

### 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

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JUN 05 2017

KS Governmental Ethics Commission

#### COMMITTEE (PLEASE TYPE OR PRINT)

Name PMCA GASPAC	
Mailing Address (Street, City, State, Zip Code) PO BOX 678, TOPEKA, KS 66601	Business Telephone ( 785 ) 233-9655

#### CHAIRPERSON

Name THOMAS M PALACE	Home Telephone ( 785 ) 233-9655
Mailing Address (Street, City, State, Zip Code) PO BOX 678, TOPEKA, KS 66601	Business Telephone ( 785 ) 233-9655

#### TREASURER

Name MARVIN G SPEES	Home Telephone ( 785 ) 633-1490
Mailing Address (Street, City, State, Zip Code) PO BOX 678, TOPEKA, KS 66601	Business Telephone ( 785 ) 633-1490

#### AFFILIATED OR CONNECTED ORGANIZATIONS

Name PETROLEUM MARKET AND CONVENIENCE STORE ASSOCIATION
Mailing Address (Street, City, State, Zip Code) PO BOX 678, TOPEKA, KS 66601

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."

7/5/17  
(Date)

*Thomas M. Palace*  
(Signature of Chairperson)