

[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: **Family Farmer PAC**  
Address: **842 S. 10th**  
Address2:  
City: **Salina** State: **KS** Zip: **67401**  
Business Phone: **(785) 825-8649**  
Email Address: **jastephens3@cox.net**

**Chairperson** Name: **Greg Stephens**  
Address: **842 South 10th**  
Address2:  
City: **Salina** State: **KS** Zip: **67401**  
Home Telephone: Business Phone: **(785) 819-6887**  
Email Address: **greg67401@gmail.com**

**Treasurer** Name: **Julie Stephens**  
Address: **842 South 10th**  
Address2:  
City: **Salina** State: **KS** Zip: **67401**  
Home Telephone: **(785) 825-8649** Business Phone: **(785) 825-8649**  
Email Address: **jastephens3@cox.net**

**Affiliated or Connected Organizations** Name:  
Address:  
Address2:  
City: State: Zip:  
If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors.  
**agriculture**

**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: **7/2/2022 10:09:49 PM** Signature of Chairperson: **Greg Stephens**

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

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



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

Governmental Ethics Commission  
109 W. 9th, Suite 504  
Topeka, KS 66612  
Phone (785) 296-4219  
Fax (785) 296-2548  
www.kansas.gov/ethics

This is a (Check one)  Party Committee  PAC

This is an (Check one)  Initial Appointment  Amended Statement

**Committee**

Name: **Independent Family Farmer PAC**  
Address: **842 S. 10th**  
Address2:  
City: **Salina** State: **KS** Zip: **67420**  
Business Phone: **(785) 825-8649**  
Email Address: **jastephens3@cox.net**

**Chairperson**

Name: **Pete Lorenz**  
Address: **616 E. Court**  
Address2:  
City: **Beloit** State: **KS** Zip: **67420**  
Home Telephone: **(785) 738-2113** Business Phone: **(785) 738-2113**  
Email Address: **gregs3@cox.net**

**Treasurer**

Name: **Julie Stephens**  
Address: **842 S. 10th**  
Address2:  
City: **Salina** State: **KS** Zip: **67401**  
Home Telephone: **(785) 825-8649** Business Phone: **(785) 819-0040**  
Email Address: **jastephens3@cox.net**

**Affiliated or Connected  
Organizations**

Name:  
Address:  
Address2:  
City: State: Zip:  
If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors.  
**Independent Kansas farmers, family agriculture.**

**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: **7/22/2016 12:01:51 PM** Signature of Chairperson: **Pete Lorenz**

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