FEC FORM 1

STATEMENT OF ORGANIZATION

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Office Use Only

1. NAME OF COMMITTEE (in full) [ ] (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

Lathrop & Gage LC Political Action Committee

ADDRESS (number and street) ▼ 2345 Grand Boulevard

[ ] (Check if address is changed) Suite 2800

Kansas City MO 64108-2612

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

mschnitker@lathropgage.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.lathropgage.com

COMMITTEE'S FAX NUMBER

816-292-2001

2. DATE MM DD YYYY

3. FEC IDENTIFICATION NUMBER ▶ C

4. IS THIS STATEMENT [ ] NEW (N) OR [X] 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.

Type or Print Name of Treasurer Michael K. Schnitker

Signature of Treasurer Michael K. Schnitker Date 09 11 2007

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.

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For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 02/2003)

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5. TYPE OF COMMITTEE (Check One)

(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.)

Name of Candidate

Candidate Party Affiliation

Office Sought: ☐ House ☐ Senate ☐ President

State

District

(c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

(d) ☐ This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

(e) ☐ This committee is a separate segregated fund.

(f) ☒ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. **Name of Any Connected Organization or Affiliated Committee**

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship

Type of Connected Organization:

☐ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization

☐ Membership Organization ☐ Trade Association ☐ Cooperative

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Write or Type Committee Name

Lathrop & Gage LC Political Action Committee

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name: Michael Schnitker

Mailing Address: 2345 Grand Boulevard
Suite 2800
Kansas City MO 64108-2612

Title or Position ▼: Chief Financial Officer

CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number: 816-292-2000

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer: Michael Schnitker

Mailing Address: 2345 Grand Boulevard
Suite 2800
Kansas City MO 64108-2612

Title or Position ▼: Chief Financial Officer

CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number: 816-292-2000

Full Name of Designated Agent: Carma Baldwin

Mailing Address: 2345 Grand Boulevard
Suite 2800
Kansas City MO 64108-2612

Title or Position ▼: Controller

CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number: 816-292-2000

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9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Bank of America

Mailing Address 1200 Main Street

Kansas city MO 64105 -

CITY ▲ STATE ▲ ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

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Federal Election Commission
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(3/2005)

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