Image# 201601319005199536				
FEC FORM 1	STATEMEN ORGANIZ	_		PAGE 1 / 4
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
KANSANS FOR				
ADDRESS (number and street)	11310 E 21ST NORTH SUITE	E G		
(Check if address is changed)	PMB #51			
<i>,</i>			KS 67	206
	CITY 🔺		STATE 🔺	ZIP CODE▲
COMMITTEE'S E-MAIL ADDRE				
 (Check if address is changed) 	fec@kansansforrespor	siblegovernment.com		
	Optional Second E-Mail Add			
COMMITTEE'S WEB PAGE AD (Check if address is changed)	DRESS (URL)	ment.com		
2. DATE 01 / 23				
3. FEC IDENTIFICATION N	JMBER ► C C	00563296		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined th	nis Statement and to the best	of my knowledge and belief it	t is true, correct an	d complete.
Type or Print Name of Treasure	r Willis Hartman			
Signature of Treasurer	Hartman	[Electronically Filed]	Date 01	/ D D / Y Y Y Y 31 2016
NOTE: Submission of false, erron		may subject the person signing ON SHOULD BE REPORTED V		e penalties of 2 U.S.C. §437g.
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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FEC FC	orm 1 (Revised 02/2009)	Page 2
TYPE OF (COMMITTEE	
Candidat	e 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. (Compleinformation below.)	te the candidate
Name of Candidate		
Candidate Party Affiliat	tion Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Co	mmittee:	
(d)		emocratic, publican, etc.) Party
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conne	cted organization is
	Corporation Corporation w/o Capital Stock	abor Organization
	Membership Organization	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 segre committee. (i.e., nonconnected committee)	egated fund or part
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fun	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.	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
Con	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.	FEC ID number	

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FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

KANSANS FOR RESPONSIBLE GOVERNMENT

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

N				
	Mailing Address			
				-
		CITY	STATE	ZIP CODE
	Relationship: Connected	Organization Affiliated Committee	oint Fundraising Representat	Leadership PAC Sponsor
7.	Custodian of Records: Ident books and records.	ify by name, address (phone number opt	ional) and position of the pe	erson in possession of committee
	Shannon O	'Leary		
		PO Box 341016		
	Mailing Address			
		•		.78734
	Title or Position	CITY	STATE	ZIP CODE
	Custodian of Records		Telephone number	LL
8.	Treasurer: List the name and any designated agent (e.g., as	address (phone number optional) of the ssistant treasurer).	treasurer of the committee;	and the name and address of
	Full Name Willis Hartment of Treasurer Image: Construction of the second se	an 		
	Mailing Address	10500 E. Berkeley Square Parkway		
		Ste 100		
		Wichita	KS	67206
		CITY	STATE	ZIP CODE
	Title or Position Treasurer		Telephone number	

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent	Shannon O	'Leary							I		I	1								I				
Mailing Address		PO Box 3	41016																					
		Austin												Ľ	X 		_ ⁷	873	84 			-		
				(CITY	(Ś	STA	ΤE					ZIF	Р С	OD	E	
Title or Position	urer								Tele	pho	one	nu	ımb	er] – [

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.

	Wells Fargo Bank NA		
Mailing Address	PO Box 6995		
	Portland	OR 97228	
	CITY	STATE ZIP CODE	
Name of Bank, D	epository, etc.		
Mailing Address			
	CITY	STATE ZIP CODE	