

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

RECEIVED
JUN 27 2022
KS Governmental Ethics Commission

COMMITTEE (PLEASE TYPE OR PRINT)

Name	Kansas Hospital Association Political Action Committee		
Mailing Address (Street, City, State, Zip Code)	215 S.E. Eighth Ave. Topeka, KS 66603		Business Telephone (785) 233-7436

CHAIRPERSON

Name	Chad Austin	Home Telephone (785) 213-0904	
Mailing Address (Street, City, State, Zip Code)	215 S.E. Eighth Ave. Topeka, KS 66603		Business Telephone (785) 233-7436

TREASURER

Name	Audrey Dunkel	Home Telephone (785) 221-8789	
Mailing Address (Street, City, State, Zip Code)	215 S.E. Eighth Ave. Topeka, KS 66603		Business Telephone (785) 233-7436

AFFILIATED OR CONNECTED ORGANIZATIONS

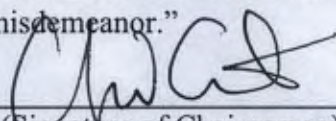
Name			
Mailing Address (Street, City, State, Zip Code)			

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."

6-22-22
(Date)


(Signature of Chairperson)