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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) FEDERAL HOME LOAN BANK OF TOPEKA PAC ONE SECURITY BENEFIT PL SUITE 100 ADDRESS (number and street) (Check if address is changed) **TOPEKA** 66606 KS CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS eric.haar@fhlbtopeka.com (Check if address is changed) Optional Second E-Mail Address matt.koupal@fhlbtopeka.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 04 2013 C00410720 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Mr. Eric T Haar Type or Print Name of Treasurer Mr. Eric T Haar [Electronically Filed] 01 2013 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission

Use Toll Free 800-424-9530 Only Local 202-694-1100

(Revised 06/2012)

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		COMMITTEE Committee:				
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)				
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)				
Nam Can	e of didate					
	didate / Affiliati	on Sought: House Senate President	State			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Nam Cand	e of didate					
Par	ty Con	nmittee:	D			
(d)		, , , ,	Democratic, Republican, etc.) Party.			
Poli	tical A	action Committee (PAC):				
(e)	\times	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	ected organization is a			
		Corporation Corporation w/o Capital Stock	Labor Organization			
		Membership Organization Trade Association	Cooperative			
		In addition, this committee is a Lobbyist/Registrant PAC.				
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)				
		In addition, this committee is a Lobbyist/Registrant PAC.				
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)				
Join	t Fund	draising Representative:				
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political			
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political			
	Com	mittees Participating in Joint Fundraiser				
	1.	FEC ID number				
	2.	FEC ID number				
	3.	FEC ID number				
	1					

Title or Position GR Officer

		_					
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Write or Type Committee Name							
FEDERAL HOM	ME LOAN BANK OF TOPEKA PAC						
6. Name of Any Connected C	Organization, Affiliated Committee, Joint Fundraising Representative, or Leaders	ship PAC Sponsor					
FEDERAL HOME LOA	AN BANK OF TOPEKA PAC						
Mailing Address	ONE SECURITY BENEFIT PL SUITE 100						
	TOPEKA KS 66606						
	CITY STATE	ZIP CODE					
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.							
Mr. Eric T	Haar	1					
Full Name	One SW Security Benefit Place						
Mailing Address							
	Topeka KS 66606						
Title or Position	CITY STATE	ZIP CODE					
Vice President		438 - 6010					
3. Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the national satisfactory.	ame and address of					
Full Name Mr. Eric T I	Haar						
Mailing Address	One SW Security Benefit Place						
		<u></u>					
	Topeka						

CITY

STATE

Telephone number

785

ZIP CODE

6010

438

9.

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Full Name of Designated Agent							
Mailing Address							
	CITY	STATE	ZIP CODE				
Title or Position	1	. 1 1					
	Teleph	none number					
safety deposit boxes or ma Name of Bank, Depository,		committee deposits funds, h	olds accounts, rents				
		140 0004					
	Topeka	KS 6661	1				
	CITY	STATE	ZIP CODE				
Name of Bank, Depository, etc.							
Mailing Address							
	CITY	STATE	ZIP CODE				

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: 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ 5 H98 'HC '5 'F9 DC FHZ G7 < 98 I @ 'C F' + H9 A = N5 H+ C B

Form/Schedule: F1N Transaction ID:

The committee wishes to receive communication via email.

Form/Schedule: Transaction ID: