

RECEIVED

STATEMENT OF ORGANIZATION

SEP 30 2010

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

(See Reverse Side For Instructions)

This is a (check one)	<input checked="" type="checkbox"/> Party Committee	<input type="checkbox"/> Political Action Committee
This is an (check one)	<input type="checkbox"/> Initial Statement	<input checked="" type="checkbox"/> Amended Statement

COMMITTEE

(PLEASE TYPE OR PRINT)

Name	Reform Party of Kansas	
Mailing Address (Street, City, State, Zip Code)	Business Telephone	
11530 N. Rock Rd, Valley Center, KS 67147	(316)	573-3231

CHAIRPERSON

Name	Derek Langseth	Home Telephone	(316) 573-3231
Mailing Address (Street, City, State, Zip Code)	Business Telephone		
11530 N. Rock Rd., Valley Center, KS 67147	()		

TREASURER

Name	Tony Mattia	Home Telephone	(785) 456-8144
Mailing Address (Street, City, State, Zip Code)	Business Telephone		
203 Ruths Ln, Wamego, KS 66547	(785)	456-8513	

AFFILIATED OR CONNECTED ORGANIZATIONS

Name	Reform Party (National)		
Mailing Address (Street, City, State, Zip Code)	PO BOX 19, Monroe, CT, 06468		

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."

9-29-2010
(Date)

Derek Langseth
(Signature of Chairperson)