| STATEMENT OF ORGA | NIZATION TO COMMITTEES |
|---|---|
| FOR POLITICAL ACTION COMMITTEES | AND LAKT L COMMITTIES |
| (See Reverse Side For Instr This is a (check one) This is an (check one) Initial Statement | uctions) Political Action Committee Amended Statement |
| COMMITTEE (PLEASE TYPE OR PRI | NT) |
| Mailing Address (Street, City, State, Zip Code) 211 U)est Gartield Anthony, Ks 167003 | mmi Hee Business Telephone (420) 842-5758 |
| Name Ron Poor Mailing Address (Street, City, State, Zip Code) | Home Telephone (420) 842-2283 Business Telephone |
| TREASURER Name | (428) 842-5599 Home Telephone |
| Sherry Struble Mailing Address (Street, City, State, Zip Code) PD Box 163 Anthony, 185 67003 | $\frac{(620)842-2385}{842-374/}$ Business Telephone |
| AFFILIATED OR CONNECTED ORGANIZATIONS | |
| Name Mailing Address (Street, City, State, Zip Code) | |
| f not connected or affiliated with an organization, identify the trade, pr | ofession, or primary interest of the contributors. |
| SIGNATURE: "I declare that this statement has been examined by me and to the belief is true, correct and complete. I understand that the intention or intentionally filing a false document is a class A misdemeanor. | nal failure to file this document |
| 7/24/2017 (Signature of | Chairperson) |
| Governmental Ethics Commission | Rev.2000 |