

dprageriii@cox.net

**David Prager, III**  
Attorney at Law  
3929 S.W. Friar Road  
Topeka, Kansas 66610

RECEIVED  
2012 JUN 27 AM 11:27  
(785) 554-6768 (cell)  
FEC MAIL CENTER

June 26, 2012

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Re: Filing of FEC Form 1 and 2 for Robert V. Eye U.S. House Campaign.

Dear Sirs:

Please file the enclosed forms on behalf of the Robert V. Eye campaign for U.S. House. Please inform me as soon as possible of the FEC Identification Number issued for his campaign by email to [dprageriii@cox.net](mailto:dprageriii@cox.net).

If you have any questions, please contact me at the above number. I am the Treasurer for this campaign.

Sincerely,

A handwritten signature in cursive script that reads "David Prager, III". The signature is written in black ink and is positioned above the printed name.

David Prager, III

12030824371

FEC  
FORM 1

STATEMENT OF  
ORGANIZATION

RECEIVED

2012 JUN 27 AM 11:27

FEC MAIL CENTER  
Office Use Only

1. NAME OF  
COMMITTEE (in full)

(Check if name  
is changed)

Example: If typing, type  
over the lines.

12FE4M5

Bob Eye for Congress, Inc.

ADDRESS (number and street)

123 SE 6th St., Suite 200

(Check if address  
is changed)

Topeka

KS

66603

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address  
is changed)

dprageriii@cox.net

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address  
is changed)

2. DATE

06

18

2012

3. FEC IDENTIFICATION NUMBER

C

4. 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.

Type or Print Name of Treasurer

David Prager, III

Signature of Treasurer

*David Prager, III*

Date

06

26

2012

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  
Use  
Only

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

FEC FORM 1  
(Revised 02/2009)

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5. TYPE OF COMMITTEE

Candidate 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.)

Name of Candidate **Robert V. Eye**

Candidate Party Affiliation **DEM** Office Sought:  House  Senate  President State **KS** District **02**

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

Name of Candidate

Party Committee:

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

Political Action Committee (PAC):

- (e)  This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected 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.)

Joint Fundraising Representative:

- (g)  This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h)  This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1.	<input type="text"/>	FEC ID number	<input type="text"/>
2.	<input type="text"/>	FEC ID number	<input type="text"/>
3.	<input type="text"/>	FEC ID number	<input type="text"/>
4.	<input type="text"/>	FEC ID number	<input type="text"/>

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Write or Type Committee Name

Bob Eye for Congress, Inc.

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

None

Mailing Address

CITY

STATE

ZIP CODE

Relationship:  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponsor

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

Stephanie Bales

Mailing Address

123 SE 6th St., Suite 200

Topeka

KS

66603

Title or Position

CITY

STATE

ZIP CODE

Legal Assistant

Telephone number

785

234

4040

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

David Prager, III

Mailing Address

3929 SW Friar Rd.

Topeka

KS

66610

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number

785

554

6768

12030824374

Full Name of Designated Agent

Kelly J. Kauffman

Mailing Address

123 SE 6th St., Suite 200

Topeka

CITY

KS

STATE

66603

ZIP CODE

Title or Position

Assistant Treasurer

Telephone number

785

234

4040

- 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.

Capital City Bank

Mailing Address

120 SW 6th St.

Topeka

CITY

KS

STATE

66603

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

12030824375

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked  
Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked  
6/26/12

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date  
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

  
PREPARER

6/27/12  
DATE PREPARED

92542805021