

[Print this form](#) or [Go Back](#)



**Campaign Finance  
Statement of Organization  
For Political Action Committees  
And Party Committees**

Governmental Ethics Commission  
901 S. Kansas Ave.  
Topeka, KS 66612  
Office (785) 296-4219  
Fax (785) 296-2548  
ethics.kansas.gov

This is a (Check one)  Party Committee  PAC

This is an (Check one)  Initial Appointment  Amended Statement

**Committee** Name: **Bleeding Kansas Advocates PAC**  
Address: **12812 Charing Cross Road Apt 2**  
Address2:  
City: **Lenexa** State: **KS** Zip: **66215**  
Business Phone: **(913) 396-9675**  
Email Address: **bkapacinfo@gmail.com**

**Chairperson** Name: **Lisa Sublett**  
Address: **12812 Charing Cross Road Apt 2**  
Address2:  
City: **Lenexa** State: **KS** Zip: **66215**  
Home Telephone: **(913) 605-0238** Business Phone: **(913) 396-9675**  
Email Address: **president@bleedingks.org**

**Treasurer** Name: **Ric Koehn**  
Address: **P.O. Box 468 Cimarron, Ks 67835**  
Address2:  
City: **Cimarron** State: **KS** Zip: **67835**  
Home Telephone: **(620) 255-2854** Business Phone: **(620) 255-2854**  
Email Address: **ric.koehn@gmail.com**

**Affiliated or Connected Organizations** Name: **Bleeding Kansas Advocates, Inc**  
Address: **PO Box 19426, Lenexa, KS 66285**  
Address2:  
City: **Lenexa** State: **KS** Zip: **66285**

If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors.

**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.**

Executed on:

Date: **4/23/2019 2:17:17 PM** Signature of Chairperson: **Lisa Sublett**

[Print this form](#) or [Go Back](#)