSAS NATIONAL EDUCATION ASSOCIATION

Mailing Address (Street, City, State, Zip Code) 7701 E KELLOGG, SUITE 880, WICHITA, KS 67207

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."

7/20/17
(Date)

[Signature]
(Signature of Chairperson)