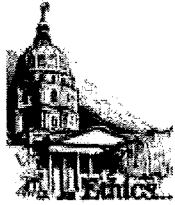


[Print this form](#) or [Go Back](#)



**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: **Kansans for Life State Political Action Committee**

Address: **PO Box 4749**

Address2:

City: **Wichita** State: **KS** Zip: **67204**

Business Phone: **(800) 928-5433**

Email Address: **pac@kfl.org**

Chairperson Name: **Timothy Hand**

Address: **P.O. Box 4749**

Address2:

City: **Wichita** State: **KS** Zip: **67204**

Home Telephone: Business Phone:

Email Address: **pac@kfl.org**

Treasurer Name: **Melanie Bacon**

Address: **460 E. Santa Fe St.**

Address2: **Ste. B**

City: **Olathe** State: **KS** Zip: **66061**

Home Telephone: Business Phone:

Email Address: **baconcpa@aol.com**

Affiliated or Name: **Kansans for Life, Inc.**

Connected Address: **3301 W. 13th St.**

Organizations Address2:

City: **Wichita** State: **KS** Zip: **67203**

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: **6/9/2021 2:47:52 PM** Signature of Chairperson: **Timothy Hand**

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